



Re: 2022 Title X Family Planning Grant Request for Proposals

The Indiana Family Health Council (IFHC) is accepting applications to be included in its 2022 Title X Family Planning Grant Application to the Office of Population Affairs.

Title X of the Public Health Services Act (PHS Act or the Act) was enacted in 1970 by Public Law 91-572 as a means of “Making comprehensive voluntary family planning services readily available to all persons desiring such services.”<sup>1</sup> The Title X funding is to “assist in the establishment and operation of voluntary family planning projects which shall cover a broad range of acceptable and effective family planning methods and services (including natural family planning methods, infertility services and services for adolescents” (Section 1001 of the Act 42 USC 300(a)). Section 1006 of the Act (42 USC 300a-4) ensures priority of services is given to clients from low-income families. Finally, Section 1008 of the Act (42 USC 300a-6) directs that “None of the funds appropriated under this title shall be used in program where abortion is a method of family planning.” The Indiana Family Health Council Board of Directors remains committed to Title X services **not** being co-located where abortion services occur.

The Indiana Family Health Council is a non-profit organization that promotes and facilitates family planning and reproductive health services for those in need. The organization was formed in 1975 and has had Title X Family Planning since 1976. IFHC currently funds 13 sub-recipients and operates three independent clinics in Indiana.

Eligibility for Title X funding through The Indiana Family Health Council will be determined in part through completing this application in full. Any public or nonprofit private entity may apply for the Indiana Family Health Council family planning contract; however, applicants must plan to operate service site(s) in Indiana.

If selected, it is anticipated funding will start April 1, 2022 and will be funded for three to five years (depending on HHS funding announcement). Continuation of funding in years two through five will be dependent on performance and funding allocation. All applications must be submitted by 11:59 PM ET October 18, 2021 to [info@ifhc.org](mailto:info@ifhc.org) or postmarked by October 18, 2021 and mailed to IFHC, 151 N. Delaware St. Suite 520, Indianapolis, IN 46204 ATTN: Grant Application. FAQs must be sent by September 30, 2021 to the same email/mail address. A presentation will be held on October 5, 2021 to answer FAQs. Call details will be posted to <https://www.ifhc.org/media-news/> by October 4, 2021.

<b>Primary Contact Information</b>	
Name:	
Organization:	
Address:	
Phone:	
E-mail Address	
Social Media Handles:	
How is the organization classified?	<input type="checkbox"/> Non-profit organization <input type="checkbox"/> Governmental entity <input type="checkbox"/> Hospital <input type="checkbox"/> Faith-Based Organization

<b>Organizational Information</b>	
<p>Please briefly describe your organization and its history.</p>	
<p>What is your organization's experience of utilizing federal funds?</p>	
<p>Why is it important for your organization to receive Title X funding from IFHC?</p>	
<p>Please describe your current staffing structure and expertise to implement the Title X program in clinical, administrative, and financial capacities. <b>Please attach organizational chart when submitting application.</b></p>	

<b>Operational Information</b>			
Does your organization currently provide healthcare services? If yes, please list the healthcare services provided.	<input type="checkbox"/> Yes <input type="checkbox"/> No		
Does your organization have a medical director who has OB/GYN experience?	<input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, who is your medical director?  If no, how will you identify a qualified medical director?		
Do you or will you take walk-ins or same-day appointments?	<input type="checkbox"/> Yes <input type="checkbox"/> No		
What county (ies) will the proposed Title X service site(s) be located?			
Which county (ies) will the proposed service site(s) target for Title X services?			
What is the address and phone number of the proposed service site(s)?			
How many Title X patients do you propose serving per service site?			
What is your estimated budget needed to implement the Title X program?			
What hours do you propose operating (must include one day of alternative hours—early morning, later evening, or weekend)	Sunday _____ Monday _____ Tuesday _____ Wednesday _____ Thursday _____ Friday _____ Saturday _____		
What services will be offered at the proposed site?	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <u>Birth Control</u>  <input type="checkbox"/> Birth Control Shot  <input type="checkbox"/> Birth Control Pill  <input type="checkbox"/> Birth Control Patch </td> <td style="width: 50%; vertical-align: top;"> <u>Women's/Men's Health</u>  <input type="checkbox"/> Folic Acid Supplementation  <input type="checkbox"/> Intimate Partner Violence Screening </td> </tr> </table>	<u>Birth Control</u> <input type="checkbox"/> Birth Control Shot <input type="checkbox"/> Birth Control Pill <input type="checkbox"/> Birth Control Patch	<u>Women's/Men's Health</u> <input type="checkbox"/> Folic Acid Supplementation <input type="checkbox"/> Intimate Partner Violence Screening
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	<input type="checkbox"/> Birth Control Ring <input type="checkbox"/> Tobacco Use Screening <input type="checkbox"/> Cervical Cap <input type="checkbox"/> Condoms—Male <input type="checkbox"/> Condoms—Female <input type="checkbox"/> Contraceptive Sponge <input type="checkbox"/> Hormonal Implants <input type="checkbox"/> Diaphragm w/ Spermicide <input type="checkbox"/> Emergency Contraception <input type="checkbox"/> Fertility Awareness based methods <input type="checkbox"/> Intrauterine Device—Copper IUD <input type="checkbox"/> Intrauterine Device—Hormonal IUD <input type="checkbox"/> Breast Feeding/LAM Method <input type="checkbox"/> Spermicide <input type="checkbox"/> Sterilization—Male <input type="checkbox"/> Sterilization—Female <u>Pregnancy Services</u> <input type="checkbox"/> Pregnancy Testing <input type="checkbox"/> Achieving Pregnancy Services <input type="checkbox"/> Basic infertility services <input type="checkbox"/> Non-Directive Counseling  <u>Cancer Screenings/Prevention</u> <input type="checkbox"/> Cervical Cancer Screening <input type="checkbox"/> Breast Cancer Screening <input type="checkbox"/> HPV Vaccine <input type="checkbox"/> Alcohol & Other Drug Use Screening <input type="checkbox"/> Tobacco Use Screening <input type="checkbox"/> Immunizations <input type="checkbox"/> Depression Screening <input type="checkbox"/> BMI <input type="checkbox"/> Blood Pressure Screening <input type="checkbox"/> Diabetes Screening  <u>STD Testing, Treatment &amp; Vaccines</u> <input type="checkbox"/> Chlamydia <input type="checkbox"/> Syphilis <input type="checkbox"/> Gonorrhea <input type="checkbox"/> Hepatitis B Screening <input type="checkbox"/> Hepatitis B Vaccine <input type="checkbox"/> Hepatitis C Testing  <u>HIV Testing &amp; Screening</u> <input type="checkbox"/> HIV Testing <input type="checkbox"/> PrEP for HIV Prevention
Do you currently use an Electronic Health Record (EHR) system? If yes, please list your organization’s EHR vendor and include if the EHR system has telehealth capacity.	<input type="checkbox"/> Yes <input type="checkbox"/> No  Name of EHR:  Telehealth capacity <input type="checkbox"/> Yes <input type="checkbox"/> No
Is your organization registered with the 340B Program? Please provide your 340B Number if you are registered with the 340B program.	<input type="checkbox"/> Yes <input type="checkbox"/> No  If yes, please provide your 340B number: _____

<b>Key Considerations</b>	
<p>Outreach and education is a core aspect of implementing the Title X program. How will you conduct outreach and education in targeted communities?</p>	
<p>Health Equity: The Robert Wood Johnson Foundation defines health equity as "... everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care." In what ways does your organization address health inequities and discrimination in your key population?</p>	

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<sup>i</sup> Pub. L. 91-572 ("The Family Planning Services and Population Research Act of 1970"), section 2(1).