On June 22, the streets of Helena were filled with thousands of Montanans waving rainbow flags and marching to celebrate Lesbian, Gay, Bisexual, and Transgender Pride Month, an annual observance of LGBTQ history, achievements, community, and activism. That afternoon, twenty PPMT supporters marched behind our banner to celebrate the resilience and strength of LGBTQ communities in Montana.

After the parade, PPMT patient advocate and volunteer Maddie Youlden addressed the crowd gathered under sunny skies in Anchor Park. “Planned Parenthood has always felt like a safe place for me to go, and they’ve never assumed how I identify or what my specific health care needs are,” Youlden said. “I know that Planned Parenthood takes pride in providing high-quality, compassionate health care for LBGTQ+ people like me in our communities.”

PPMT believes that LGBTQ rights are reproductive rights, and we must ensure both to achieve justice for all. We have long stood with lesbian, gay, bisexual, transgender, and queer people, many of whom turn to Planned Parenthood for health care, information, and education in the fight for full equality.

In 2010, PPMT established our Transgender Care Program to provide gender-affirming care and to improve the sexual and reproductive health of transgender Montanans. Since then, PPMT has expanded gender-affirming services to all of our health centers. PPMT continues to advance this care by updating education and outreach materials to better serve the transgender community in Montana. PPMT is proud to receive support from the Pride Foundation as we work to eliminate barriers to care and improve the way we provide health care to transgender people.

The LGBTQ community’s ability to access health care, raise their families, and live their most authentic lives is still under attack; especially for people of color. With the current political climate focused on restricting and rolling back human rights, it is more important than ever to provide safe spaces for vulnerable people.

In the last two years in Montana, there was a bill in the legislature and a signature-gathering campaign to support an anti-transgender “bathroom bill” ballot initiative. Ultimately, the bill failed in committee and the initiative failed to qualify for the ballot as a result of LGBTQ Montanans and allies speaking out in force against it. The Trump administration has also issued a rule that would allow health workers to broadly discriminate against LGBTQ people. Planned Parenthood is suing to stop the administration’s “refusal of care” rule, which would endanger patients by granting health care workers — from physicians and nurses to receptionists, EMTs, and call center staff — the right to put their personal beliefs ahead of people's health, even in emergencies.

In addition, Montana consistently has one of the highest rates of suicide in the U.S. and transgender people are especially at risk. Members of the lesbian, gay, bisexual, trans, and queer communities have unique health care needs. They experience greater obstacles to obtaining and benefiting from sexual and reproductive health services than non-LGBTQ people. People of color, people with low incomes, and people who are undocumented face additional discrimination and can find it even harder to access care. By offering gender-affirming medical care in all of our health centers in a challenging political climate, PPMT provides a safe space where transgender people are respected and welcome. Together, we will work to combat stigma and discrimination in Montana.

As we continue with the year, PPMT will continue to hold the spirit of Pride and ensure that it is being applied to all patients who walk through our doors.

We’re proud to provide care for her, him, them, you, ALL.
Dear Friends,

On Thursday, June 20, a three-judge panel in the 9th Circuit issued a ruling that overturned the preliminary injunctions issued by three judges in cases challenging the Trump-Pence administration’s changes to the rules governing Title X, our nation’s family planning program. (For more information on how our patients are helped by the program, please see page 6.) These injunctions had blocked the implementation of these changes, known as the gag rule. The gag rule does two things: limits the ability of Title X providers to counsel on or refer patients for abortions and requires complete fiscal and physical separation of abortion care from Title X services. For more than a year, Planned Parenthood has gone to bat for our patients to preserve access to both affordable sexual and reproductive health care and their right to full and accurate information about their options in pregnancy. It is worth noting that Title X, unfortunately, does not cover abortion care.

That Thursday morning, after reading early morning emails on the ruling, our colleagues at Planned Parenthood Federation of America (PPFA) and the senior leadership of Planned Parenthood of Montana jumped to action. The staff who devote their lives to using the judicial system to ensure access worked to file motions and appeals. By the end of the day, PPFA attorneys and lawyers representing the National Family Planning and Reproductive Health Association (which represents many Planned Parenthood affiliates, as well as non-PP Title X providers) had asked a larger panel to consider a request for emergency relief while our case moves forward.

Here in Montana, we immediately made changes to our systems to ensure that we were not using federal family planning dollars at our health centers. Our focus was making the process of receiving care as seamless for our patients as possible. We did not turn anyone away, and began using emergency funds to discount their care.

And then, as quickly as the rule went into effect, a larger panel on the 9th circuit issued a ruling that the Department of Health and Human Services and Planned Parenthood agreed meant the rule was no longer enforceable. We breathed a sigh of relief, only to hear just days later that that was not the intention of the ruling. The case continues to work its way through the court, and I am sure it will continue to be a rollercoaster ride. By the time you read this it is possible we could be operating under an entirely new ruling.

As we negotiate the uncharted waters of a Title X defund on the federal level and the rapid changes to the program, making sure our patients are taken care of and staff are well supported is paramount. Sometimes, staff and patients care for one another in surprising ways. One patient, who receives her care at a great discount because of the Title X program, came in for an appointment on the day we received the news in June. When she was checking out she handed a donation to the clinical assistant. Her gift was generous by any standard, but all the more meaningful considering her income. She had heard the news and, because Planned Parenthood of Montana has always been there for her, she wanted to find a way to be there for other patients.

Living our motto of “Care. No Matter What” is complicated by policy that seeks to separate people from their health care, but we are committed to continuing to embody that motto. Thank you for standing with Planned Parenthood of Montana and the people we serve.

Onward,

Martha Stahl, President and CEO
Sin e Die

Thanks to support from folks like you across Montana, in partnership with pro-reproductive health leaders in Helena, Planned Parenthood Advocates of Montana (PPAMT), once again, protected access to safe, legal abortion during the 66th Montana Legislative session. Despite our opponents creating the most vicious environment that advocates and legislators have ever experienced, we successfully fought back against four anti-choice bills that gained traction this session.

• SB 100 would have required the provision of unnecessary information before the performance of an abortion.
• SB 354 was a highly politicized late-term abortion bill that was redundant of existing law, criminalized doctors, and ultimately sought to ban abortion.
• HB 302 would have amended the Montana constitution so that “person” would apply to all stages of development, including fertilization or conception.
• HB 500 would have made it a felony for patients to receive abortions beyond 20 weeks.

These unconstitutional bills would have been extremely dangerous for Montanans, were blatant political attacks on the right to make private reproductive health care decisions, and directly interfered with the sanctity of the patient-doctor relationship.

It is critically important to know that this suite of extreme bills passed both chambers of the Legislature but, thankfully, none became law. One failed to reach the constitutionally required vote threshold to move to the November 2020 ballot (HB 302). The other three were vetoed by Governor Bullock (SB 100, SB 354, HB 500). We are grateful to the Governor and the pro-reproductive health legislators for trusting and standing with women.

Teaming up to Protect Access: the Montana Reproductive Rights Coalition

Protecting the right and ability of all people in Montana to make personal medical decisions and pursuing policies to expand access to reproductive health care can only be accomplished as a team. Planned Parenthood Advocates of Montana proudly stands with the Montana Reproductive Rights Coalition (MRRC). The MRRC is able to leverage decades of experience and relationships to ensure Montanans have access to safe, legal abortion without interference from politicians.

Long-standing members of the MRRC include ACLU of Montana, Blue Mountain Clinic, Montana Human Rights Network, NARAL Pro-Choice Montana, the Montana Coalition Against Domestic and Sexual Violence, and Montana Women Vote. In the 2019 session, we were proud to welcome BridgerCare, National Association of Social Workers – Montana Chapter, and Western Native Vote.

PPAMT is honored to lead this coalition as we fight for reproductive freedom with these powerful organizations and the people they represent. Together, we will continue to hold the line for all Montanans.
Thank you to all who attended one of Planned Parenthood of Montana’s 50th celebration events this spring. We are endlessly grateful to the more than 800 people who came out to support PPMT in providing quality health care and education. At these events we celebrated the legacy of PPMT, and honored the people who helped to create that legacy with their unwavering commitment to reproductive freedom: Deborah Frandsen, Joan McCracken, Melanie Reynolds, and State Senator Diane Sands. We could not have reached this milestone without our dedicated donors, staff, current and former board members, volunteers, and, of course, the patients we serve! More than 300,000 Montanans have been PPMT patients over the last 50 years.

Together we raised over $100,000 for critical sexual and reproductive health care services throughout Montana at our 50th celebrations in Helena, Billings and Missoula. We are overjoyed with this achievement and grateful for our supporters’ commitment.

PPMT is excited to continue our year-long celebration this fall with events in Great Falls on October 4 and in Bozeman on October 23.


— Martha Stahl, PPMT President and CEO.

These events would not have been a success without the generosity of our sponsors. Thank you to these businesses, organizations and individuals for your support in making the health care our patients deserve and rely upon available across our region.

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If you are interested in being a sponsor or have questions about the events, please contact Christina Roberts, Development Manager at 406.830.3491 or christina.roberts@ppmontana.org.
DEBORAH FRANDSEN  While Deborah was born in Long Island, her family moved to Montana when she was in third-grade. She has lived in Missoula for 49 years and deeply loves it. Graduating from Hellgate High School, she also has a BA in Theatre from Colorado College and has worked in the arts, human services and politics. She first started as a volunteer with Planned Parenthood of Missoula in the mid-80s and served as Board President for three years. From 1993 – 1997, she served as Executive Director. The 90s were a particularly challenging time for Planned Parenthood clinics around the country with clinic bombings and attacks on clinic staff, including the murder of doctors. After the bombing of the Blue Mountain Clinic in 1993, with the amazing dedication of the clinic’s staff, board and volunteers, Planned Parenthood of Missoula initiated abortion services in record time. Providing this essential service for the region’s women is one of Deborah’s proudest achievements. She has been married to Chris Frandsen for nearly 38 years. They have one daughter, Lily, and a foster daughter, Heather. The family also has two dogs: Buster and Bruce. Currently, she is US Senator Jon Tester’s Regional Director.

JOAN MCCracken  Joan McCracken is a graduate of Duke University, the University of California, San Francisco, and Montana State University with a B.S. and Master's Degree in Nursing, and is a certified Nurse Practitioner in Maternal Health. She came to Billings in 1967 with her five children and husband Clayton. She taught nursing at St. Vincent’s Hospital until it closed and then began her work in family planning with the Community Action Program in Billings. Within weeks it became apparent that a clinic that offered confidential services to women of all ages and all incomes needed to be established and an affiliation with Planned Parenthood Federation of America began. Joan’s joy has always been working with people and surrounding herself with dedicated staff who shared with her the mission of helping women achieve their reproductive goals. She looks back with pride at her involvement establishing the first nurse practitioner training program in Montana, the instigation of the statewide SANE (Sexual Assault Nurse Examiner) program, and the PP-WOW (Planned Parenthood Without Walls) program that enabled physicians in rural areas to become part of the Planned Parenthood network.

MELANIE REYNOLDS  After working as a VISTA Volunteer on the Blackfeet Indian Reservation in Browning, Montana, Melanie came to Missoula and started work as an outreach coordinator at Planned Parenthood of Missoula. She enjoyed 11 years working at Planned Parenthood in program and education coordinator roles and eventually Executive Director for what was then Planned Parenthood of Missoula. She believes strongly in the mission of Planned Parenthood and, along with Deborah Frandsen and Joan McCracken, started Planned Parenthood Advocates of Montana, the public affairs arm of Planned Parenthood in our state. She was actively involved in the statewide reproductive rights coalition and worked at the State Family Planning Office in Helena. Melanie has a bachelor’s degree in Human Development and a master’s degree in Public Health. She has worked in public health and reproductive health positions for the last 36 years. She is retired from her most recent job as county health officer and lives in Helena with her husband Bob. She is enjoying her new role as a community volunteer and traveler.

SENATOR DIANE SANDS  Senator Diane Sands was raised in eastern Montana on the Fort Peck reservation and has called Missoula home since attending the University of Montana in the 1960s. She created the First Women’s Resource Center at UM in 1968 and has fought for social justice issues, abortion rights, gay rights, Native American education and more. Diane was on the board of PP Missoula and was a founder of Montana NARAL and the Montana Reproductive Rights Coalition. She’s worked in a variety of fields, including directing Missoula’s Partnership Health Center, the Montana Community Lobby and the Montana Women’s Lobby. Senator Sands represents Senate District 49, which covers west Missoula County. Prior to serving in the Montana Senate, she served in the House for four terms. A tireless legislator, in the 2017 legislative session alone Diane introduced a package of bills making it easier for prosecutors to charge and try sexual assaults, secured funding to reduce the waiting list for services for a child with autism and sponsored a bill to regulate e-cigs, making them illegal for minors. Diane has spent decades working to preserve Montana’s history while striving to ensure its strong future. She retired from the Historical Museum at Fort Missoula and in 2017, received the lifetime achievement award from the Montana Historical Society naming her a “Guardian of Montana Heritage.” Diane serves on the Montana DPHHS Opioid Task Force, the Board of Orchard Homes Country Life Center, is a member of Target Range Homeowners Association and Gov. Steve Bullock’s Equal Pay for Equal Work Task Force.
Who Pays for Patient Care at PPMT?

Planned Parenthood of Montana prides itself on not turning away patients if they can’t afford to pay for services or don’t have health care coverage. But how does this work? Constant changes to funding streams and programs make the options complicated to navigate. Our clinical assistants work with patients to help them understand their existing coverage, programs for which they are eligible, and how using multiple sources of funding can help them. The following are the most common ways care is covered at PPMT.

TITLE X
Title X is the Federal grant program that supports family planning services, including annual exams, pregnancy tests, cancer and STI screening, and birth control for low-income patients. Patients earning under 100% of the Federal Poverty Level pay nothing for services, and the amount of the discount decreases as income increases, up to 250% of poverty. For patients with other coverage such as private insurance, the discounts are applied to copays and co-insurance. Eligibility is based on family pre-tax income. Some special circumstances apply to adolescent patients. If the adolescent is self-supporting their income is handled as it would be for an adult. For adolescents supported by their parents, but who desire confidential services, or whose parents refuse to pay for services, only the adolescent’s income is considered. Family income is used when the adolescent is partially or completely supported by a parent or guardian who is willing to pay.

PLAN FIRST
Plan First is a Montana Medicaid Waiver that covers family planning services for patients with incomes up to and including 211% Federal Poverty Level. To be eligible the patient must be able to bear children and can’t be pregnant. In addition, they must be a resident of Montana and between 19 and 44 years old. Some of the services covered include office visits, contraceptive supplies, laboratory services, and testing and treatment of STDs. PPMT can enroll patients in Plan First, and we serve 75% of Plan First patients in Montana.

MONTANA HELP PLANS
Montana’s expanded Medicaid program, or the Montana HELP Plans, covers health care for Montana residents between the ages of 19 and 64 earning below $16,000 a year, or $33,000 for a family of four. The coverage includes all sexual and reproductive health care provided at Planned Parenthood of Montana.

HEALTHY MONTANA KIDS
Healthy Montana Kids (HMK) covers reproductive health care and family planning services. HMK coverage is available to children whose families earn up to 250% of the Federal Poverty Level.

PRIVATE INSURANCE
Many of our patients have insurance coverage through employer-sponsored plans, or through plans they have purchased in the Marketplace. Planned Parenthood of Montana bills insurance for services provided, just like other health care providers. Since the advent of the ACA, most plans now cover the majority of services we offer, including birth control, cancer screenings and preventative care, with no out-of-pocket cost to the patient.

ABORTION FUNDS
Abortion funds play an important role in the access to abortion in Montana. Not all insurance plans cover abortion care, and sometimes patients chose not to use their insurance to maintain their confidentiality. There are several funds that help patients with the cost of abortion care, helping to cover not just procedures, but often assisting with travel and child care expenses as well. PPMT’s internal fund is Sarah’s Circle, but we also see patients whose care is supported by the Susan Wicklund Fund, or by funds based in the states where our patients live.
TEACHING THE TEACHERS:  
PPMT’s Training Institute Establishes Sex Ed Foundations

Expanding access to comprehensive, age-appropriate sexuality education is one of PPMT’s strategic priorities. PPMT’s educators are now using their collective years of experience in providing direct education to youth in our state to find new ways to empower local professionals in delivering the same brand of education in their own communities.

But learning to deliver quality sex education is more than just learning the facts; educators need a set of core skills to be effective. Recently, PPMT educators Kate Nessan and Nona Main provided Sex Ed Foundations training to nine public health nurses at the Fort Belknap Indian Reservation. The Foundations training is a one-day course designed to train teachers, nurses, and other youth-serving professionals on the skills needed to teach comprehensive sex ed, including: climate setting in the classroom, understanding local and state sex ed policy, experiential learning theory, values clarification, managing personal disclosures, and handling difficult questions and harassing comments. Along with the Foundations training, the nurses also had a two-day curriculum training on Making Proud Choices, a comprehensive sex ed program that is proven to be effective in behavior change, condom use, and STD reduction. By providing skill development training along with curriculum training, PPMT is ensuring participants are well prepared to provide medically accurate, values neutral, and comprehensive sex education.

Announcing the Rural Sex Ed Curriculum Project!

The education department at PPMT is proud to announce a new educational project, with generous funding from The Pacific Source Healthcare Foundation: The Rural Sex Ed Curriculum Project. PPMT has implemented several evidence-based, as well as evidence-informed, curricula in schools and community settings during the past fifteen years. In that time our educators have learned what works with youth in Montana. This project will allow PPMT to use institutional knowledge, along with data from students, parents, community members, and teachers, to develop a comprehensive sex ed curriculum for high school students in rural schools and communities, including American Indian Reservations.

Most sex education programs currently in use have been developed for and by people living in large urban areas, with a target audience of African-American or Latinx youth. By addressing the unique needs and challenges of American Indian and rural youth in Montana, PPMT expects to reduce teen birth rates and sexually transmitted infections while increasing contraceptive use among sexually active youth. In addition, by creating a curriculum with input from teachers, we hope to meet their needs in the classroom and make it easier for educators to implement a sex ed curriculum, therefore increasing access to sexual health information for youth. We will keep you informed of the progress, and have a tentative completion date of Fall 2021.

With Planned Parenthood DIRECT, birth control can be ordered securely from your phone, and delivered to your mailbox. Download PP Direct in the Apple App Store or on Google Play.
According to the American Academy of Family Physicians, tobacco use causes 480,000 deaths in the United States each year, making it the leading preventable cause of mortality. On average, people who smoke die 10 years earlier than those who do not, and 16 million people are living with a serious illness caused by smoking. Smoking also has a direct connection to reproductive health. It is linked to poor birth outcomes, maternal mortality, and pregnancy complications. In addition to the use of cigarettes, vaping nicotine is on the rise, especially among young people. In Montana, 11.5% of teens, 21.8% of all women of reproductive age, and more than 46% of American Indian women smoke. These are some of the highest rates in the country.

Of the estimated 42.1 million people in the United States who currently smoke, nearly 70% say they would like to quit. Providing nicotine cessation services is a critical part of PPMT's work to address our patients' health needs and provide more comprehensive care. We are one of several Planned Parenthood affiliates collaborating to improve nicotine cessation efforts at their health centers. Over the next several months, we will be building and piloting our nicotine cessation work, with the ultimate goal of providing gold standard, comprehensive nicotine cessation services at all of our health centers by the beginning of 2020. The protocols we develop, together with our challenges and successes, will be shared with other affiliates around the country.

Several clinical and non-clinical staff attended a training at Planned Parenthood Federation of America in April to launch this project. Since then, the team has been developing a protocol and training materials for all health center staff, liaising with the Montana QuitLine to better understand the services it offers and how we can best work together. Collaboratively we are developing new patient intake materials and making behind the scenes changes to our Electronic Health Record systems to guide motivational interviewing with patients, as well as to ensure we bill for these services when insurance reimbursements are available. Tracking the success of this program will be an important quality measure for Planned Parenthood of Montana. Working with patients on smoking cessation is a widely measured public health standard because of the connection between tobacco use and public health. Nicotine use is a reproductive health issue and a public health issue, and we are confident our unique role in the lives of our patients will help them lead their healthiest lives.