

Amend Amendment No. 72 by Phillips to **CSHB 1** (pages 135 and 136 of the prefiled amendment packet) by striking the text of the amendment and substituting the following:

Amend **CSHB 1** (house committee printing) in Article II of the bill, following the appropriations to the Department of State Health Services, by adding the following appropriately numbered rider:

\_\_\_\_. Additional Priorities for Family Planning Service Providers.

a. In allocating funds appropriated in Strategy B.1.3, Family Planning Services, to public entities that provide family planning services, the funds shall be allocated with the following levels of priority:

1. Public entities that provide family planning services, including state, county, and local community health clinics, that do not:

A. perform elective abortions;

B. refer pregnant women to an abortion provider for an elective abortion;

C. refer clients to organizations that perform elective abortions for any family planning services;

D. contract with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion; and

E. affiliate with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion.

2. Public entities that provide family planning services, including state, county, and local community health clinics, that do not.

A. perform elective abortions;

B. refer pregnant women to an abortion provider for an elective abortion;

C. contract with entities that perform or promote elective abortions or services related to elective abortions or

that make referrals to entities that perform or promote elective abortions or services related to elective abortion; and

D. affiliate with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion.

3. Other public entities that provide family planning services, including state, county, and local community health clinics.

b. In allocating funds appropriated in Strategy B.1.3, Family Planning Services, to non-public entities that provide comprehensive primary and preventative care in addition to family planning services, the funds shall be allocated with the following levels of priority:

1. Non-public entities that provide comprehensive primary and preventive care in addition to family planning services, that do not:

A. perform elective abortions;

B. refer pregnant women to an abortion provider for an elective abortion;

C. refer clients to organizations that perform elective abortions for any family planning services;

D. contract with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion; and

E. affiliate with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion.

2. Non-public entities that provide comprehensive primary and preventive care in addition to family planning services, that do not:

A. perform elective abortions; and

B. refer pregnant women to an abortion provider for an elective abortion;

C. contract with entities that perform or promote

elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion; and

D. affiliate with entities that perform or promote elective abortions or services related to elective abortions or that make referrals to entities that perform or promote elective abortions or services related to elective abortion.

3. Other non-public entities that provide comprehensive primary and preventive care in addition to family planning services.

c. The priorities outlined above shall be applied by health service regions in the selection of contractors and in determining the amount of the grant or contract. When there are competing entities, the funds shall be allocated to the entity that qualifies under the higher priority in the above list.

d. The executive commissioner of the Health and Human Services Commission or the commissioner of state health services, as appropriate, shall reallocate funding if the priority formula in this rider would result in a significant reduction of services in a specific geographic area.