



## H.R. 3495—Women’s Public Health and Safety Act, (Duffy, R-WI)

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### FLOOR SCHEDULE:

Scheduled for consideration on September 29, 2015, under a [closed](#) rule.

### TOPLINE SUMMARY:

[H.R. 3495](#) would amend [title XIX of the Social Security Act](#) to allow for state flexibility with respect to excluding providers that provide abortions from receiving state allocated Medicaid funds.

### COST:

A final Congressional Budget Office (CBO) estimate is not yet available. A preliminary cost estimate can be found [here](#).

### CONSERVATIVE CONCERNS:

There are no substantive concerns.

- **Expand the Size and Scope of the Federal Government?** No.
- **Encroach into State or Local Authority?** No.
- **Delegate Any Legislative Authority to the Executive Branch?** No.
- **Contain Earmarks/Limited Tax Benefits/Limited Tariff Benefits?** No.

### DETAILED SUMMARY AND ANALYSIS:

Following the release of several horrific videos by the [Center for Medical Progress](#) that allegedly depict Planned Parenthood participating in the sale and trafficking of fetal tissue, several [states](#), including Louisiana and Alabama, attempted to terminate contracts with Planned Parenthood for services covered by Medicaid. These states are currently facing [legal](#) battles over whether or not they can legally exclude certain providers. Currently, federal funds may not generally be directed to pay for abortions as Medicaid is subject to the [Hyde Amendment](#). Though the United States Department of Health and Human Services has interpreted the “free choice of qualified provider,” to not allow states to exclude providers because they perform elective abortions, under current law, states do have the ability to [exclude](#) certain providers from participating in Medicaid.

This legislation would amend title XIX of the Social Security Act to allow states the flexibility to exclude abortion providers from Medicaid.

A clarifying [amendment](#) offered by Representative Blackburn (R-TN) was adopted during a meeting of the Rules Committee that would enhance state flexibility by allowing a state to choose its own criteria regarding provider participation in Medicaid. This amendment would also ensure that the bill would apply

to managed care plans and waiver programs and would make clear that the intent of the legislation is to focus on elective abortions, not those provided in the case of rape, incest, or endangerment to the mother.

### **OUTSIDE GROUPS:**

[National Right to Life](#) (Scoring)

[Concerned Women for America](#) (Scoring)

[Family Research Council](#) (Scoring)

[Americans United for Life](#) (Scoring)

### **COMMITTEE ACTION:**

H.R. 3495 was introduced on September 9, 2015, and was referred to the House Committee on Energy and Commerce.

### **ADMINISTRATION POSITION:**

No statement of administration policy is available.

### **CONSTITUTIONAL AUTHORITY:**

According to the Sponsor, Congress has the power to enact this legislation pursuant to the following: Article I, Section 8 Constitution of the United States.

No clause indicating a specific enumerated power of Congress was included.

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