



March 25, 2026

The Honorable Robert F. Kennedy, Jr.  
Secretary of Health and Human Services  
U.S. Department of Health and Human Services  
200 Independence Avenue, N.W.  
Washington, D.C. 20201

Dear Secretary Kennedy,

As members of the Reproductive Freedom Alliance,<sup>1</sup> a nonpartisan coalition of 23 Governors committed to protecting access to reproductive health care, we write to urge HHS to quickly move forward the next round of Title X funding to ensure no lapses in funding or service.

Governors have long played an important role in improving health outcomes for those in their states—indeed, that is one of their most critical obligations in public service – and protecting and ensuring access to safe and effective health care is a key priority for RFA Governors.<sup>2</sup> Title X is a critical program that serves about 2.8 million patients each year,<sup>3</sup> ensuring continuous access to contraception and other sexual health services for underinsured and uninsured people across the country. Title X service grantees provide essential services such as preventive care, cancer screening, sexually transmitted infection testing and treatment, and other services for patients who may otherwise never see a health care provider.

On February 3, 2026, President Trump signed into law the FY 2026 Health and Human Services appropriations bill, which included \$286.5 million for Title X. This budget appropriation continues a long tradition of support for this federal/state partnership program that has consistently shared strong bipartisan support. This funding is part of a 5-year grant cycle, which began in 2022. Grants are typically renewed by April 1<sup>st</sup> of each year, and Title X grantees receive instructions or guidance about applying for renewals months in advance of a new funding cycle to give grantees sufficient time to submit applications for federal review and approval. However, service providers only received the non-competing continuation application on March 13, 2026 and were required to submit the applications just seven days later. This extremely short timeline raises significant concerns that these applications will not be reviewed and approved

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<sup>1</sup> The following Governors are members of the Reproductive Freedom Alliance: Arizona Governor Katie Hobbs, California Governor Gavin Newsom, Colorado Governor Jared Polis, Connecticut Governor Ned Lamont, Delaware Governor Matt Meyer, Guam Governor Lou Leon Guerrero, Hawai'i Governor Josh Green, Illinois Governor JB Pritzker, Kentucky Governor Andy Beshear, Maine Governor Janet Mills, Maryland Governor Wes Moore, Massachusetts Governor Maura Healey, Michigan Governor Gretchen Whitmer, Minnesota Governor Tim Walz, New Jersey Governor Mikie Sherrill, New Mexico Governor Michelle Lujan Grisham, New York Governor Kathy Hochul, North Carolina Governor Josh Stein, Oregon Governor Tina Kotek, Pennsylvania Governor Josh Shapiro, Rhode Island Governor Daniel McKee, Washington Governor Bob Ferguson, and Wisconsin Governor Tony Evers.

<sup>2</sup> See, e.g., Minn. Dep't of Health, Government's Responsibility for Public Health, <https://www.health.state.mn.us/communities/practice/resources/chsadmin/mnsystem-responsibility.html> (last visited Jan. 8, 2026).

<sup>3</sup> *Id.*

before March 31st. With the April 1, 2026 renewal deadline fast approaching, Title X service grantees, including state governments or nonprofit agencies in nearly every state, risk a lapse in funding to support critical health care in Title-X funded health centers through March of 2027. **The Reproductive Freedom Alliance urges the Department of Health and Human Services (HHS) to renew existing grantees immediately for a one-year funding extension before March 31st.** The funding is critically necessary to ensure continuous care for patients who rely on Title X providers.

According to the Commonwealth Fund, “[t]he Title X Family Planning Program provides equitable and reliable access to contraception nationwide and is a critical funding stream for building and maintaining the overall health of people in the United States.”<sup>4</sup> Moreover, with recent budget cuts to Medicaid, “an estimated 15.9 million people, including 5.7 million women of reproductive age, will lose Medicaid coverage,”<sup>5</sup> making access to contraception and sexual health care through Title X even more important.

To quote the Office of Population Affairs within HHS:

The Title X family planning program is a critical part of America’s public health safety net, serving as a point of entry into care for nearly 195 million over the program’s more than 50-year history. . . Title X family planning clinics have played a critical role in ensuring access to a broad range of family planning and preventive health services. The HHS Office of Population Affairs (OPA) funds Title X family planning service grant recipients who support hundreds of subrecipients and thousands of service sites.<sup>6</sup>

Title X service grantees provide excellent services, ensuring that services are appropriate and that the quality of the service delivery is “consistent with nationally recognized standards of care.”<sup>7</sup> Once admitted to the program, “Title X grantees provide clients with a broad range of medically approved family planning services, which includes all Food and Drug Administration (FDA)-approved contraceptive products and natural family planning methods” as well as support in achieving pregnancy, basic infertility services, and “other preconception health services.”<sup>8</sup>

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<sup>4</sup> Helen Robbins, Kate Meyer, Zara Day, Reducing or Eliminating Title X Family Planning Program Would Restrict Contraceptive Access Nationwide, Blog, Oct. 22, 2025, <https://www.commonwealthfund.org/blog/2025/reducing-or-eliminating-title-x-family-planning-program-would-restrict-contraceptive> (last accessed March 12, 2026).

<sup>5</sup> *Id.*

<sup>6</sup> Department of Health and Human Services, Office of Population Affairs, Title X Service Grants, <https://opa.hhs.gov/grant-programs/title-x-service-grants> (last accessed March 12, 2026).

<sup>7</sup> *Id.*

<sup>8</sup> *Id.*



Title X recipients provide care “through a network of health care providers, including federally qualified health centers, public health departments, hospitals and community-based clinics.”<sup>9</sup>

Moreover, Title X services are extremely cost effective, “saving \$7 in Medicaid-related expenses for every dollar spent”<sup>10</sup> and successful at improving overall health, including by helping “people avoid pregnancies they do not want and plan and space pregnancies they do want, which decreases the risk of complications like preterm birth and low-birth-weight births.”<sup>11</sup> In addition to contraceptive care, Title X-funded clinics also provide a wide range of other critical health services, such as cancer screenings, STI and HIV testing, cardiovascular health checks and referrals to primary care.<sup>12</sup> OPA and other experts have also long recognized that for many Title X patients, Title X services are the only health care services they receive all year.<sup>13</sup>

RFA urges HHS to act quickly to ensure that this appropriated Title X funding is released on time, so that service providers in our states and states across the country can continue to provide these essential, time-sensitive services.

Sincerely,

**Tony Evers**, Governor of Wisconsin

**Bob Ferguson**, Governor of Washington

**Lourdes A. Leon Guerrero**, Governor of Guam

**Maura Healey**, Governor of Massachusetts

**Katie Hobbs**, Governor of Arizona

**Kathy Hochul**, Governor of New York

**Tina Kotek**, Governor of Oregon

**Ned Lamont**, Governor of Connecticut

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<sup>9</sup> Guttmacher, Fact Sheet, Features and Benefits of the Title X Program, Feb. 2025, <https://www.guttmacher.org/fact-sheet/features-and-benefits-title-x-program> (last accessed March 12, 2026).

<sup>10</sup> *Id.*; also Helen Robbins, Kate Meyer, Zara Day, Reducing or Eliminating Title X Family Planning Program Would Restrict Contraceptive Access Nationwide, Blog, Oct. 22, 2025, <https://www.commonwealthfund.org/blog/2025/reducing-or-eliminating-title-x-family-planning-program-would-restrict-contraceptive> (last accessed March 12, 2026).

<sup>11</sup> *Id.*

<sup>12</sup> *Id.*

<sup>13</sup> National Family Planning and Reproductive Health Association, Title X. [https://www.nationalfamilyplanning.org/title-x\\_title-x-key-facts](https://www.nationalfamilyplanning.org/title-x_title-x-key-facts) ), last accessed March 12, 2026, (“A 2016 study found that 60% of the women who received contraceptive care from Title X-funded health centers had seen no other medical provider in the previous year.”).



**Michelle Lujan Grisham**, Governor of New Mexico

**Daniel J. McKee**, Governor of Rhode Island

**Matt Meyer**, Governor of Delaware

**Wes Moore**, Governor of Maryland

**Gavin Newsom**, Governor of California

**Jared Polis**, Governor of Colorado

**JB Pritzker**, Governor of Illinois

**Josh Shapiro**, Governor of Pennsylvania

**Josh Stein**, Governor of North Carolina

**Gretchen Whitmer**, Governor of Michigan

CC: Admiral Brian Christine, MD, Assistant Secretary for Health and Head of the United States Public Health Service Commissioned Corps, U.S. Department of Health and Human Services

Darcie L. Johnson, Director, Office of Intergovernmental and External Affairs, U.S. Department of Health and Human Services