

# EXHIBIT R

**UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF PENNSYLVANIA**

COMMONWEALTH OF  
PENNSYLVANIA,

Plaintiff,

v.

DONALD J. TRUMP *et al.*

Defendants.

**NO. 2:17-cv-04540-WB**

**DECLARATION OF DAYLE STEINBERG**

I, Dayle Steinberg, hereby submit this declaration in support of the Motion for Preliminary Injunction filed by the Commonwealth of Pennsylvania in the above-captioned matter and, in support thereof, state as follows:

1. I am the CEO of Planned Parenthood Southeastern Pennsylvania. Planned Parenthood is one of the nation's largest providers of health care to women, men, and teenagers.
2. Nationwide, Planned Parenthood operates more than 600 health centers providing a variety of health services, including family planning services. Each year, 2.4 million women, men, and young people visit a Planned Parenthood health center to obtain services or information. Approximately 75% of these patients seek services to prevent unintended pregnancy.
3. Planned Parenthood Southeastern Pennsylvania provides services in Chester, Delaware, Montgomery, and Philadelphia Counties. We operate 8 health centers in the area and, in fiscal year 2016, provided services to 36,779 women, men, and teens in these centers.

**I. The Title X Program Provides Federal Grants for Family Planning Services**

4. Title X of the Public Health Service Act<sup>1</sup> provides grants to both public and private agencies for family planning services. Specifically, Title X authorizes grant money “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.”

5. Title X grants are awarded through a competitive process. They fund services provided by state and local health departments, hospitals, university health centers, and non-profit agencies. The Title X program is overseen by the Office of Population Affairs of the U.S. Department of Health and Human Services (HHS-OPA) oversees the Title X grant program.

6. Since 2010, Title X funding has decreased by \$31 million, nationally. In 2010, the nationwide program received \$317.5 million; in 2017, it received \$286.5 million.<sup>2</sup> In addition, there are frequent efforts by some in Congress to eliminate funding for the program entirely.

7. In Pennsylvania, Title X grant money is provided directly to four private, non-profit, regional Family Health Councils. They are: AccessMatters (formerly the Family Planning Council) in Philadelphia; Adagio Health in Pittsburgh, Maternal and Family Health Services, Inc. in Wilkes Barre, and the Family Health Council of Central Pennsylvania in Camp Hill. The Alliance of Pennsylvania Councils supports and coordinates the efforts of the four Family Health Councils.

8. These four Family Health Councils also receive funding from the Commonwealth of Pennsylvania as well as local sources. For instance, in the fiscal year ending June 30, 2016, AccessMatters received approximately \$8.2 million in federal funding and \$3.9 million in state

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<sup>1</sup> 42 U.S.C. § 300 *et seq.*

<sup>2</sup> National Family Planning & Reproductive Health Association, Title X Budget & Appropriations, *available at* [https://www.nationalfamilyplanning.org/title-x\\_budget-appropriations](https://www.nationalfamilyplanning.org/title-x_budget-appropriations).

and local funding. The vast majority of this \$3.9 million was provided by the Pennsylvania Department of Health and the Pennsylvania Department of Human Services.<sup>3</sup>

## **II. Pennsylvania's Family Planning Clinics**

9. These four Family Health Councils in turn provide funding to a variety of organizations in Pennsylvania. These organizations operate clinic-based health centers throughout the Commonwealth.

10. As of December 2016, there were 162 facilities in Pennsylvania receiving Title X funding. Each county in Pennsylvania has at least one such clinic.

11. These clinics provide women and men with access to a variety of family planning services. These services include contraception, HIV and STD testing, counseling services, pregnancy testing, certain infertility services, and breast and cancer screening. They are important to the citizens of Pennsylvania and to the overall health of Pennsylvania, as a whole.

12. Although facilities that receive Title X grants are typically referred to as "Title X clinics," they actually receive funding from a variety of sources and only a small part through Title X. In fact, Title X accounts for less than one-fifth of their revenue.

13. According to the 2016 Title X Family Planning Annual Report<sup>4</sup> (at ES-3), the top three sources of revenue for Title X clinics nationwide were Medicaid and CHIP (the Children's Health Insurance Program) (39% of revenue); Title X (19%); and state government funding (10%).

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<sup>3</sup> AccessMatters, *Consolidated Financial Statements and Supplemental Information, Years Ended June 30, 2016, and 2015*, at 4, available at <http://www.govwiki.info/pdfs/Non-Profit/PA%20Accessmatters%202016.pdf>.

<sup>4</sup> Department of Health and Human Services Office of Population Affairs, *Title X Family Planning Annual Report, 2016 National Summary* (August 2017), available at <https://www.hhs.gov/opa/sites/default/files/title-x-fpar-2016-national.pdf>.

14. Title X acts as “the payer of last resort” for these clinics. In other words, each clinic can only use Title X funds to pay for services if no other source of funding is available. This includes funding from the Commonwealth or other federal funding. As a result, many of our patients receive services that are funded by multiple sources.

15. For this reason – and to ensure that clinic patients can receive the best possible care – Title X clinics work to educate patients about available government health programs and help patients enroll in programs for which they are eligible.

16. In Pennsylvania, these programs include Medical Assistance (Medicaid) and the Family Planning Service Program, both of which received Commonwealth funding. Title X clinics will assist patients who are eligible for (but not enrolled in) these programs with the necessary paperwork so that they can be enrolled. Doing so not only ensures that the patient has all the coverage for which she is eligible for, but it allows the clinic to save Title X and Commonwealth grant money.

17. While the priority of the Family Health Councils is to assist low income families, each Title X clinic in Pennsylvania provides family planning services to any individual seeking *services*, regardless of income or insurance status. Family planning services are provided based on a sliding scale fee structure depending on the individual/family income level.

18. According to the 2016 Annual Report (at B-3), in 2016, family planning services through Title X grants were provided to 198,825 Pennsylvania residents.

19. Of these recipients of care, 73% had some form of insurance. Among this 73%, 46% had insurance through Medicaid or another government-funded program (vs. 37% nationwide) and 27% had private insurance (vs. 18% nationwide) (2016 Annual Report at B-7).

20. Many Title X patients are currently employed or have a family member who is currently employed. Many of these patients receive insurance through their employer or their family member's employer.

21. In some cases, Title X clinics are reimbursed by the insurance company; however, private insurance often does not provide sufficient coverage. Thus, while 18% of all Title X users nationwide have private insurance, private sources of funding account for only 10% of clinic revenue (2016 National Report at B-7).

### **III. The Effects of the Contraceptive Care Mandate**

22. I understand that the Administration has issued new regulations that will make it easier for employers and others to opt out of the Affordable Care Act's contraceptive mandate.

23. My colleagues at Planned Parenthood Southeastern Pennsylvania and I are very concerned that this action will lead to an increase in the number of employers in Pennsylvania that do not provide their employees with adequate insurance coverage for contraceptive care.

24. Women who need contraceptive care but whose employers refuse to provide coverage for it will be forced to get care elsewhere. Many of these women will seek assistance from government programs.

25. In fact, for many low-income women in this situation, a government-funded program will be the only viable option for obtaining contraceptive care.

26. Therefore, we expect that many women in Pennsylvania who lose their contraceptive coverage will seek care from one of the 162 Title X clinics in the Commonwealth.

27. Some of these women will likely be eligible for either Medical Assistance (Medicaid) or Pennsylvania's Family Planning Services program. If they seek care at a Title X clinic in Pennsylvania, the clinic will help them enroll in either program.

28. Low-income women who seek services from a Title X clinic and are not eligible for these programs will receive contraceptive care funded by other sources. In most instances, their care will be funded through Title X and funding provided by the Commonwealth of Pennsylvania.

29. We expect that the new exemptions from the Contraceptive Care Mandate will lead to an increase in the number of women who get contraception through Medicaid and Family Planning Services, as well as an increase in the number of women who obtain contraception from Title X clinics paid for by federal and state funding.

30. We are also concerned that some women who lose their coverage will stop using contraception altogether. Women who stop using contraception are more likely to have unplanned pregnancies and to require additional medical attention. According to an analysis of 2010 data by the Guttmacher Institute, 68% of unplanned births are paid for by public insurance programs, including Medicaid, while 38% of planned births are paid for by these programs.<sup>5</sup>

31. As I explained above, meeting this increased need will require additional state funds.

32. For all these reasons, I believe that the new exemptions to the contraceptive mandate will have a negative effect on the health of Pennsylvania women; that they will increase the number of women who receive contraceptive coverage through Medical Assistance and Family Planning Services; and that they will impose additional economic and other burdens on Title X clinics across the Commonwealth.

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<sup>5</sup> Guttmacher Institute, *Public Costs from Unintended Pregnancies and the Role of Public Insurance Programs in Paying for Pregnancy-Related Care: National and State Estimates for 2010* (Feb. 2015), available at <https://www.guttmacher.org/report/public-costs-unintended-pregnancies-and-role-public-insurance-programs-paying-pregnancy>.

I declare under penalty of perjury that the foregoing is true and correct to the best of my knowledge, information, and belief.

A handwritten signature in cursive script, reading "Jayle Steinberg", is written over a horizontal line. The signature is fluid and extends slightly beyond the line on both sides.

Dated: October 31, 2017