

**Testimony of Amanda Skinner, President and CEO
Planned Parenthood of Southern New England
RE: Request for Certificate of Need for the Transfer of Outpatient and Women's Health
services from Yale New Haven Health System
November 28, 2018**

Thank you for this opportunity to comment on the Certificate of Need application from Yale New Haven Health System (YNHH) to transfer primary and women's health outpatient care to a Long Wharf location and a partnership with Fair Haven Community Health Center and Cornell Scott Hill Health Center.

While in theory Planned Parenthood does not oppose this change, there are significant ramifications to this plan that we believe should be addressed before the CON application is made final.

This proposal is being made at a political moment when the Trump Administration is already poised to impose an onerous "gag rule" on Title X family planning services, threatening the way outpatient family planning services are delivered and accessed in both New Haven and nationwide. Because of the gag rule, Planned Parenthood of Southern New England, which has been the federal Title X grantee for decades, will be intentionally deprived of these funds. Meanwhile, doctors, nurses and counselors who work for the local community health centers and those employed within the Title X program across the country will be prevented from telling their patients how and where they can access safe, legal abortion, even when asked by the patient for this information, both verbally and in writing.

As a requirement of the State of Connecticut Certificate of Need process, the parties to this affiliation should offer a plan for how patients will be counseled about all of their pregnancy options and referred for comprehensive reproductive health services, if and when federal family planning funding supporting this care is constrained by a gag order. **Specifically, how will the new Long Wharf partnership and location be designed and operated in order to mitigate this rule, and to make certain that patients, even those who need referral *back to Yale* for pregnancy termination, be provided with the information that they need to seek care, safely, promptly and confidentially?**

The federal Title X program, established by Congress with bipartisan support under the Nixon Administration, ensures those most in need – those who have very low incomes or lack health insurance – have access to lifesaving care, such as cancer screenings, birth control, STI testing and treatment, and well-woman exams based upon a sliding income fee scale. Since the 1970's, Planned Parenthood of Southern New England has been the direct federal grantee of this program. Twelve of Planned Parenthood of Southern New England's health centers in Connecticut receive funding through Title X, supporting care to nearly 40,000 patients annually. Without Title X funding, Planned Parenthood will continue to provide the necessary reproductive health care services that people need, although it will be challenging to do so.

A significant proportion of Title X patients identify as members of racial or ethnic communities that often face significant health challenges due to systemic inequities, including Black and African-

American patients (21 percent), and Hispanic and Latino patients (32 percent). Title X patients do not have health insurance and have low incomes and often also lack access to Medicaid coverage. We know that the State of Connecticut and the Office of Health Strategy in specific maintain a belief in the concept of health equity. Accordingly, this Certificate of Need should be scrutinized within the context of its community impact.

Our state has an exemplary and somewhat recent record of reducing the numbers of unintended pregnancies, teen births, and abortions across all age groups. These public health improvements have been largely attributable to improved access to the full range of contraceptives (including newer, more effective, and longer lasting methods). Placing barriers in the way of women who are seeking full information and referral for a range of reproductive health care, including safe legal abortion (codified in State law in 1990)...will only erode these improvements.

Finally, with the impending inauguration of a new Governor and Administration focused on innovation and cost containment, making sure that policy is in place to assure anyone seeking the means and methods to prevent unintended pregnancy (and thereby preventing the associated costs) should be a high priority. Convenient, patient-centered outpatient clinics are the most logical, cost effective and responsive settings to meet the needs of low income individuals.

In summary, PPSNE understands the market forces behind the decision that has led to this CON request. We ask that the Office of Health Strategy require the parties to describe how this partnership and location will be designed and operated in order to mitigate this rule, and to make certain that patients, even those who need referral back to Yale for pregnancy termination, be provided with the information that they need to seek care, safely, promptly and confidentially.

Thank you for this opportunity to submit written comment.