

July 23, 2019

The Honorable Roy Blunt
Chairman
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Subcommittee on Labor, Health and Human
Services, Education, and Related Agencies
Committee on Appropriations
United States Senate
Washington, DC 20510

Dear Chairman Blunt and Ranking Member Murray:

As the Subcommittee is expected to draft shortly its version of the Fiscal Year 2020 Department of Labor, Health and Human Services, and Education, and Related Agencies (LHHS) Appropriations bill, on behalf of the American College of Physicians (ACP), I encourage you to support and make the needed investments in vital federal programs and initiatives designed to improve the health outcomes of women and families while also removing barriers to care that interfere with the patient-physician relationship. ACP strongly opposes the Department of Health and Human Services' (HHS) revised regulations of the Title X program because they greatly curtail access to evidence-based family-planning, all forms of medically accepted contraception, and prohibit discussing or providing referrals for abortion services to patients. Therefore, I must urge you to use the language in the House of Representatives' passed FY2020 LHHS Appropriations bill that increases resources for the Title X program and prohibits funding to implement the HHS final rule in the Senate version of the FY2020 LHHS Appropriations bill.

ACP is the largest medical specialty organization and the second-largest physician group in the United States. ACP members include 159,000 internal medicine physicians (internists), related subspecialists, and medical students. Internal medicine physicians are specialists who apply scientific knowledge and clinical expertise to the diagnosis, treatment, and compassionate care of adults across the spectrum from health to complex illness.

The College opposes regulatory restrictions that would deny or result in discrimination in the awarding of federal funding to women's health clinics that are qualified under existing federal law for the provision of evidence-based services including, but not limited to, provision of contraception, preventive-health screenings, sexually transmitted infection testing and treatment, vaccines, counseling, rehabilitation, and referrals. In our July 2018 comment letter on the proposed regulations, ACP made clear that it strongly opposed rule changes to Title X that would make it more difficult for patients seeking contraception and reproductive health-care services to find care. ACP believes these changes will greatly harm the patient-physician relationship by dictating what physicians can or cannot say to their patients as a condition of

receiving federal funding for the clinics in which they provide services. Federal law already prohibits funding of abortion out of federal dollars, and this rule would cut off Title X funding that is used for a number of preventive and medical services offered at these clinics should they decide not to abide by these changes. ACP is also greatly concerned that requiring the physical and financial separation of abortion services provided by entities receiving Title X funding creates immense administrative burden and excessive operating costs for reproductive-health and family-planning facilities that also offer abortion services.

Accordingly, ACP, along with many other national healthcare-organizations respectfully request that you include bill text in the Senate FY2020 LHHS Appropriations bill—the same or similar to the Family Planning provision of Title II, Health Resources and Services Administration of the House-passed FY2020 LHHS Appropriations bill—that would prevent HHS implementation of the final Title X rule. This language, along with \$400 million in funding for the Title X program would protect the almost four million patients, almost 90 percent female, who received clinical services provided by Title X clinics, including contraceptive services, cervical and breast-cancer screenings, pregnancy testing and counseling, testing and treatment for sexually-transmitted diseases and various patient education and referral services in 2017. Eighty-seven percent of these patients had incomes at or below 200 percent of federal poverty, and more than two-thirds were at or below the federal poverty line. For sixty-one percent of patients, Title X clinicians were women's only regular source of health care.

In conclusion, the College is keenly aware of the fiscal pressures facing the subcommittee at this time but strongly believes the United States must invest robustly in healthcare delivery system initiatives that support primary care for women and families, including programs that have a proven track record of effectiveness such as Title X. In addition, regulatory policies that strike directly at the centrality of the patient-physician relationship do not support health and cannot be permitted to move forward. Thank you for your consideration and the College looks forward to working with Congress as you move ahead with the fiscal year 2020 appropriations process.

Sincerely,

Robert M. McLean, MD, FACP

President

CC: Members, Senate Committee on Appropriations; Members, Senate Appropriations Subcommittee on Labor, Health and Human Services, and Education, and Related Agencies