Congress of the United States Washington, DC 20515

April 3, 2025

The Honorable Robert F. Kennedy Jr. 200 Independence Avenue, S.W. Washington, D.C. 20201

Dear Secretary Kennedy,

We write to express our grave concern at the recent actions by the Department of Health and Human Services (HHS) to freeze tens of millions of dollars in funding for the Title X program (Title X), the nation's only federal program dedicated to family planning. Freezing these funds will unquestionably result in the loss of health care for many of the millions of people that Title X supports annually, making our country less healthy.

For almost 50 years, Title X has served as a cornerstone of safety-net care. Championed by then-Congressman George H.W. Bush and signed into law by President Nixon, Title X allows a diverse network of providers to deliver high-quality care to low-income, uninsured, or underinsured individuals confidentially. Title X health centers served 2.8 million people in FY 2023, administering high-quality family planning and sexual health care, including cancer screenings, testing and treatment for sexually transmitted infections, contraceptive services and supplies, pregnancy testing, and other essential health care services. These centers offer care to populations that often face severe structural and systemic barriers to accessing quality health care, including individuals with no or insufficient insurance and rural and underserved communities.

Freezing funds for this essential program will harm communities that otherwise may not have access to care. In 2016, 60% of the women who received birth control from a Title X health center shared that it was their only source of health care the previous year. These health centers are also an essential resource for preventative care in the communities they serve. In 2023, the program provided cervical cancer screenings for more than 430,000 people, and for every dollar spent, these preventive and family planning services save at least seven dollars in later Medicaid expenses. In addition to direct clinical care, Title X also supports critical infrastructure needs for health centers, including new medical equipment and staff training that are not reimbursable under Medicaid and commercial insurance. This infrastructure is vital to ensuring safe, high-quality care at health centers which serve and provide basic health services to underserved populations.

¹ Lord-Biggers, M. & Friedrich-Karnik, A. (2025, February). Features and Benefits of the Title X Program. Guttmacher Institute

We are outraged that reports suggest that this funding is being frozen because of claims that it might support "diversity, equity, and inclusion." This is another way of saying that this program is used to help people of color access care. Nearly half of the people served each year by Title X are people of color, the vast majority are people with low-incomes and most Title X users are women. A federal program's ability to provide care to people from historically marginalized and underserved communities does not make it wrong or illegal. To suggest otherwise implies that HHS would determine who is worthy of taxpayer dollars based on the color of their skin. Congress created Title X to address the needs of underserved populations across our country, regardless of background, and it has demonstrated success in doing so for 50 years.

We urge you to restore all appropriated funding for Title X providers and instead invest fully in the program which has helped people access essential health care for almost 50 years.

On behalf of our 2.8 million constituents and women across the country who depend on Title X's services, we also request a prompt reply to coordinate a meeting on this matter. We look forward to introducing you to the providers, community leaders, and patients from our districts who understand better than anyone else the importance of this program. We hope your agency will not be so reckless as to upend nearly half a century of bipartisan achievement and place Title X on the DOGE chopping block without hearing firsthand the consequences of that action.

Sincerely,

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² Killewald, P., Leith, W., Paxton, N., Rosenthal, I., Troxel, J., Wong, M., & Zief, S. (2024, September). Family planning annual report: 2023 national summary. Office of Population Affairs, Office of the Assistant Secretary for Health, U.S. Department of Health and Human Services

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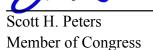
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