

# New federal regulations impose gag rule on physicians, restrict access to critical services

FEB 22, 2019

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A newly issued federal regulation, if allowed to stand, would limit women's access to care and force doctors to withhold information about all of their health care options. The AMA says government regulators got this one terribly wrong.

"This rule interferes with and imposes restrictions on the patient-physician relationship. For all intents and purposes, it imposes a gag rule on what information physicians can provide to their patients," said AMA President Barbara L. McAneny, MD. "The patient-physician relationship relies on trust, open conversation and informed decision making and the government should not be telling physicians what they can and cannot say to their patients."

The new rule will withhold funds to qualified family planning providers, such as Planned Parenthood, that also offer abortion services. By dramatically revising the Title X family-planning program, the rule will also prohibit, in most cases, referrals for abortion and restrict counseling about abortion services. The rule also will eliminate requirements that Title X sites offer a broad range of medically approved family planning methods and pregnancy options counseling.

"Protecting the integrity of the patient-physician relationship and defending the freedom of communication between patients and their physicians is a fundamental priority for the AMA," Dr. McAneny added. "With this action, the administration wants to block physicians from counseling patients about all of their healthcare options and from providing appropriate referrals for care. This is a clear violation of patients' rights in the Code of Medical Ethics."

Roughly 4,000 clinics received Title X funds that accounted for 19 percent of their revenue (\$244.6 million) in 2017, according to the Health and Human Services (HHS) 2017 national summary on Title X. Those clinics served 4 million family planning clients that generated 6.6 million encounters.

The HHS proposal also will direct new funds to organizations that promote fertility awareness and abstinence as family-planning methods, instead of those that offer counsel on the full range of evidence-based methods.

## Rule threatens access to care

Two-thirds of Title X patients had family incomes below the federal poverty level and 3.6 million qualified for subsidized or free services, according to the 2017 national summary.

Title X funds were used for more than 2.4 million screenings for gonorrhea, more than 2.1 million for chlamydia, and about 1.2 million for HIV. Title X clinics also provided 2.8 million patients with some type of contraception. The clinics also conducted cervical cancer screening Pap tests for about 650,000 patients, and performed nearly 900,000 breast exams.

“The AMA also strongly objects to the administration’s plan to withhold federal family planning funding from entities that provide critical medical services to vulnerable populations,” said Dr. McAneny. “Millions of women depend on the Title X program for access to much-needed healthcare including cancer screenings, birth control, STI testing and treatment, and other exams. This is the wrong prescription and threatens to compound a health equity deficit in this nation. Women should have access to these medical services regardless of where they live, how much money they make, their background, or whether they have health insurance.”

According to a Kaiser Family Foundation issue brief, there may be sites that do not offer abortion services and qualify for Title X funds, but may decide not to participate in the program because of concerns over medical liability or burdensome administrative requirements.

The brief also noted how, if fully implemented the rule would “shrink the network of participating providers and have major repercussions for low-income women across the country that rely on them for their family planning care.”

“Title X is popular, successful, and has had bipartisan support for decades,” Dr. McAneny said. “Our country is at a 30-year low for unintended pregnancy and an historic low for pregnancy among teenagers — largely because of expanded access to birth control. We should not be walking back from that progress.”