

Office of Population Affairs

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Title X Orientation for New Grant Administrators

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OFFICE OF POPULATION AFFAIRS
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Outline of Presentation

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- **Background and Legislative History of Title X**
- **Program Requirements**
- **Scope and Characteristics of Title X Services**
- **Program Evaluations**

U.S. Department of Health & Human Services

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Secretary – Kathleen Sebelius



Assistant Secretary for Health
Howard Koh, MD, MPH

Office of the Assistant Secretary for Health

Office of Population Affairs

Office of the Regional Health
Administrators

Office of Minority Health

Office of HIV/AIDS Policy

Office on Women's Health

Office of the Surgeon General

Office of Human Research Integrity

Office of Disease Prevention & Health
Promotion

Office of Health Care Quality

National Vaccine Program Office

Pres. Council on Physical Fitness

Pres. Council on Bioethics

Pres. Adv. Council on HIV/AIDS

Adv. Comm. on Blood Safety

Office of Adolescent Health

Office of Population Affairs (OPA)

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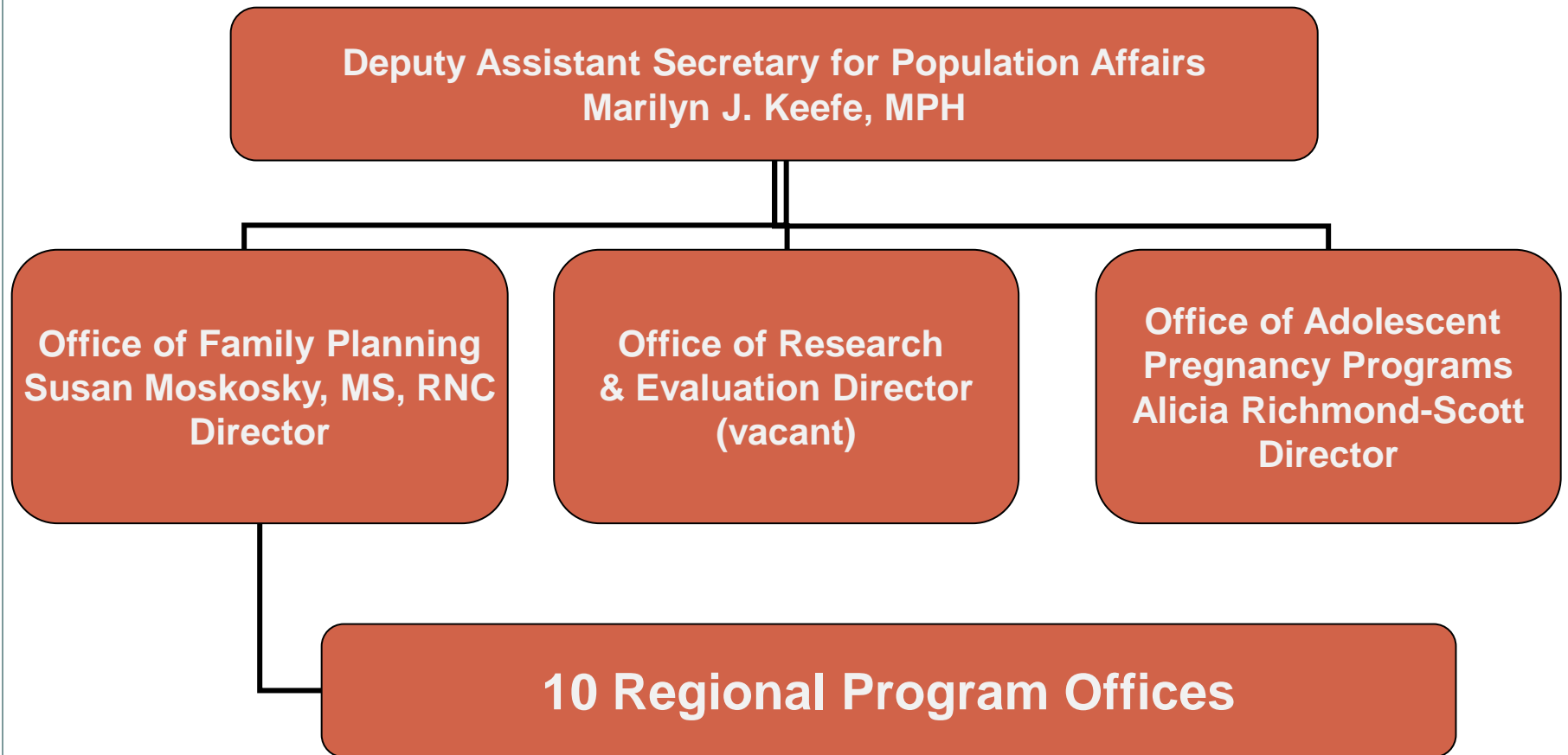
Purpose



- ✦ Focal point for the department on reproductive health issues
(e.g, family planning, adolescent pregnancy, etc.)

Office of Population Affairs (OPA) Organizational Structure

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Title X History

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- Created in 1970
- Amended the Public Health Service Act to provide for special project grants for the provision of family planning services, and related research, training, and technical assistance - cited as “Family Planning Amendments of 1970”
- Context - concern over population issues
- Priority is services to individuals from low-income families

Overview of Title X Family Planning Program

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- Title X refers to the section of the Public Health Service Act passed by Congress and signed into law in 1970 by President Nixon
- The Title X family planning program provides grants to public and private non-profit organizations for family planning-related health services, research, training, and information/education materials
- The mission of the program is to provide individuals with the information and means to exercise personal choice in determining the number and spacing of their children, including access to a broad range of acceptable and effective family planning methods and services
- Title X is administered by the Office of Population Affairs (OPA) in the Dept. of Health and Human Services

Overview of Title X Family Planning Program

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After 40 years, Title X remains a key component of the public health infrastructure in the U.S.

- **Title X–funded programs serve two-thirds of all clients who received care at publicly-funded FP centers**
- **6 in 10 women who go to a FP center consider it their usual source of medical care**
- **1 in 3 women who have an HIV test or receive STI testing or treatment do so at a publicly-funded FP center**

Overview of Title X Family Planning Program

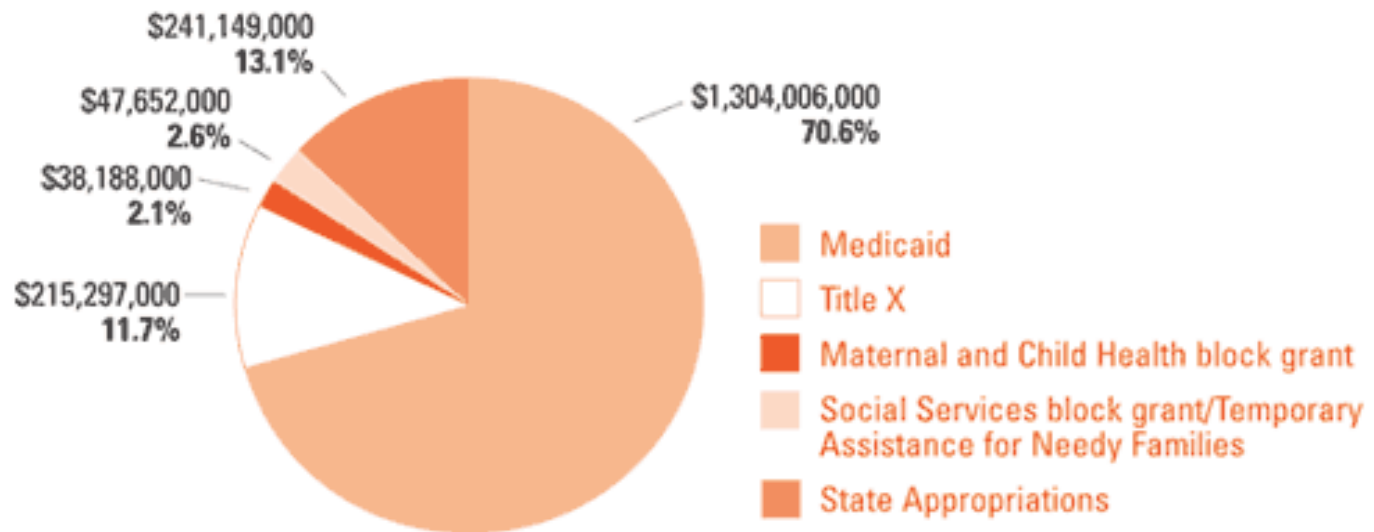
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Funding for Family Planning

Title X is a critical source of public funding for services, infrastructure and policy-setting, although Medicaid is the largest payer.

Public Funding Sources

Public expenditures on family planning client services, FY 2006



Source: Guttmacher, *Facts on Publicly Funded Contraceptive Services in the U.S.*, February 2009

Funding History - Key Years

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• 1971	\$ 6,000,000
• 1981	\$161,671,000
• 1983	\$124,088,000
• 1991	\$144,311,000
• 2001	\$253,932,000
• 2002	\$265,000,000
• 2003	\$273,000,000
• 2004	\$280,000,000
• 2005	\$285,963,000
• 2006	\$283,103,000
• 2007	\$283,146,000
• 2008	\$283,103,000
• 2009	\$307,491,000
• 2010	\$317,491,000
• 2011	\$299,400,000 (enacted)

Overview of Title X Family Planning Program

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What does the Title X program support?

- Although Medicaid is the largest source of public funds for family planning services (71%), Title X sets the standards (guidelines) for the provision of publicly funded family planning services in the U.S.
- Title X funds support clinic operations, equipment, buildings, contraceptive supplies, training and staff salaries
- Title X funds subsidize family planning services for women, men, and adolescents who may not have health insurance or who are not eligible for Medicaid



Title X and Grants

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- **Title X is primarily a grant-making program**
- **All Discretionary (Competitive) Grants**
- **Authority under four of the five main provisions of the Act to award grants and/or contracts**
 - Section 1001 - Services
 - Section 1003 - Training
 - Section 1004 - Research
 - Section 1005 - Information and Education

Title X and Grants

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- All grants and other activities support Service grants funded under Section 1001
- Section 1008 – Prohibition on Abortion
 - **None of the funds shall be used in programs where abortion is a method of family planning**

Section 1003 - Training

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- **Authorizes the Secretary to make grants and enter into contracts with public or nonprofit private entities and individuals to provide the training for personnel to carry out family planning service programs described in Section 1001**

Section 1003 - Training

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- **Ten General Regional Training Center Grants** – one in each PHS Region
- **Three National Training Cooperative Agreements**
 - **Male Training Center** – Provides training to enhance the capacity of service projects to provide family planning and related preventive health services to males
 - **Clinical Training Center** – Provides preceptor training and conducts national clinical conference
 - **National Training Center** – Conducts national training meetings, collects and disseminates training materials, and prepares nationally relevant training materials

Section 1004 - Research

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- **Authorizes the Secretary to make grants and enter into contracts for projects for research in the biomedical, contraceptive development, behavioral, and program implementation fields related to family planning and population**

1004 – Research/Evaluation

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- **Male Family Planning Research**
- **Service Delivery Improvement Research Projects**
- **Research Cooperative Agreements**
- **Contribute to the National Survey of Family Growth (NSFG) and Add Health surveys**

Section 1005 – Informational and Educational Materials

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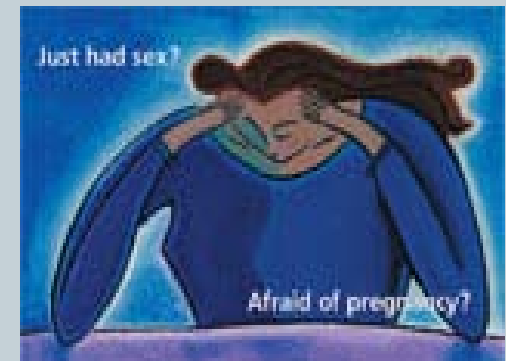
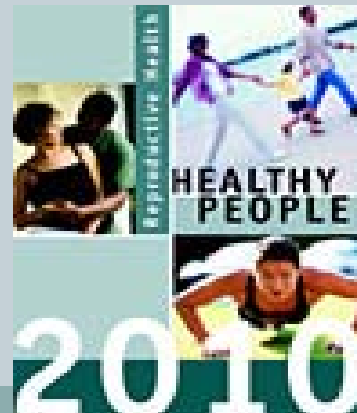
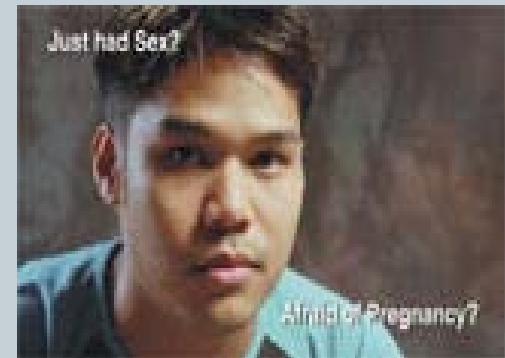
- Authorizes the Secretary to make grants and enter into contracts to assist in developing and making available family planning and population growth information to all persons desiring such information
- OPA Clearinghouse
<http://www.opaclearinghouse.org/>
- OPA web site <http://www.hhs.gov/opa/>

OPA Clearinghouse



Offers, in English and Spanish,

- Materials for Title X Clients
- Materials for Parents
- Materials for Clinicians
- Materials for the Public





Find a Family Planning Clinic
www.hhs.gov/opa



FLU.GOV
 Know what to do about the flu.
 VISIT FLU.GOV
 SHARE THIS WIDGET

**ACT
 against
 AIDS**

OPA Affairs (opa1) on Twitter - Microsoft Internet Explorer

Hey there! opa1 is using Twitter.

Twitter is a free service that lets you keep in touch with people through the exchange of quick, frequent answers to one simple question: What's happening? **Join today** to start receiving opa1's tweets

Join today!

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 **opa1**

Check out the updated OPA 2010 Family Planning Program Priorities <http://bit.ly/1ahmgY>

8:20 AM Jan 7th via web

New Program Instruction on H1N1 Vaccinations in Title X Family Planning Projects <http://bit.ly/9MWRk>

9:06 AM Nov 4th, 2009 via web

Name OPA Affairs
Location Rockville, MD
Web <http://www.hhs.gov>
Bio US Office of Population Affairs - A leader in reproductive health care, family planning, adolescent pregnancy prevention and care, and related research.

38 following 249 followers listed

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Following

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Texting Feature



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368674

To find a family planning clinic
nearest you!!



Hierarchy of Authority

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- **Statute and Regulations – Force of Law**
- **Title X Program Guidelines – Interpretation of regulations and guidance for program implementation**
- **Appropriations Language – Expectations Congress establishes for the Title X program each year**
- **Program Instructions – Respond to emerging issues or clarify program requirements**
- **Program Announcements – Outline expectations and requirements for specific grant opportunities within authorities established under Title X**

Title X Statute, Regulations & Guidelines

- **Title X Statute**: enacted by Congress to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services
- **Title X Regulations**: set out the requirements of DHHS for the provision of family planning services funded under Title X and implement the statute
- **Title X Guidelines**: interpret the Title X law and regulations in operational terms and provide a general orientation to the Federal perspective on family planning as well as provide guidance on other Federal and grants requirements

Title X Appropriations Language

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Legislative Mandates:

- Certification of encouragement of family involvement, and provision of counseling to minors to resist coercion
- Compliance with State laws regarding notification or reporting of child abuse, child molestation, sexual abuse, rape, or incest

Program Instruction Series

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- **OPA Program Instruction Series OPA 11-01: Title X Grantee Compliance with Grant Requirements and Applicable Federal and State Law, including State Reporting Laws**
- ✓ **Reiterates requirements for the reporting of child abuse, child molestation, sexual abuse, rape, or incest**
- ✓ **Reminds grantees about compliance with Federal anti-trafficking laws**
- ✓ **Reiterates required compliance with Section 1008**

Program Instruction Series (continued)

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- ✓ Regional Offices continue to be responsible for reviewing Title X grantees to ensure compliance
- ✓ Grantees are responsible for review of sub-recipients
- ✓ Regional Offices are to ensure that grantees, grantee subrecipients, and all other project staff receive training regarding the provisions of this Program Instruction within 6 months (September 2011)

Title X Appropriations Language

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- **Disbursement of Funds to Regional Offices**
 - 90 percent of funds for clinical services as defined in Section 1001 of Title X statute
 - Distributed to within 60 days of appropriation being enacted

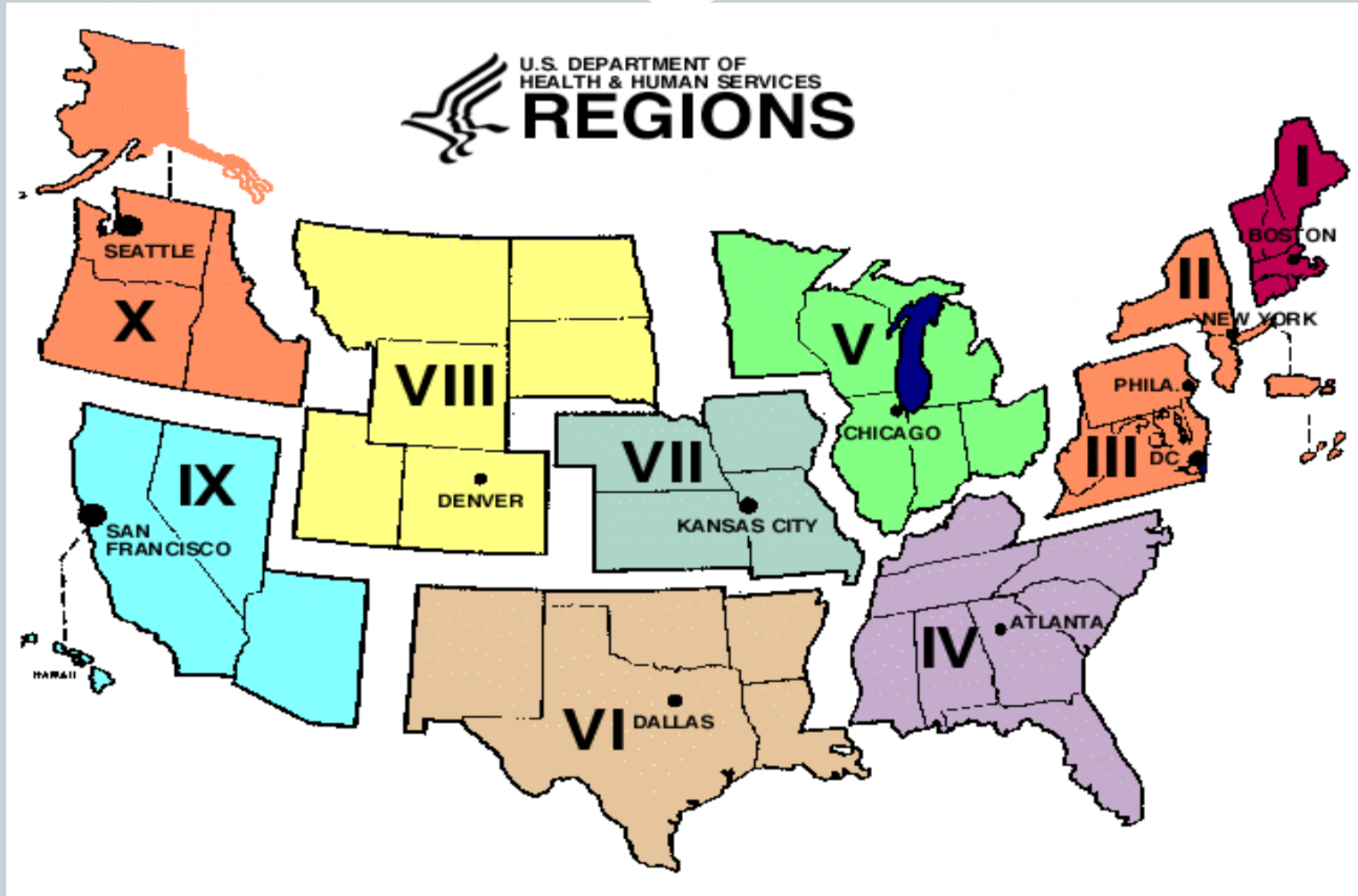
Program Structure - Title X is a De-Centralized Program

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- Authority for service delivery program operations is delegated to the Regional Health Administrator (RHA) in the ten Public Health Service (PHS) Regions.
- Annual Memorandum of Understanding (MOU) between Office of Population Affairs (OPA) and each Regional Office (RO) includes expectations and regional resources for each fiscal year

Public Health Service Regions

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De-Centralized Program Structure

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- **Regional Office of Family Planning (OFP) staff carry-out program activities, including oversight of service grantees for the applicable PHS Region**
- **“Headquarters” - Office of Family Planning/Office of Population Affairs (OPA) in Rockville, MD - policy office, oversight of regional offices, development of funding announcements, program priorities, etc.**

Title X Program Priorities 2011

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**Link to Healthy People 2010 and Derived from Statute and Regulations
(must be addressed in application for Title X funds)**

- **Assuring the delivery of quality family planning and related preventive health services, where evidence exists that those services should lead to improvement in the overall health of individuals, with priority for services to individuals from low-income families**
- **Assuring access to a broad range of acceptable and effective family planning methods and related preventive health services**
- **Providing family planning services in accordance with nationally recognized standards of care**

Title X Program Priorities 2011

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- **Emphasizing the importance of counseling family planning clients on establishing a reproductive life plan and providing preconception counseling as part of family planning services**
- **Addressing the comprehensive family planning and other health needs of hard-to-reach and vulnerable populations**
- **Identifying specific strategies for addressing the provisions of health care reform and the changing health care environment**

Key Issues – Focus on Quality

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- Efficiency and effectiveness in program management
- Cost of contraceptives, including long acting reversible contraceptives (LARC) and other pharmaceuticals and laboratory tests
- Management and decision-making through performance measures and accountability for outcomes
- Linkages and partnerships with HIV care and treatment, mental health, drug and alcohol treatment and other appropriate health care providers

Key Issues (cont.)

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- Addressing CDC's Revised Recommendations for HIV Testing
- Use of electronic technologies
- Data collection for monitoring performance
- Service delivery improvement through translation of research outcomes into practice
- Utilizing practice guidelines and recommendations, developed by recognized national professional organizations and Federal agencies
- Encouraging vaccination of individuals against influenza

Section 1001 - Services

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- **At least 90%** of appropriation must be used for clinical service programs
- **Scope of the service project is defined in the application for funds**

Scope of Title X Services

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- Voluntary
- Confidential – regardless of age, although State laws regarding reporting must be followed
- **Priority to low income** – no charge for services provided to individuals from low income families (\leq 100% FPL); sliding fee schedule between 101 – 250% FPL
- Any individual desiring services – male or female
- Under the direction of a physician with training or experience in FP

Scope of Title X Required Services

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- Provision of a contraceptive method from among a broad range of acceptable and effective contraceptive methods, including natural family planning
- Clinical procedures and laboratory tests, as indicated for contraceptive method
- Services for adolescents
- Education and counseling
- Basic infertility services
- Referrals to medical and social services outside the scope of the Title X project

Scope of Title X Services

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- **Related Preventive Health Services**
 - HIV testing, prevention education, counseling and referral
 - Breast and cervical cancer screening
 - Lab screening for prevention
 - ✦ **Lipids, Hepatitis B testing, urinalysis, anemia screening, etc.**
 - STI testing and treatment
 - Counseling regarding reproductive life plan and preconception
 - Referral and follow-up

Regulations: Counseling

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Sec 59.5 (a) (5)

Programs must....

- (i) Offer pregnant women the opportunity to be provided information and counseling on each of the following options:**
 - (A) Prenatal care and delivery;**
 - (B) Infant care, foster care, or adoption**
 - (C) Pregnancy termination**

Regulations: Counseling

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(ii) If requested to provide such information and counseling, provide neutral, factual information and nondirective counseling on each of the options, and referral upon request, except with respect to any option(s) about which the pregnant woman indicates she does not wish to receive such information and counseling

Regulations: Education

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Sec. 59.5 (b)

Each project must . . .

- (3) Provide for informational and educational programs designed to—
 - (i) Achieve community understanding of the objectives of the program;
 - (ii) Inform the community of the availability of services; and
 - (iii) Promote continued participation in the project by persons to whom family planning services may be beneficial.

Regulations: Education

42

Sec. 59.6

What procedures apply to assure the suitability of informational and educational material?

- (a) A grant under this section may be made only upon assurance satisfactory to the Secretary that the project shall provide for the review and approval of informational and educational materials developed or made available under the project by an Advisory Committee prior to their distribution, to assure that the materials are suitable for the population or community to which they are to be made available and the purposes of title X of the Act. The project shall not disseminate any such materials which are not approved by the Advisory Committee.

Regulations: Education

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The Advisory Committee shall:

- Consist of no fewer than five but not more than nine members
- Include individuals broadly representative ...of the population or community for which the materials are intended.
- Consider the educational and cultural backgrounds of individuals to whom the materials are addressed;
- Consider the standards of the population or community to be served with respect to such materials;
- Review the content of the material to assure that the information is factually correct;
- Determine whether the material is suitable for the population or community to which is to be made available; and
- Establish a written record of its determinations.

Statute: Adolescent Services

Sec. 1001 [300]

- The Secretary is authorized to make grants to and enter into contracts with public or nonprofit private entities to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services, and services for adolescents). To the extent practicable, entities which receive grants contracts under this section shall encourage family participation in projects assisted in this subsection

Regulations: Adolescent Services

42 CFR 59.2-

- Provides definition of “low income family” and specifies that “unemancipated minors who wish to receive services on a confidential basis must be considered on the basis of their own resources”
- This was also addressed in OPA Program Instruction Series 97-01 “Fees and Charges to Title X Low-Income Clients and Teenagers” (revised)

Regulations: Adolescent Services

Sec 59.11- Confidentiality

- All information as to personal facts and circumstances obtained by the project staff about individuals receiving services must be held confidential and must not be disclosed without the individual's documented consent, except as may be necessary to provide services to the patient or as required by law, with appropriate safeguards for confidentiality. Otherwise, information may be disclosed in summary, statistical, or other form which does not identify particular individuals.

Regulations: Quality Assurance/Quality Improvement

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Continued...

- (a)(3) Provide services in a manner which protects the dignity of the individual**

- (a)(4) Provide services without regard to religion, race, color, national origin, handicapping condition, age, sex, number of pregnancies, or marital status**

Family Planning Annual Report (FPAR)

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- The only source of annual uniform reporting by all Title X Service Grantees.
- FPAR data are reported and presented in summary form to protect the confidentiality of persons that receive Title X services.
- Annual data on service delivery/ revenue/ staffing/ contraceptive use/ other services
- Office of Management & Budget (OMB) approved data collection document

Title X Family Planning Services

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- **91 service grantees**
 - 56% are State, Territorial, Tribal, County, or Local Health Agencies
 - Remainder are universities and community-based not for profit agencies
 - 4,389 clinics in network

* 2010 Preliminary FPAR data

Client Characteristics 2010*

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- **5,222,032 total users**
 - 4,819,402 female (92%)
 - 402,630 male (8%)
- **53% 24 yrs. or younger**
- **22% teens under age 20**
- **54% racial/ethnic minority**
- **29% Hispanic/Latino**
- **69% \leq 100% FPL**
- **89% \leq 200% FPL**



• * 2010 Preliminary FPAR data

Overview of Title X Family Planning Program

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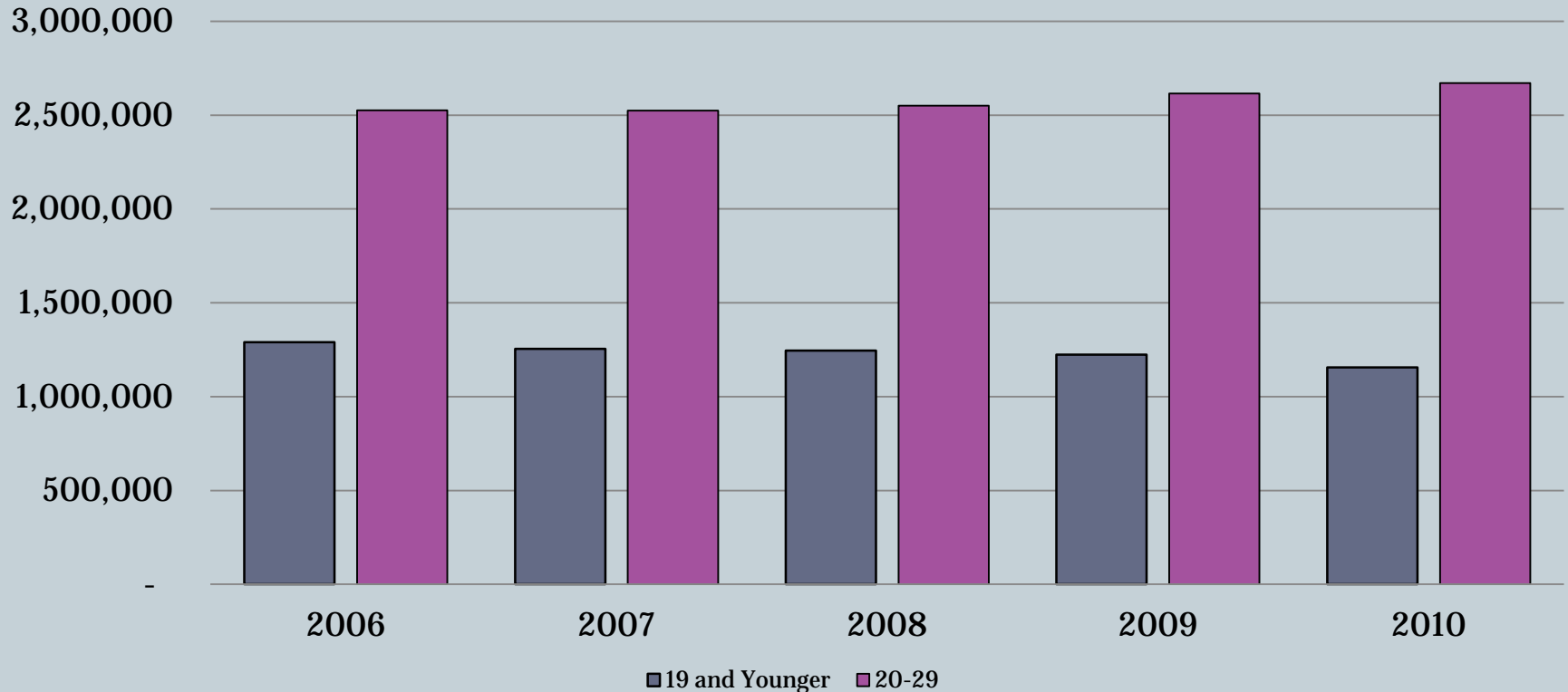
Total Clients Served: 2006-2010



Overview of Title X Family Planning Program

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Title X clients are disproportionately young
In 2010: 22% (1,155,292) of all Title X clients were teens;
51% (2,671,561) were 20-29



FPAR Results 2010* – A National Picture

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- **Pap Tests**
 - More than 1.7 million female family planning users received a Pap test (1.8 million Pap tests)
 - 13% - abnormal finding (ASC or higher)
- **Clinical Breast Exams (CBE)**
 - 2,193,712 unduplicated users received a CBE (42 % of family planning users)
 - 2% referred for evaluation of abnormal findings

* 2010 Preliminary FPAR data

FPAR Results 2010* – A National Picture

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- **Chlamydia**

- 2,614,307 test performed (2,378,958 female; 235,349 males)
- 57% of total female family planning clients under age 25 ** were tested for Chlamydia

- **HIV**

- 1,102,765 confidential HIV tests (2.1 tests per 10 users)
- 1,672 positive tests

* Preliminary 2010 FPAR

** USPSTF and CDC recommend routine testing in sexually active women 24/25 and younger

Monitoring of Family Planning Service Delivery

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- Occurs at various levels
- Formal and informal
- Ongoing bi-directional communication
 - Primary lines of communication
 - ✦ Headquarters with Regional Office (Regional Health Administrators/Regional Program Staff)
 - ✦ Regional Offices with grantees
 - ✦ Grantees with sub-recipients (delegates) or service sites/clinics
 - ✦ Sub-recipients with service sites/clinics

Program Monitoring

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- **Grant Reviews**
 - Objective reviews (competitive applications)
 - Staff reviews (non-competing continuation applications)
- **Site Visits - Annually to each grantee (by Regional Office)**
- **Comprehensive Program Reviews - usually every 3 yrs**
- **Written reports**
- **Grantee meetings/conference calls**

Program Monitoring

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Includes assessment of :

- **Fiscal and administrative requirements**
- **Clinical requirements and quality of care**
- **Compliance with legislative mandates**
- **Grant requirements**

Program Monitoring

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Ensuring Compliance and Quality Care:

- Regional Offices- monitor grantees
- Grantees- monitor subrecipients (including clinics/service sites)

Special Initiatives – HIV Prevention Integration in Family Planning

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- OPA has received Minority AIDS Initiative (MAI) Funds since 2001 – has enabled funding of on-site HIV testing and prevention services in family planning clinics
- 78 projects (456 service sites) currently funded with MAI and Title X funds
- Projects Implementing CDC 2006 Revised Recommendations for HIV Testing in Health-Care Settings

Special Initiatives Focusing on Males

60

- **Family Planning Male Training Center**
 - Research and resource collection and dissemination
 - Training needs assessment
 - Expert panels
- **Annual Male Grantees/Projects Meeting**
- **Annual Male Health Educator Training Institute**

Multiple External Evaluations of Title X Program

61

- Assistant Secretary for Administration and Management Evaluation –
 - Review of the grants management practices, policies, and procedures utilized by program and grants staff responsible for the award and monitoring of the family planning services programs - **Family Planning Services Program review protocol identified as a best practice**

Multiple External Evaluations of Title X Program

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- Office of the Inspector General Study-
 - OIG Report April 2005
 - Describes efforts of the program to address State requirements regarding the reporting of child abuse, child molestation, sexual abuse, rape, and incest for Title X grantees - **positive findings**

Program Assessment Rating Tool (PART)

63

- **Comprehensive Office of Management and Budget (OMB) Review**
 - Links actions to outcomes
 - Identifies strengths and weaknesses
- **Assesses 4 Areas**
 - Program Purpose and Design
 - Strategic Planning
 - Program Management
 - Program Results and Accountability

Program Assessment Rating Tool (PART)

64

- Title X “PARTED” in 2005 – **Moderately Effective Rating**
- Title X Performance measures incorporated into Annual Performance Plan and Budget
- Three outcomes – one efficiency measure – all relate to services provided in Title X-funded clinics
- Recommendation for Broad-Based, Independent Evaluation of Impact of the Title X Program

Established Performance Measures

65

- **Increase the number of unintended pregnancies averted by providing Title X family planning services, with priority for services to low income individuals**
- **Reduce invasive cervical cancer among women attending Title X family planning clinics by providing Pap tests**

Performance Measures (cont.)

66

- Reduce infertility among women attending Title X family planning clinics by identifying Chlamydia infection through screening of females ages 15-24
- Efficiency Measure
 - Maintain the actual cost per Title X family planning client below the medical care inflation rate

Multiple External Evaluations of Title X Program

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- **Institute of Medicine – 2009**
 - Review of the HHS Family Planning Program
 - Charged with assessing the administration and management of the Title X program, including the extent to which the program needs to re-examine the scope of this services, objectives and operation requirements of the program.

Program Integrity Initiative

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- **Program Integrity Initiative– May 2011**
 - **Purpose**
 - ✦ To enhance program integrity operations and business processes
 - ✦ Identify vulnerabilities, describe current operations, develop appropriate strategic plans to enhance program integrity and risk response and implement and monitor the plan
 - **Multiple stage approach**
 - ✦ Identify risks – completed May 2011
 - ✦ Develop Risk Response Strategy
 - ✦ Implement Risk Response Strategy
 - ✦ Monitor Risks

Title X Program Guidelines

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- **Current Program Guidelines revision process is unlike previous updates/revisions**
- **The end goals:**
 - ❑ **To produce evidence-based or evidence-informed Title X Program Guidelines that also provide a service/contribution to the greater reproductive health community**
 - ❑ **To create a process/mechanism for keeping the Guidelines current**
 - ❑ **To use the review of evidence, and the gaps identified, to inform OPA's future research efforts**

DRAFT Title X Program Requirements and Program Guidance Sections

Derived from:
Title X Statute
Title X Regulations
Grants Policy
Statement & Others

Informed by:
CDC; ACOG;
ACS; USPSTF &
Others

Program Requirements

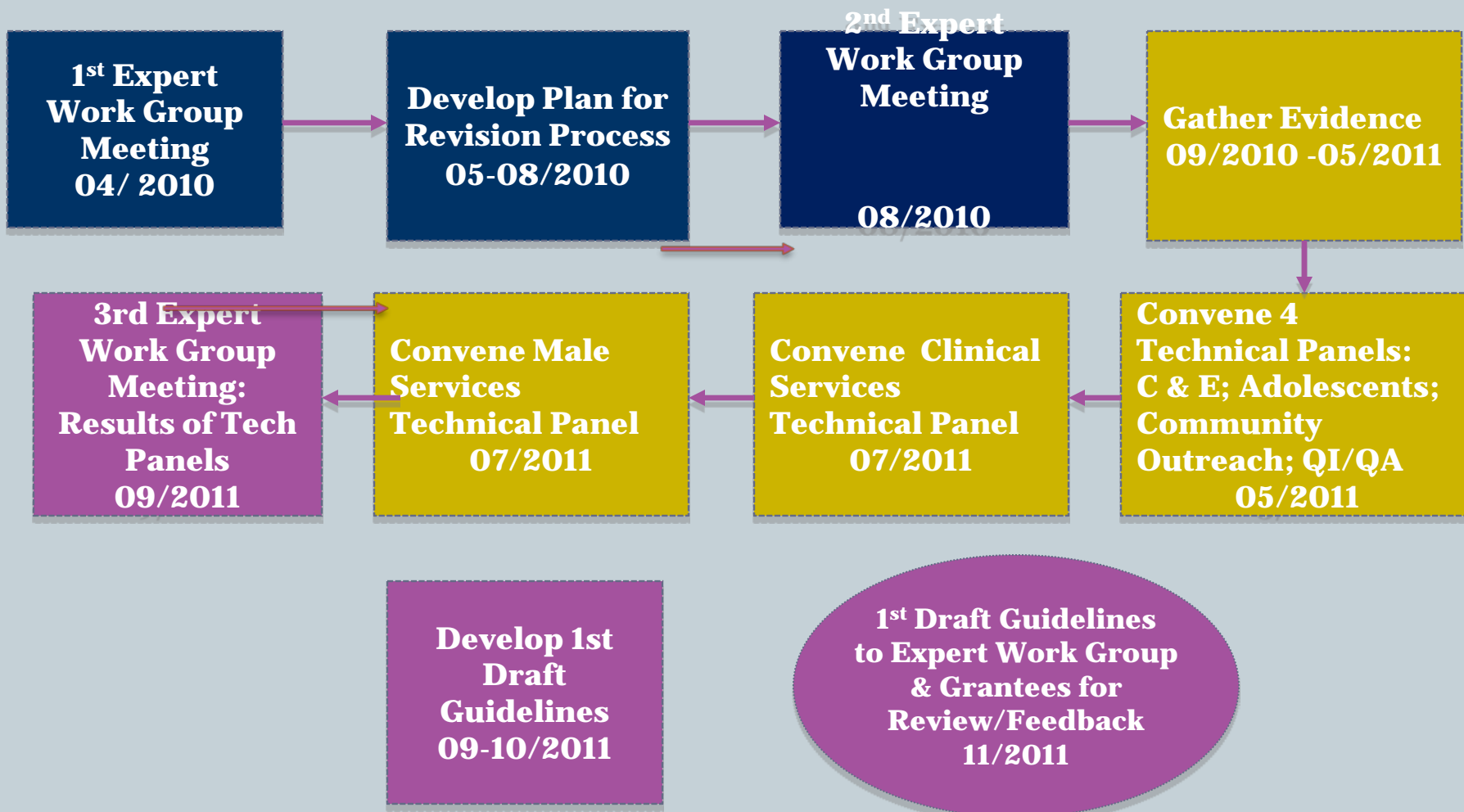
- Introduction
- Title X Statute, Regulations and Legislative Mandates
- Applicable Federal Law and Regulations
- Project Administration & Management
- Required Services

Program Guidance

- Introduction
- Title X Clinical Requirements
- Quality Clinical Services
- Effective Service Delivery Infrastructure

Guidance Revision Process: Phase 1

71



Guidance Revision Process: Phase 2

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Title X Summary Points

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- Title X is a de-centralized, discretionary grant program
- Five major sections of the law – services, training, research, information and education, and prohibition of abortion
- All sections of the law support delivery of high-quality family planning services
- Grants and/or contracts are made under the authority of four of the five major sections
- All grants must adhere to Title X requirements

Title X Summary Points

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- Headquarters is primarily the policy office
- Operations related to services and regional training carried out by the RHA through an MOU
- OFP engages in a number of research and evaluation activities
- There is extensive monitoring by both regional and central offices, as well as external evaluators

The End



Thank You