

A4.1 - PROJECT SERVICES AND CLIENTS

Purpose

The purpose of this policy is to describe the Iowa HHS process for ensuring each SR and service site is in compliance with the expectation that projects provide medical services related to family planning (including consultation by a CSP, examination, prescription and continuing supervision, laboratory examination, and contraceptive supplies), in person or via telehealth, and referral(s) to other medical facilities when medically indicated, and provide for the effective usage of contraceptive devices and practices. (42 CFR § 59.5(b)(1)).

Policy

- Clients are provided appropriate medical services related to family planning, including consultation by a CSP, physical examination, prescription and continuing supervision, laboratory examination, and contraceptive supplies.
- Services are provided either in person or via telehealth.
- Necessary referrals are made to other medical facilities when medically indicated, including if a client's method of choice is not available at this particular service site.
- Services are provided to ensure the effective usage of contraceptive devices and practices.

Procedure

- Provide priority for FP services to any client from low-income families.
- Provide services in a manner that is client-centered, culturally and linguistically appropriate, inclusive, and trauma-informed; protects the dignity of the individual and ensures equitable and quality service delivery consistent with nationally recognized standards of care.
- Provide services in a manner that does not discriminate against any client based on religion, race, color, national origin, disability, age, sex characteristics, number of pregnancies, or marital status.
- Provide for social services related to FP, including counseling, referral to and from other social, medical, and any ancillary services, which may be necessary to facilitate clinic attendance.
- Provide coordination and use of referrals and linkages with primary healthcare providers, other providers of
 healthcare services, local health and welfare departments, hospitals, voluntary agencies and health services
 supported by other federal programs, who are in close physical proximity to the Title X service site, when
 feasible, in order to promote access to services and provide a seamless continuum of care.
- Assure services provided within their Title X program operate within written clinical protocols that are in accordance with providing quality family planning services that are consistent with nationally recognized standards of care.
- Provide medical services related to FP and the effective usage of contraceptive devices and practices (including
 CSP consultation, examination and prescription, and continuing supervision, laboratory examination,
 contraceptive supplies), referrals to other medical facilities when medically indicated. This includes, but is not
 limited to, emergencies that require referral. Efforts may be made to aid the client in finding potential resources
 for reimbursement of the referral provider, but Title X is not responsible for the cost of this care.



- Provide a broad range of acceptable and effective medically approved FP methods and services (including, but not limited to, long acting reversible contraception (LARC), contraceptive pills/patches/rings, natural family planning methods, infertility services and services for adolescents).
 - o If a SR is unable to provide a client with access to a broad range of acceptable and effective medically approved FP methods and services, the SR must be able to provide a prescription to the client for their method of choice or referrals to another provider as requested.
- Provide medically accurate, nondirective counseling and referral to all pregnant clients. The options should include: prenatal care and delivery, infant care, foster care, or adoption, and pregnancy termination.

Reference the FP Clinical Manual for guidance on clinical requirements.

Date Revised	September 2023
References	Title X Program Handbook, Section 3, Referral
	for Social and Medical Services #1
	(https://opa.hhs.gov/sites/default/files/2022-08/title
	-x-program-handbook-july-2022-508-updated.pdf
	<u>#page=21</u>)
	2021 Title X Final Rule 42 CFR § 59.5 (b)(1)
	(https://www.ecfr.gov/current/title-42/chapter-l/su
	bchapter-D/part-59/subpart-A/section-59.5)
Additional Resources	