Welcome to Title X!
Introduction and Overview of Title X Requirements

Office of Population Affairs
May 9, 2019
Purpose and Goals

• Purpose
  ▪ To provide new Title X grantees with information that will familiarize them to Title X requirements and resources to support service delivery implementation

• Goals
  ▪ Introduce new grantees to Office of Population Affairs leadership and staff
  ▪ Enhance the ability of Title X grantees to effectively implement Title X service programs through increasing knowledge of requirements
  ▪ Provide awareness of tools and support available to grantees to implement and evaluate their programs
Welcome from Dr. Foley

Diane Foley, MD, FAAP
Deputy Assistant Secretary for Population Affairs
U.S. Department of Health & Human Services
Alex M. Azar II, Secretary

Office of the Assistant Secretary for Health (OASH)
Dr. Brett Giroir, Assistant Secretary for Health

- National Vaccine Program Office
- Office of Adolescent Health
- Office of Disease Prevention and Health Promotion
- Office of HIV/AIDS and Infectious Disease Policy
- Office of Human Research Protections
- Office of Minority Health
- **Office of Population Affairs (OPA)**
  - Diane Foley, M.D. - DASPA
- Office of Research Integrity
- Office of the Surgeon General
- Office on Women’s Health
- President's Council on Sports, Fitness & Nutrition
Overview of the Office of Population Affairs and the Title X Family Planning Program
Office of Population Affairs (OPA)

- OPA advises the Secretary and Assistant Secretary for Health on a wide range of reproductive health issues and administers the Title X Family Planning Program.

- The Title X Program provides the information and means to exercise personal choice in determining the number and spacing of children, including access to a broad range of acceptable and effective family planning methods and services.
Office of Population Affairs Staff

• Immediate Office
  • Dr. Diane Foley – DASPA
  • David M. Johnson – Operations and Adm. Officer
  • Robert Scholle – Public Health Advisor
  • Karen Silver – Sr. Communications Specialist
  • Terria Snowden – Program Analyst

• Title X Service Delivery
  • Aisha Cody – Health Scientist
  • Cynda Hall – Public Health Advisor

• Title X Service Delivery Improvement/Research and Evaluation
  • Ana Carolina Loyola Briceno – Health Scientist
Project Officers

- **Region I** – Natalia Guevara
- **Region II** – Karina Aguilar
- **Region III** – Dickie Lynn Gronseth, Christine Woolslayer, Sarah Shrimplin
- **Region IV** – CAPT Edecia Richards, Gaylyn Henderson
- **Region V** – Anthony Harden
- **Region VI** – Liese Sherwood-Fabre
- **Region VII** – CDR Dustin Rider
- **Region VIII** – Traci Pole
- **Region IX** – CDR Rebecca McTall
- **Region X** – Alia Fry, Jesús Reyna
Roles and Responsibilities

• Office of Population Affairs (OPA) –
  ▪ Program policy, budget, administration, implementation, and oversight of all Title X activities, development of funding announcements, and program priorities

• Project Officers –
  ▪ Carry-out program activities, project officers for service grantees for the applicable PHS Region

• OASH Office of Grants Management –
  ▪ Grants policy, official approver for grant modifications and changes, financial oversight
Roles and Responsibilities

• OPA - Project Officers
  ▪ Programmatic reports, including FPAR
  ▪ Program Issues
• OASH - Office of Grants Management, Grants Specialist
  ▪ Budgetary Issues
  ▪ Financial oversight
  ▪ Grant modifications and changes
  ▪ Grants policy
• HRSA - Office of Pharmacy Affairs
  ▪ 340B Drug Pricing Program
What is Title X?

- Title X was passed by Congress and signed into law in 1970 by President Nixon

- Amended the Public Health Service (PHS) Act to provide for special project grants for the provision of family planning services, and related research, training, and technical assistance

- Priority is services to individuals from low-income families

- Provides grants to public and private non-profit organizations for family planning-related health services, research, training, and information/education materials
Title X and Grants

- **1001: Services - Provided by Public & Non-profit Entities**
  - “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)...”

- **1003: Training**
  - National Training Centers

- **1004 Title X Research**
  - Evaluation and Service Delivery Improvement Research

- **1005 Title X Information and Education**
  - OPA website, publications, and clinic directory

- **1008 Prohibition of Abortion**
  - “None of the funds appropriated under this title shall be used in programs where abortion is a method of family planning.”
Essential Role of Title X & Publicly Funded Family Planning

- Title X-funded programs serve two-thirds of all clients who receive care at publicly funded family planning (FP) centers.

- Publicly funded FP helps women each year avoid 1.94 million unintended pregnancies (Title X prevents 973,000 unintended pregnancies each year, 200,000 in teens).

- 6 in 10 women who go to a publicly-funded FP center consider it their “usual” source of medical care.

- 1 in 3 women who have an HIV test or receive STD testing or treatment do so at a FP center.

Source: Guttmacher Institute, 2016
Title X Services Grantee Network

Approximately:

- **90 Service Grantees**, including state, territorial, tribal, county or local health agencies, universities, faith-based and community-based nonprofit agencies

- **4,000 Family Planning Clinics**, in the 50 states, the District of Columbia, and eight U.S. territories and jurisdictions

- **4 Million Clients Served Annually**, with family planning and related preventive health care services
Family Planning Program and Resources

• 67% of all clients had incomes at or below 100% FPL (2017)

• No charge for services to persons with family incomes at or below 100% FPL

• Charges based on a sliding fee schedule to persons with family incomes 101%-250% FPL

• Title X clinics must bill third-party payers

• 42% of clients were uninsured in 2017
Core Family Planning Services

Core family planning services, as identified in the Funding Opportunity Announcement (FOA), should be addressed in your project, including:

• Discussion with client about their Reproductive Life Plan
• A broad range of acceptable and effective family planning methods and services
  ▪ Adolescent counseling on delaying sexual activity
  ▪ Instruction on Fertility Awareness-Based Methods
  ▪ Availability of several categories of contraceptive methods
• The broad range does not include abortion as a method of family planning
• Pregnancy testing and counseling
Core Family Planning Services cont’d

• Services centered around pre-conception health and achieving pregnancy, including:
  ▪ Basic infertility services
  ▪ STD prevention, education, screening
  ▪ HIV testing and referral for treatment when appropriate
  ▪ Screening for substance use disorders and referral when appropriate
Title X Services Requirements (cont’d)

Title X-funded Family Planning Services must be:

• Voluntary

• Confidential

• Provided to any person desiring services, with priority for persons from low-income families

• Provided regardless of ability to pay

• Provided under the direction of a physician with training or experience in family planning
Title X Services Grants Requirements (cont’d)

• Clients whose documented income is at or below 100% of the Federal Poverty Level (FPL) must not be charged, although projects must bill all third parties authorized or legally obligated to pay for services.

• A schedule of discounts must be developed for individuals with family incomes between 101% and 250% of the FPL.

• For persons from families whose income exceeds 250% of the FPL, charges must be made in accordance with a schedule of fees designed to recover the reasonable cost of providing services.
Title X Program Guidelines

QFP

Program Requirements

Providing Quality Family Planning Services
Recommendations of CDC and the U.S. Office of Population Affairs

Program Requirements for Title X Funded Family Planning Projects

Version 1.0 - April 2014
Framework for Family Planning, Related, & Other Preventive Services

Family planning services
- Contraceptive services
- Pregnancy testing and counseling
- Achieving pregnancy
- Basic infertility services
- Preconception health
- Sexually transmitted disease services

Related preventive health services
(e.g., screening for breast and cervical cancer)

Other preventive health services
(e.g., lipid disorders)

Link to long description
QFP Recommends Screening All Clients

Determine the need for services (Pregnancy Intention Screening/One Key Question)

Reason for visit is related to preventing or achieving pregnancy

- Contraceptive Services
- Pregnancy testing and counseling
- Achieving Pregnancy
- Basic infertility services

Clients should also be offered these services, per recommendations

- STD services
- Preconception health services
- Related preventive health services

Initial reason for visit is not related to preventing or achieving pregnancy

- Acute care
- Chronic care management
- Preventive services

If needed, provide services

Assess need for services related to preventing or achieving pregnancy

If services are not needed at this visit, re-assess at subsequent visits

Link to long description
FY 2019 Program Priorities

Title X Priorities include all of the legal requirements covered within:

- Title X statute (42 U.S.C. Part 300)
- Regulations (42 CFR Part 59)
- Legislative mandates
Legislative Mandates

• “None of the funds appropriated in this Act may be made available to any entity under Title X of the PHS Act unless the applicant for the award certifies to the Secretary of Health and Human Services that it encourages family participation in the decision of minors to seek family planning services and that it provides counseling to minors on how to resist attempts to coerce minors into engaging in sexual activities;” and

• “Notwithstanding any other provision of law, no provider of services under Title X of the PHS Act shall be exempt from any State law requiring notification or the reporting of child abuse, child molestation, sexual abuse, rape, or incest.”

NOTE: All activities funded under this announcement must be in compliance with the Title X statute, as well as the program regulations and legislative mandates, as applicable. Copies of the statute, regulations, and legislative mandates are available at: https://www.hhs.gov/opa/title-x-family-planning/about-title-x-grants/
Key Issues

• Assuring innovative quality family planning and related preventive health services
• Providing the tools necessary for the inclusion of substance use disorder screening
• Following a model that promotes optimal health outcomes for the client
• Providing resources that prioritize optimal health outcomes for individuals and couples
• Providing counseling for adolescents that encourages sexual risk avoidance
Key Issues (cont’d)

- Communicating the growing body of information for a variety of fertility awareness-based methods of family planning and providing tools
- Fostering interaction with community and faith-based organizations to develop a network for client referrals
- Accurately collecting and reporting data, such as the Family Planning Annual Report (FPAR)
- Promoting the use of a standardized instrument to regularly perform quality assurance and quality improvement activities
- Increasing attention to CDC screening recommendations for chlamydia and other STDs
Grantee Accountability

• Title X “project” defined in the grantee’s funded competing application

• Title X “project” must comply with
  ▪ All Title X requirements
  ▪ All grant requirements

• Title X “project” services should reflect
  ▪ High quality care as demonstrated by use of current evidence-based standards for care published by federal and professional medical organizations
Program Monitoring

• Grant application reviews – competing and non-competing
• Program Reviews
• Phone calls
• Reports
  ▪ FFRs
  ▪ FPAR
  ▪ Other required reports
Why is Monitoring Important?

• Federal obligation to ensure that there is documented evidence of grantees’ compliance with all federal requirements throughout their networks.
• Need to ensure grantees and their subrecipients and sites provide consistently high-quality clinical care.
• Title X is a sensitive and highly visible program.
• Need to ensure program integrity.
Monitoring Subrecipients

• Grantees are responsible for monitoring all of their subrecipients for compliance with Title X program requirements.

• The grantee is accountable for the quality, cost, accessibility, acceptability, reporting, and performance of the grant-funded activities provided by subrecipients.
Program Review Tool

- Program review tool
  - Used by OPA staff and consultants to assess a project’s compliance with Title X Program Review Guidelines
  - May be adapted for use by the grantee to perform project self-assessments and as a monitoring tool to evaluate subrecipients & service sites

- Monitoring includes evaluation of the following components:
  - Project Management and Administration
  - Project Services and Clients
  - Community Participation, Education, and Project Promotion
  - Confidentiality
  - Information and Education Materials Approval
  - Additional Administrative Requirements
Family Planning Annual Report
Family Planning Annual Report (FPAR)

- The Family Planning Annual Report (FPAR) is the only source of annual, uniform reporting by all Title X family planning service grantees.

- It provides consistent, national-level data on the Title X Family Planning Program and its users.

- FPAR uses:
  - Program planning and quality improvement initiative development
  - Communication to Congress and other policymakers
  - Performance monitoring for grantees
  - Program impact evaluations
FPAR Data System & Reporting Instructions

- All entities that receive Title X service funds must report annually to OPA via the FPAR Data System
  - Visit the data system: https://fpar.opa.hhs.gov

- FPAR collects data on activities conducted during each calendar year, from January 1 through December 31
  - Grantees will collect FPAR data elements from their subrecipients and clinics on activities conducted from January 1, 2019 through December 31, 2019
  - Grantee compiles data from their networks, submits results to OPA through the FPAR data system on or before February 14, 2020
FPAR Reporting Instructions (cont’d)

• On-demand trainings are available through the FPAR Data System Website (no login required)

  ▪ Understanding the Reporting Requirement
  ▪ Submitting the FPAR Using the FPAR Data System
  ▪ Managing FPAR Submission, Review, and Approval using the FPAR Data System
FPAR Forms & Instructions

• FPAR reporting instructions are outlined in the *FPAR Forms & Instructions* guidance document.

• This manual contains definitions for FPAR data elements and FAQs on how to count and report complex care scenarios.

• The manual is updated every three years and approved by the Office of Management and Budget.
FPAR Resources

- FPAR Data System website: [https://fpar.opa.hhs.gov](https://fpar.opa.hhs.gov)

- FPAR Forms & Instructions: OPA website → Title X → Family Planning Annual Report page

- Human resources:
  - OPA Title X Project Officers are first line of contact
  - Project Officers may connect you to OPA headquarters for additional TA
OPA Communication Tools
and
Title X Family Planning Clinic Locator and Database
Communication Tools

- OPA website: [www.hhs.gov/opa](http://www.hhs.gov/opa)

- OPA Update: biweekly e-Newsletter
Title X Family Planning Clinic Locator and Database

An essential tool for storing, accessing, and maintaining up-to-date information on grantee organizations, subrecipients, and service sites.
The Title X Family Planning Clinic Locator provides information about clinics offering a broad range of family planning and preventive health services.

The Family Planning Clinic Locator is often the first stop for individuals to find a Title X Family Planning Clinic near them.
• The grantee and service site database enables project officers, grantees, and service site users to effectively maintain their site data.
• The database is the authoritative source and mechanism for accessing all approved Title X family planning service sites.
As stated in your Notice of Award, it is important to keep your sites updated in the database:

- In order to maintain an **accurate** record of current Title X service sites, grantees are expected to provide timely notice to the Office of Population Affairs (OPA), as well as to the appropriate HHS project officer, of any deletions, additions, or changes to the name, location, street address and email, and contact information for Title X grantees and service sites.
- This database will also be used to verify eligibility for 340b program registration and recertification.
- You must enter your changes to the Title X database **within 30 days** of the change at [https://www.opa-fpclinicdb.com/](https://www.opa-fpclinicdb.com/).
- All changes will be reviewed and approved by the relevant HHS project officer prior to being posted on the OPA website.
- This does not replace the prior approval requirement under HHS grants policy for changes in project scope, including clinic closures.
- You must comply with this and all terms and conditions outlined in the grant award.
Title X Family Planning Program Grant Requirements
Important Timelines

- **Project Period:** 04/01/2019 – 03/31/2022
- **Budget Period:** 04/01/2019 – 03/31/2020
- **Non-competing Application:** Released in October 2019; Due late December 2019
- **Federal Financial Report (FFR)**
  - 1\(^{st}\) reporting period – 04/01/2019 - 06/30/2019: due 07/30/2019
  - 2\(^{nd}\) reporting period – 07/01/2019 - 09/30/2019: due 10/30/2019
  - 3\(^{rd}\) reporting period – 10/01/2019 - 12/31/2019: due 01/30/2020
  - 4\(^{th}\) reporting period – 01/01/2020 – 03/31/2020: due 04/30/2020

**Note:** SAM Registration is required annually
Notice of Award

• Notice of Award (NoA) is the legally binding document issued to the receiving organization.

• NOA awards funds, sets Terms and Conditions, and allows funds to be drawn from the Payment Management System.

• Please read the ENTIRE document

• You accept the award, its associated terms and conditions, and regulations and policies incorporated by reference, when you draw or request funds from the Payment Management System.
Administrative Requirements

• Several actions require prior approval from OASH

• No proposed action can take place until Grants Management Officer written approval is granted:
  ▪ Change in Scope
  ▪ Significant re-budgeting
  ▪ Change in PI/PD or Reduction in PI/PD Time
  ▪ Alteration and Renovation
  ▪ Change of Grantee Organization
  ▪ Carryover request and No-Cost Extension
Notification

Items requiring written notification to OGM include:

• Change of Authorizing Official
• Organizational name change
• Change of contact information, for example, address, phone, e-mail

NOTE:
Organizational changes such as mergers and re-organizations may require a successor-in-interest action. These are complicated and require significant processing time. Contact your specialist as soon as you aware of a potential change.
Project Reporting

• Quarterly Federal Financial Reports (FFRs) – SF-425
  ▪ Due 30 days after the end of each federal fiscal year quarter
  ▪ FFRs are comprehensive

• Audits – if applicable
  ▪ 45 CFR § 75.500

• Sub-award reporting – [https://www.FSRS.gov](https://www.FSRS.gov)

• End of project period (closeout) reports
  ▪ Due 90 days from the end of the project period
  ▪ Comprehensive grant report as part of close out
  ▪ Submitted via Grant Notes in Grant Solutions

• Official guidance available on the OPA website
Save the Dates!

• OPA Database Webinar
  ▪ June 2019

• 2019 Title X National Grantee Meeting
  ▪ July 16-19, 2019
  ▪ Renaissance Arlington Capital View, Arlington VA
  ▪ Visit https://titlexmtg.opatasystem.com/ to register and for more information!
National Training Centers
Welcome to the Title X National Training Centers!

May 9, 2019
About Us

• Two national, OPA-funded training centers:
  – Family Planning National Training Center (FPNTC) – serves all Title X agency staff
  – National Clinical Training Center for Family Planning (NCTCFP) – specifically charged with training clinical staff

• Provide training, technical assistance, and resources to support Title X agencies in delivering high-quality family planning and preventive health services
# Foundational Trainings

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<td>Title X Orientation: Program Requirements for Title X Funded Family Planning Projects</td>
<td>eLearning</td>
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<td>Counseling Adolescents About Sexual Coercion and Abuse</td>
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<tr>
<td>Mandated Child Abuse Reporting Law: Developing and Implementing Policies and Training</td>
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<td>Encouraging Family Participation in Adolescent Decision Making</td>
<td>Training Guide</td>
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## Foundational Trainings (cont.)

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<tr>
<td>Human Trafficking in the Family Planning Setting</td>
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<td>Putting the QFP Into Practice Series</td>
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<td>Quality Contraceptive Counseling and Education: A Client-Centered Conversation</td>
<td>eLearning</td>
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FPNTC Training Tracking System

• Staff can obtain certificates of completion and CE credit for eLearning courses and archived webinars
  – Must be registered on fpntc.org to obtain the certificate!

• New feature!
  – Training Administrators can create training lists, share with staff, and track their completion
Coming Soon...

- List of Title X Training Requirements
- Updated Mandatory Reporting Training Guide
- Program Monitoring Resources
Title X Grantee Liaisons

• Each Title X grantee has an assigned “Grantee Liaison” at the FPNTC who will contact them periodically to gather input and share information.
• Title X Grantee Liaisons will be reaching out in the next few weeks to introduce the FPNTC and talk about training needs.
• Title X grantees can reach out directly to their liaisons or to https://www.fpntc.org/contact-us with any questions or concerns related to family planning training.
NCTCFP Training Opportunities

• Technical assistance for clinicians
  – IUD Placement hands-on skills session
  – LARC Mentor Program
  – Cultural sensitivity
  – National Reproductive Health Conference
    • Save the Date: August 14, 2019
Web-Based Resources for Clinicians

• LARC Link
• Competencies Connection
• QFP App (mobile device and desktop friendly)
• Webinars (live and archived)
• Articles of Interest
• Podcast series
• Instructional videos
4 Action Steps – Contact Us!

1. Sign up for the FPNTC newsletter at fpntc.org
2. Sign up for the NCTCFP newsletter at ctcfp.org
3. Register for an account on fpntc.org to track training completions
4. Clinical staff should register for the Health-eKnowledge training system on ctcfp.org to access clinical training
Thank you!

www.fpntc.org/contact
www.ctcfp.org/contact
Questions?

Thank you for participating
Framework. Family planning services: contraceptive services, pregnancy testing and counseling, achieving pregnancy, basic infertility services, preconception health, sexually transmitted disease services. Related preventive health services (e.g., screening for breast and cervical cancer). Other preventative health services (e.g. lipid disorders).

A diagram structured as follows: a box labeled “Determine the need for services (Pregnancy Intention Screening/One Key Question)” is divided into two choices, one is “Reason for visit is related to preventing or achieving pregnancy”, the other box is “Initial reason for visit is not related to preventing or achieving pregnancy”. Choosing the “Reason for visit is related to preventing or achieving pregnancy” path, there are multiple boxes labeled, “Contraceptive Services”, “Pregnancy testing and counseling”, “Achieving Pregnancy”, and “Basic infertility services”, following this path, another box is shown labeled, “Clients should also be offered these services, per recommendations”. Inside this box are two more boxes labeled, “STD services” and “Preconception health services”. Finally the path ends with a box labeled, “Related preventive health services”. Choosing the path, “Initial reason for visit is not related to preventing or achieving pregnancy”, there is another box labeled, “Acute care chronic care management Preventive services”. From there, a box labeled, “Assess need for services related to preventing or achieving pregnancy” is shown. This box also branches to a box containing multiple boxes labeled, “Contraceptive Services”, “Pregnancy testing and counseling”, “Achieving Pregnancy”, and “Basic infertility services”. The text, “if needed, provide services” is shown for this box. Finally the main path ends with the text, “If services are not needed at this visit, re-assess at subsequent visits”.

A screenshot of the Title X Family Planning Clinic Locator and Database search-results and clinic detail web pages. The search-results page shows a map with multiple clinics shown as pins on that map. The clinic detail web site shows a small map with a pin in the center representing the clinic along with various details on the clinic including contact information and services offered.