

# The Commonwealth of Massachusetts Executive Office of Health and Human Services Department of Public Health 250 Washington Street, Boston, MA 02108-4619

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July 10, 2024

Steven T. James House Clerk State House Room 145 Boston, MA 02133

Michael D. Hurley Senate Clerk State House Room 335 Boston, MA 02133

Dear Mr. Clerk,

Pursuant to Chapter 28 of the Acts of 2023, Line Item 4513-1001, please find enclosed a report from the Department of Public Health entitled "Grants to support improvements in reproductive health access, infrastructure and security in Massachusetts."

Sincerely,

Robert Goldstein, MD, PhD

Commissioner

Department of Public Health







KATHLEEN E. WALSH SECRETARY

ROBERT GOLDSTEIN, MD, PhD
COMMISSIONER

# Grants to Support Improvements in Reproductive Health Access, Infrastructure and Security in Massachusetts



# **Legislative Mandate**

The following report is hereby issued pursuant to Chapter 28 of the Acts of 2023, Line Item 4513-1001 as follows:

For grants to support improvements in reproductive health access, infrastructure and security, including grants to the: (i) Jane Fund of Central Massachusetts, Corporation; (ii) Abortion Rights Fund of Western Massachusetts, Incorporated; and (iii) Eastern Massachusetts Abortion Fund, Incorporated; provided, that not later than March 1, 2024, the department of public health shall submit a report to the house and senate committees on ways and means detailing: (a) the grant distribution methodology; (b) a list of grants applicants; and (c) a list of successful grants applicants, including the amounts awarded and the projects being supported by the grants.

# **Executive Summary**

Chapter 28 of the Acts of 2023, Line Item 4513-1001, called for grants to *Support Improvements in Reproductive Health Access, Infrastructure, and Security*, specifically including three Abortion Fund organizations: (i) Jane Fund of Central Massachusetts, Corporation; (ii) Abortion Rights Fund of Western Massachusetts, Incorporated; and (iii) Eastern Massachusetts Abortion Fund, Incorporated.

## **Procurement-Related Activities**

- The Legislature allocated \$2M annually for this purpose in FY23 and FY24.
- DPH conducted several listening sessions with existing abortion providers to gauge their needs and future plans.
- DPH issued an RFR on October 26, 2022.
- The deadline for submission of responses was December 2, 2022.
- Nine applications were received, and all were funded, including the three Abortion Funds listed in the legislative language.
- Contracts began in March 2023.

# **Summary of Key Aspects of the Procurement**

The procurement was open to two types of organizations:

- <u>Abortion funds</u>, which are community-based organizations, often all-volunteer-run, that
  provide financial and logistical assistance to individuals who cannot afford the costs of
  an abortion.
- <u>Licensed clinical primary care and sexual and reproductive health providers</u> that currently offer abortion services or that plan to offer abortion services in the near future

The procurement funded three broad types of activities:

- Practical and financial support for Massachusetts residents and non-residents seeking abortion services in Massachusetts.
- Infrastructure and security costs associated with the provision of abortion care by licensed Massachusetts clinical providers.
- Infrastructure, startup, and security costs associated with beginning a new abortion service at an existing licensed clinical setting in Massachusetts.

# **Successes to Date**

Ten months into the grant, all awardees are well underway, successfully fulfilling the work described in their proposals. The grant funding is providing practical and financial support for residents seeking abortion services, including funds for clinical services, transportation, and doula care. It also funds infrastructure, startup, and security costs associated with new or expanding abortion services at existing licensed clinics.

To date, seven new medical abortion sites have opened in Southeastern Massachusetts, including the Cape and the Islands, thus improving access and eliminating long travel times for individuals seeking care. In Western Massachusetts, a successful pilot medical abortion program is now poised to expand to five new locations later this year.

# Introduction

The FY24 State Budget, Chapter 28 of the Acts of 2023, included continued funding for grants to support improvements in reproductive health access, infrastructure, and security. The purpose of this funding is to ensure access to reproductive health for the residents of the Commonwealth. The budget language also requires this report, providing the legislature with information on:

- the grant distribution methodology
- a list of grants applicants
- a list of successful grants applicants, including the amounts awarded and the projects being supported by the grants

# **Grant Distribution Methodology**

The Department of Public Health (DPH) Sexual and Reproductive Health Program (SRHP) issued RFR #235732 on October 26, 2022 to solicit applications for this funding. The deadline for submission of responses was December 2, 2022 at 3pm.

# **List of Grant Applicants**

Nine applications were received by the deadline:

- Beth Israel Deaconess Medical Center
- Boston Medical Center
- Cambridge Health Alliance
- Health Imperatives
  - o Included a subrecipient applicant: Salem State University
- Planned Parenthood League of Massachusetts
- Tapestry Health
- Tides for Reproductive Freedom
  - Included three subrecipient applicants: Abortion Rights Fund of Western Massachusetts, Eastern Massachusetts Abortion Fund, and Jane Fund of Central Massachusetts
- Women's Health Services

# List of Successful Grant Applicants, Amounts Awarded, and Projects Being Supported

All applicants were recommended for funding. The three applicants specifically named in line item 4513-1001 applied as subrecipients to Tides for Reproductive Freedom, so all vendors named in the budget are funded. Subsequent to the procurement and funding announcement, additional funding for these activities was identified from other sources; all vendors are receiving funding for these projects from multiple sources.

Below is a chart with the FY24 funding amount and a brief summary of activities for each vendor.

Vendor	Project Summary	FY24 Funding:	FY24 Funding:
		4513-1001	Other sources
Beth Israel Deaconess Medical Center	telehealth consultation, financial support for uninsured patients, patient navigators, abortion doulas	\$77,000.00	\$146,000.00
Boston Medical Center	new LICSW patient navigator, patient education materials, protected time for providers	\$104,000.00	\$153,000.00
Cambridge Health Alliance	ensuring confidentiality for patients and providers, provider training curriculum, community outreach	\$25,000.00	\$25,000.00
Health Imperatives	addition of medication abortion at 7 existing sexual and reproductive health clinical sites	\$355,000.00	\$355,000.00
HealthQ (subrecipient: Salem State University)	outreach, high quality patient experience, abortion training, implementation of medication abortion at Salem State Univ	\$266,000.00	\$266,000.00
Planned Parenthood League of Massachusetts	nurse practitioner training program at the Worcester site	\$265,000.00	\$115,000.00
Tapestry Health	addition of medication abortion at existing sexual and reproductive health clinical site, starting with one pilot site	\$81,000.00	\$80,000.00
Tides for Reproductive Freedom (subrecipients: Abortion Rights Fund of Western Massachusetts, Eastern Massachusetts Abortion Fund, and Jane Fund of Central Massachusetts)	financial and practical support for patients seeking abortion, needs assessment, infrastructure support and program and policy development for all four organizations, outreach and communications	\$780,000.00	\$920,000.00
Women's Health Services	staffing costs, Spanish interpretation, equipment purchases, electronic health record implementation	\$127,000.00	\$210,000.00

# **Update on Activities to Date**

Ten months into the grant, all awarded organizations are successfully completing the tasks outlined in their applications. Below is a summary of accomplishments to date:

# Beth Israel Deaconess Medical Center

In FY23, a telehealth complex consultation system was established, and an RN patient navigator was hired. In FY24, financial support for uninsured patients and abortion doulas is being implemented.

# **Boston Medical Center**

In FY23, BMC conducted a search for a LICSW patient navigator, updated their patient education materials, carved out protected time for providers, and purchased new exam tables and other critical equipment. In FY24, BMC on-boarded the new navigator, created miscarriage memory boxes for patients, and will continue to update their clinic with new equipment and train new providers.

# Cambridge Health Alliance

In FY23, CHA improved abortion care confidentiality for patients and providers through multiple trainings and updated workflows. In FY24, CHA will deliver a provider training curriculum and conduct community outreach.

# **Health Imperatives**

In FY23, Health Imperatives added medical abortion care to all seven of their existing sexual and reproductive health clinical sites. This service expansion brings abortion services to the Cape and Islands, which have long been an abortion service desert in Massachusetts. In FY24, they will continue strengthening and streamlining these new services, including expanding outreach.

# HealthQ

In FY23, HealthQ increased outreach, improved patient experience, expanded clinic hours, and implemented medication abortion care at Salem State University's Health Services clinic. In FY24, they intend to relocate their Haverhill office to a more modern and welcoming facility and improve patient education materials.

# Planned Parenthood League of Massachusetts

In FY23 a nurse practitioner training program was developed. In FY24 the new training program was launched at their Worcester site.

### Tapestry Health

In FY23, Tapestry piloted medication abortion care at their Northampton sexual and reproductive health clinical site and upgraded security at all of their locations. In FY24, plans are underway to expand medication abortion care to Tapestry's other sites in Western Massachusetts.

# <u>Tides for Reproductive Freedom</u>

In FY23 and into FY24, Tides and the three other abortion funds are developing organizational infrastructure for continued sustainability. Their activities include the transition from volunteer to staffed organizations; recruiting, hiring, and training staff; Board development; conducting a state-wide community needs survey; creating administrative, HR, and fiscal policies and procedures; developing fundraising strategies; managing new in-take processes (including cross-call coverage and coordination between the four funds). In FY24 to date, this funding has supported 486 individuals with practical and clinical supports to access abortion services, totaling \$62,026.18. During the course of FY24, the four funds will develop and implement more robust practical support strategies and expand an abortion doula program.

# Women's Health Services

In FY23 and FY24, Women's Health Services is focusing their grant on clinical service delivery. They are allocating their funding for rent, security, staffing costs, Spanish interpretation, equipment purchases, and electronic health record implementation.

# Conclusion

Massachusetts continues to lead the nation in protecting access to sexual and reproductive health services, especially after the *Dobbs v. Jackson Women's Health Organization* Supreme Court decision that ended a national right to abortion services. Continued support for these Reproductive Health Access grants is instrumental in not only preserving, but expanding, access to abortion care and other critical sexual and reproductive health services in Massachusetts.

This work ensures that abortion services will continue to be accessible not only to Massachusetts residents, but to the increasing number of individuals traveling to Massachusetts from other states to obtain abortion care. Ongoing state funding for this work is critical to maintaining access to care.