

**HEALTH CARE FUNDING AMENDMENTS**

2020 GENERAL SESSION

STATE OF UTAH

**Chief Sponsor: Mark A. Strong**

Senate Sponsor: \_\_\_\_\_

---

**LONG TITLE****General Description:**

This bill requires the Department of Health to request a waiver and apply for grants related to certain health care services.

**Highlighted Provisions:**

This bill:

- requires the Department of Health (department) to request a waiver from federal restrictions on funding based partly on certain services being offered to a minor without consent from a parent or guardian;
- requires the department to apply for Title X grants from the United States Department of Health and Human Services; and
- if the department receives a grant, requires the department to disburse grant funds according to certain prioritization criteria.

**Money Appropriated in this Bill:**

None

**Other Special Clauses:**

None

**Utah Code Sections Affected:**

ENACTS:

**26-1-41**, Utah Code Annotated 1953

---



*Be it enacted by the Legislature of the state of Utah:*

Section 1. Section **26-1-41** is enacted to read:

**26-1-41. Health care grant requests and funding.**

(1) Before June 1, 2020, the department shall, for purposes of Title X grants offered pursuant to Public Health Service Act, 42 U.S.C. Sec. 300 et seq., apply for a waiver from compliance with the requirements found in 42 C.F.R. Sec. 59.5(a)(4) pertaining to providing certain services to a minor without parental consent.

(2) Any time the United States Department of Health and Human Services accepts grant applications, the department shall apply for a grant under Title X of the Public Health Service Act, 42 U.S.C. Sec. 300 et seq.

(3) If the department receives a grant under Subsection (2), the department shall prioritize disbursement of grant funds in the prioritization order described in Subsection (4).

(4) (a) (i) When disbursing grant funds, the department shall give first priority to nonpublic entities that provide family planning services as well as other comprehensive services to enable women to give birth and parent or place for adoption.

(ii) The department shall give preference to entities described in Subsection (4)(a)(i) that:

(A) expand availability of prenatal and postnatal care in low-income and under-served areas of the state;

(B) provide support for a woman to carry a baby to term;

(C) emphasize the health and viability of the fetus; ~~H→ [or]~~ and ~~←H~~

(D) provide education and maternity support.

(iii) If the department receives applications from qualifying nonpublic entities as described in Subsection (4)(a), the department shall disburse all of the grant funds to qualifying nonpublic entities described in Subsection (4)(a).

(b) If grant funds are not exhausted under Subsection (4)(a), or if no entity qualifies for grant funding under the criteria described in Subsection (4)(a), the department shall give second priority for grant funds to nonpublic entities that provide:

(i) family planning services; and

(ii) provide required primary health services as described in 42 U.S.C. Sec. 254b(b)(1)(A).

59           (c) If grant funds are not exhausted under Subsections (4)(a) and (b), or if no entity  
60           qualifies for grant funding under the criteria described in Subsection (4)(a) or (b), the  
61           department shall give third priority for grant funds to public entities that provide family  
62           planning services, including state, county, or local community health clinics, federally qualified  
63           health centers, and community action organizations.

64           (d) If grant funds are not exhausted under Subsections (4)(a), (b), and (c), or if no  
65           entity qualifies for grant funding under the criteria described in Subsection (4)(a), (b), or (c),  
66           the department shall give fourth priority for grant funds to nonpublic entities that provide  
67           family planning services but do not provide required primary health services as described in 42  
68           U.S.C. Sec. 254b(b)(1)(A).