

The Irreplaceable Role of Planned Parenthood Health Centers

Planned Parenthood is the nation's leading provider and advocate of high-quality, affordable sexual and reproductive health care for all people, as well as the nation's largest provider of sex education. Planned Parenthood health centers provide millions of people in the U.S. with birth control, sexually transmitted infection (STI) testing and treatment, lifesaving cancer screenings, and safe, legal abortion. At least one in five women has relied on a Planned Parenthood health center for care in her lifetime.

- In 2021, Planned Parenthood health centers served 2.1 million patients – providing more than 4.4 million tests and treatments for sexually transmitted infections; more than 190,000 breast exams; more than 228,000 Pap tests; and nearly 2.3 million birth control services.
- Planned Parenthood leads the country with the most advanced medical standards and guidelines for reproductive health care and uses clinical research to advance health care delivery to reach people who need care.
- Seventy-six percent (76%) of Planned Parenthood health centers are located in rural or medically underserved areas. Planned Parenthood health centers provide primary and preventive health care to many who otherwise would have nowhere to turn for sexual and reproductive health care.
- Nearly half of Planned Parenthood patients are people of color, with more than 581,000 patients who identify as Latino and more than 360,000 patients who identify as Black.
- Of Planned Parenthood patients who report their income, more than 70% live with incomes at or below 150% of the federal poverty level (FPL), and almost half of patient visits (48%) access care through the Medicaid program and/or the Title X family planning program.

For many people, Planned Parenthood is their only source of care – making our health centers an irreplaceable piece of the country's health care system. And as experts in sexual and reproductive health care, Planned Parenthood health centers often provide services that other safety-net providers simply do not offer.

- For many people, Planned Parenthood health centers have been their main source of primary and reproductive health care. Research has shown that four in ten (41%) patients rely on a family planning clinic as their only recent source for health care services.¹

- In a study of community health centers (CHCs), over two-thirds (69%) reported referring their patients to family planning providers, like Planned Parenthood health centers, for family planning care.²
- A 2017 study found that Planned Parenthood health centers serve more contraceptive clients than any other publicly funded health care provider, serving 32% of all contraceptive patients, even though Planned Parenthood health centers comprise just 6% of the provider network.³
- The average Federally Qualified Health Center (FQHC) site offering contraceptive care serves 320 contraceptive patients in a year. The average Planned Parenthood health center has served 2,950 contraceptive patients in a year. That's more than nine times as many contraceptive patients each year.⁴
- Many FQHC sites do not offer reproductive care. In fact, in 2015, 40% of FQHC locations provided contraceptive care to fewer than 10 patients. In stark contrast, a 2017 study found that nearly all Planned Parenthood health centers offered the full range of contraceptive method options, compared to only 52% of FQHC sites.⁵
- Using the most recent data available, a 2017 study found that in 57% of counties with a Planned Parenthood health center, Planned Parenthood serves at least half of contraceptive patients seeking care at publicly funded providers. In 26% of the counties with a Planned Parenthood health center, Planned Parenthood serves five times as many contraceptive patients as FQHCs.⁶

Blocking people from accessing care at Planned Parenthood health centers comes at too high a cost. Without Planned Parenthood, many people would have nowhere else to turn for care. People who already face barriers to health care due to systemic racism and discrimination – people of color, people with low incomes, and people who live in rural areas – would be harmed the most.

- If Congress were to block Medicaid patients from Planned Parenthood health centers, the Congressional Budget Office (CBO) estimates 360,000 would be left without health services.⁷
- The CBO also projected that permanently barring Planned Parenthood health centers – which provide critical sexual and reproductive health care – from participating in federal programs would result in a net cost of \$130 million to taxpayers over 10 years, due to an increase in unintended pregnancies.⁸ Planned Parenthood health centers provide health care that helps prevent an estimated 355,000 unintended pregnancies each year.
- When Texas eliminated Planned Parenthood from its state family planning program, researchers found women had reduced access to the full range of sexual and reproductive health care and likely experienced higher rates of unintended pregnancy. Specifically, researchers found a 35% decline in women using the most effective methods of birth control and a dramatic 27% spike in births among women who had previously used injectable contraception.⁹
- Following the closure of Planned Parenthood health centers in Wisconsin and Texas, researchers found that an increase of 100 miles to the nearest health center resulted in a 6% decrease in women getting breast exams, and a 9% decrease in women accessing Pap tests.¹⁰

Community health centers (CHCs) cannot absorb Planned Parenthood's patients. Blocking patients from getting the care they need at Planned Parenthood health centers would cause a national health care disaster.

- "... [FQHCs] cannot be expected to deliver contraceptive care to the large numbers of women who currently rely on Planned Parenthood or other Title X-supported providers. In fact to suggest otherwise willfully oversimplifies the considerable challenges FQHCs would face in doing so, and ignores how these proposals put millions of U.S. women at very real risk of being unable to obtain the basic care they need." – [The Guttmacher Institute](#)
- Dr. Georges Benjamin, the head of the American Public Health Association, called the proposal to defund Planned Parenthood and redirect funding to FQHCs "[ludicrous](#)." – [USA Today](#)
- "Proponents of Planned Parenthood "defunding" often assert that other providers will fill the gap. They are wrong." – Hal Lawrence, Executive Vice President & CEO, American Congress of Obstetricians and Gynecologists & Debra Ness, president, National Partnership for Women & Families, [Annals of Internal Medicine](#)
- "To assume that health centers are in a position to fill the void left by barring a health care provider of Planned Parenthood's importance to Medicaid beneficiaries ... is simply wrong." – Sara Rosenbaum, George Washington University, [Health Affairs](#)
- "The AMA cannot support provisions that prevent Americans from choosing to receive care from physicians and other qualified providers, in this specific case, those associated with Planned Parenthood affiliates, for otherwise covered services." – [The American Medical Association](#)

¹ Frost, Jennifer J., et al. (2012). "Specialized Family Planning Clinics in the United States: Why Women Choose Them and Their Role in Meeting Women's Health Care Needs," Guttmacher Institute. New York, New York. [Online]. <https://www.sciencedirect.com/science/article/pii/S1049386712000734?via%3Dihub>

² Wood, Susan, et al. (2013). "Health Centers and Family Planning: Results of a Nationwide Study," Washington, DC: George Washington University.

³ Hasstedt, Kinsey. (2017). "Federally Qualified Health Centers: Vital Sources of Care, No Substitute for the Family Planning Safety Net," Guttmacher Institute. [Online]. <https://www.guttmacher.org/gpr/2017/05/federally-qualified-health-centers-vital-sources-care-no-substitute-family-planning>

⁴ Ibid.

⁵ Ibid.

⁶ Ibid.

⁷ Congressional Budget Office. (2017). "Congressional Budget Office Cost Estimate: American Health Care Act." March 13, 2017. [Online]. <https://www.cbo.gov/system/files/115th-congress-2017-2018/costestimate/americanhealthcareact.pdf>

⁸ Letter from Keith Hall, Director of CBO, to Representative Kevin McCarthy, Majority Leader, U.S. House of Representatives. (2015, September 22). [Online]. <https://www.cbo.gov/sites/default/files/114th-congress-2015-2016/costestimate/ltrpermanentdefundplannedparenthood.pdf>

⁹ Stevenson, Amanda J, et al. (2016). "Effect of Removal of Planned Parenthood from the Texas Women's Health Program," New England Journal of Medicine. 2016; 374:853-860

¹⁰ Lu, Yao, et al. (2014). "The Impact of Family Planning Funding Cuts on Preventive Care," Princeton University, Center for Health and Wellbeing. [Online]. https://papers.ssrn.com/sol3/papers.cfm?abstract_id=2442148