

March 30, 2016

Representative Tara Mack Health and Human Services Reform Committee Minnesota State Legislature

Dear Representative Mack and Members of the Committee:

My name is Lynda Bennett, I am Executive Director of Face to Face Health and Counseling in St Paul, a nonprofit agency serving youth and young adults ages 11 to 24. I am writing in opposition to HF3373/HF3374 which I believe will have huge unintended consequences across the state, significantly restricting essential family planning services for individuals in the most severe need. Face to Face operates a "safety net clinic" on the East side of St Paul that serves patients regardless of their insurance status. We turn no one away for lack of ability to pay.

In addition to our clinic, we provide a full range of support services at SafeZone, the only drop-in resource center in Ramsey County for youth experiencing homelessness. The demographic we serve is one with the greatest in health disparities. We are an FPSP grantee as well as a Positive Alternatives grantee. The latter allows us to provide a best practice, research proven prenatal clinic for young women from populations with historically poor birth outcomes and a much higher than average infant mortality rate.

I also represent the Reproductive Health Alliance, a statewide association of reproductive health clinics on which I serve as a board member. Family planning funding is critical for small clinics such as Face to Face which provide care for the whole person, a high level of care coordination, health screening and health education for thousands of young people each year, much of which is not reimbursable by insurance and would be impossible without these funds. The funding allows Face to Face to provide a full year of post-partum follow-up with young mothers to address barriers to family planning and assure that she has the necessary resources to care for herself and her child.

FPSP funding which has been around since 1978 allows clinics such as ours to provide long acting reversible birth control options that are proven to be the most effective in preventing unplanned pregnancies. The high cost of these methods is also not fully reimbursed by insurance. Investment in a method that allows a woman to prevent an unplanned pregnancy for 3-5 years saves thousands of dollars in medical and other expenses incurred as a result of an unplanned pregnancy. For a young woman raised and living in poverty, being able to delay child bearing allows her to focus on her education

and prepare herself to actively participate in the workplace, thus greatly increasing her potential to earn a living wage and end the cycle of poverty she grew up in.

Affordable family planning clinics provide an essential, affordable resource for patients across the state. This bill strips that support and would leave many individuals without these essential services. I don't believe there is any way the public entities could fill the gap in service delivery that would be created with the passage of this bill, which would result in defunding the large number of clinics across the state who rely on this support.

Sincerely,

LyndaW. Bennett, MSW, LISW

Executive Director