

1 H.750

2 Introduced by Representative Kilmartin of Newport City

3 Referred to Committee on

4 Date:

5 Subject: Health; health care reform; Green Mountain Care; family planning

6 Statement of purpose: This bill proposes to prohibit the Green Mountain Care
7 benefit package from including abortions or abortion-related services as a
8 method of family planning or family planning services.

9 An act relating to prohibiting abortions in Green Mountain Care

10 It is hereby enacted by the General Assembly of the State of Vermont:

11 Sec. 1. FINDINGS

12 The general assembly finds that:

13 (1) No. 48 of the Acts of 2011, which established Green Mountain Care,
14 required in Sec. 4, 33 V.S.A. § 1825(a)(1), that “Green Mountain Care shall
15 include primary care.”

16 (2) Sec. 4 of No. 48 of the Acts of 2011, 33 V.S.A. § 1823(10), defines
17 “primary care” to “include family planning.”

18 (3) The World Health Organization defines family planning services as
19 those that “allow individuals to anticipate and attain their desired number of
20 children and the spacing and timing of their births. It is achieved through use
21 of contraceptive methods and the treatment of involuntary infertility.”

1 (4) An overwhelming majority of both international and domestic
2 governing bodies have affirmed that in no circumstance may abortion be
3 regarded as a method of family planning.

4 (5) It is the longstanding policy of the federal government that abortion
5 is not a method of family planning. Section 1008 of the Public Health Service
6 Act (42 U.S.C. § 300a-6) specifies that “none of the funds appropriated under
7 [the family planning programs operated pursuant to Title X of the act] shall be
8 used in programs where abortion is a method of family planning.”

9 (6) In *Rust v. Sullivan*, the U.S. Supreme Court held that when a state or
10 federal government appropriates public funds to establish a program, it is
11 entitled to define the limits of the program. 500 U.S. 173, 194 (1991).

12 (7) The state of Vermont has given priority to the funding of prenatal
13 care through the Dr. Dynasaur program to ensure that all pregnancies have
14 healthy outcomes for mothers and babies.

15 (8) Vermont taxpayers, through the Medicaid program and other
16 state-funded health care programs, already pay for abortions for
17 income-eligible beneficiaries at the cost of tens of thousands of dollars per
18 year.

19 (9) If the Green Mountain Care board interprets the definition of “family
20 planning” to include abortions, it would expand taxpayer funding of abortions
21 to all Vermonters, including those with the ability to pay.

