

## Compliance Today – August 2023



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### Complying with financial eligibility requirements in the Title X program

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by Robyn Hoffmann

In 1970, Congress enacted Title X of the Public Health (PHS) Act and established the Title X Family Planning Program—the only federal program devoted exclusively to family planning and related preventive healthcare. “It is administered by the Office of Population Affairs (OPA) within the Assistant Secretary for Health (OASH) in the U.S. Department of Health and Human Services (HHS).”<sup>[1]</sup> Title X providers, with an estimated annual budget of \$286.5 million, offer millions of low-income and uninsured Americans with high-quality, client-centered care.

#### Title X services in 2021

Based on statistics reported in the *Title X Family Planning Annual Report 2021 National Summary*, Title X-funded services were implemented through 75 grants to 41 state and local health departments and 34 nonprofit family planning and community health agencies. “Title X funds supported a network of 3,284 service sites operated by either grantees or 899 subrecipients in 44 states, the District of Columbia, and eight U.S. Territories and Freely Associated States.”<sup>[2]</sup> Title X grant recipients and their subrecipients include: Planned Parenthood facilities; federally qualified health centers (FQHCs); school-based health centers; collegiate student health centers; and hospital outpatient departments. To enhance access to services, the OPA hosts an online Family Planning Clinic Locator, which provides links to Title X sites within a 50-mile radius of an address. During 2021, approximately 1.7 million clients received Title X services, which represented an increase of approximately 8% in comparison to 2020.<sup>[3]</sup>

Title X is designed to provide:

- A broad range of acceptable and effective family planning methods and services, including:
  - Natural family planning methods
  - Infertility services
  - Services for adolescents
- Contraceptive education and counseling
- Breast and cervical cancer screening
- Sexually transmitted infection and HIV testing, referral, and prevention education

- Pregnancy diagnosis and counseling.

Title X funds cannot be used by centers where abortion is considered a method of family planning.

## The intersection of Title X and OPA's program priorities

In the Centers for Disease Control and Prevention's (CDC) "Notice of Funding Opportunity," which was used to fund Title X service delivery grants starting on April 1, 2022, for an up to five-year project period, the OPA set forth three program priorities:

1. Advance health equity.
2. Expand access.
3. Deliver high-quality care.

In its *Title X Program Handbook*, OPA stated, "Title X is and should be the gold standard of high-quality family planning and sexual and reproductive healthcare."<sup>[4]</sup> Clinical services must be consistent with nationally recognized standards of care, including those issued by national medical associations, the U.S. Preventive Services Taskforce, the Advisory Committee on Immunization Practices, and the American Cancer Society. To offer additional support to family planning providers, the OPA collaborated with CDC in developing the first federal evidence-informed set of guidelines for family planning services: *Providing Quality Family Planning Services: Recommendations from the Centers for Disease Control and Prevention and the U.S. Office of Population Affairs (QFP)*. Title X recipients and subrecipients must also meet the service delivery requirements identified in Figure 1.

## Title X Service Delivery Requirements

- **"Client-centered care** is respectful of, and responsive to, individual client preferences, needs, and values; client values guide all clinical decisions.
- **"Culturally and linguistically appropriate services** are respectful of and responsive to the health beliefs, practices and needs of diverse patients.
- **"Inclusive** is when all people are fully included and can actively participate in and benefit from family planning, including, but not limited to, individuals who belong to underserved communities, such as Black, Latino, and Indigenous and Native American persons, Asian Americans and Pacific Islanders and other persons of color; members of religious minorities; lesbian, gay, bisexual, transgender, and queer (LGBTQ+) persons; persons with disabilities; persons who live in rural areas; and persons otherwise adversely affected by persistent poverty or inequality.
- **"Trauma-informed** means a program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for recovery; recognizes the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatization."<sup>[5]</sup>

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