

June 29, 2018

The Honorable Alex M. Azar II Secretary U.S. Department of Health & Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201

Dear Secretary Azar:

We write to express deep concerns with the recent proposed rule on compliance with statutory program integrity requirements in the Title X program. We oppose federal funding of abortion. Yet we have also consistently opposed efforts to restrict certain providers from Title X and other federal health care programs because we believe that timely and convenient access to contraception services has been critical to reducing the number of abortions in our country over the past three decades. Regrettably, some of the changes suggested in the proposed rule may undermine that success.

Title X grantees already participate in independent audits to examine whether there is a system to ensure financial separation from non-allowable activities regarding abortion. We are concerned that HHS may require additional, physical separation requirements that could encompass factors such as treatment and examination rooms, office entrances and exits, shared phone numbers and email addresses, as well as the existence of separate personnel, electronic or paper-based health care records, and workstations.

These proposed requirements are overly burdensome and could significantly diminish access to contraceptive care, particularly if a program site that does not offer abortion but may have an affiliation with a provider who does is also disqualified. Requiring facilities to be physically separated may result in the closure of certain extant grantees who cannot afford to open an entirely new building with separate staff.

Additionally, we are troubled by aspects of the rule that could have a detrimental effect on the doctor-patient relationship and delay care, specifically with regard to discussion and referrals for abortion. As the American Medical Association rightly observes, "High-quality medical care relies on honest, unfiltered conversations between patients and their physicians. Gag orders that restrict the ability of physicians to explain all options to their patients and refer them—whatever their health care needs—compromise this relationship and force physicians and nurses to withhold information that their patients need to make decisions about their care."

Some suggest that should existing Title X grantees no longer qualify, other health care providers could fill the gap. In reality, many of these providers do not have the capacity to absorb all these patients overnight, nor may they have as much expertise in reproductive health. Some patients will lose access to a trusted provider, while others may wait longer for an appointment. In more rural areas of the country, such as Maine or Alaska, the closure of a facility could force patients to drive hundreds of miles or even take a flight if they wish to receive the same services for the same prices.

Title X serves millions of patients each year, and it is critical that changes to the program not result in the disruption of timely access to comprehensive contraceptive care. We urge you to carefully review comments from the medical provider community and reconsider these proposed policy changes.

Sincerely,

Susan M. Collins

United States Senator

Lisa Murkowski

United States Senator