

July 21, 2017

The Honorable Thomas E. Price, M.D. Secretary of Health and Human Services U.S. Department of Health and Human Services 200 Independence Avenue, SW Washington, DC 20201

## Dear Secretary Price:

We write in response to the Department of Health and Human Services (HHS or the Department) indicating it plans to unilaterally shorten the duration of grant agreements for the Teen Pregnancy Prevention (TPP) Program. The Office of Adolescent Health (OAH) has notified all 81 grantees that their five-year projects (originally awarded for FY 2015 through FY 2019) will end on June 30, 2018, after only three years. OAH has also notified the five National Capacity-Building Assistance Providers that their grants will end immediately, without the FY 2017 funding they were expecting and which Congress has already appropriated. These notices of shortened project periods are highly unusual, especially given that Congress has yet to act on FY 2018 appropriations. This action is short-sighted and puts at risk the health and well-being of women and our most vulnerable youth who depend on the evidenced-based work that TPP Program grantees are doing across the nation.

The annual appropriations bill that funds your Department sets out not only the funding amount for the TPP Program, but also directs the program's parameters. Grants must be medically accurate, age appropriate, and replicate programs that have been proven effective through rigorous evaluation. As such, the TPP Program is a pioneering example of evidence-based policymaking. Congressional leadership on both sides of the aisle as well as independent experts have called for increasing the use of data to build government programs that are supported by evidence, as indicated by the support for the bipartisan Commission on Evidence-Based Policymaking established by the Evidence-Based Policymaking Commission Act of 2016 (P.L. 114-140).

The TPP Program is making a vital contribution to building a body of knowledge of what works to prevent teen pregnancy. Since the start of the grant projects and prior to the recent notification of early termination, OAH has ensured the program includes high quality implementation, rigorous evaluation, innovation, and learning from results. The pace of progress has accelerated dramatically since the federal investments in evidence-based teen pregnancy prevention began. Since 2010, pregnancy rates among 15–19 year olds has declined by 41 percent nationwide—more than double the decline in any other six year period since rates peaked in 1991—and is at a historic low. Seventy-five percent of pregnancies among this population remain unintended. The TPP Program has been proven to support young people in delaying

sexual initiation and adopting sexual health behaviors that help them avoid unintended pregnancy.

Yet, the Department's notification to grantees suggests that HHS no longer prioritizes high quality evidence-based interventions serving some of the most at-risk youth and communities around the country. TPP Program grantees served half a million youth from FY 2010-FY 2014, and were well on their way to serving an additional 1.2 million youth in 40 states and territories during the FY 2015-FY 2019 project period. Despite these successes, HHS has apparently elected to eliminate the final two years of TPP Program grants without cause or a rationale for the termination.

In light of these actions by HHS, we would appreciate a written response to the following questions by August 4, 2017:

- 1. Who made the decision to shorten the 81 TPP Program grant agreements by two years, and what role did those individuals hold in HHS or the White House when the decision was made?
- 2. What was the justification behind this decision?
- 3. Why was the notification to end grants made in advance of Congressional action on FY 2018 appropriations?
- 4. What is the justification for immediately terminating the five grants for the National Capacity-Building Assistance Providers, and what are your plans for the \$2.9 million in already appropriated FY 2017 funds that were part of the TPP Program's support funding?
- 5. If Congress appropriates TPP Program funding for FY 2018, will the Department deny current TPP Program grantees funding for continuing their projects? If so, what would the Department plan to do with FY 2018 funding, given the directives Congress has provided?
- 6. Please share information or documents on any plans to change the responsibilities, grant programs or scope of work for the Office of Adolescent Health.

Thank you for your prompt attention to this urgent matter. If you have any questions, please contact Laurel Sakai with Senator Murray's HELP Committee staff or Lisa Bernhardt with Senator Murray's LHHS Appropriations Subcommittee staff at (202) 224-0767.

Sincerely,

Patty Murray

United States Senator

Tammy Baldwin
United States Senator

Cory A. Booker United States Senator

Bernard Sanders United States Senator

Patrick Leahy United States Senator

Thomas R. Carper United States Senator

Margaret Wood Hassan United States Senator

Ron Wyden United States Senator

Jack Reed United States Senator Richard Blumenthal

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