

118TH CONGRESS
1ST SESSION

H. R. 4281

To establish the Office of Sexual and Reproductive Health and Well-Being within the Department of Health and Human Services, to generate a whole-of-government approach to protecting and affirming sexual and reproductive rights, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

JUNE 22, 2023

Ms. BUSH (for herself, Ms. MOORE of Wisconsin, Ms. TLAIB, Ms. CLARKE of New York, Mrs. WATSON COLEMAN, Mr. TAKANO, Mr. BOWMAN, Ms. JACKSON LEE, Ms. PRESSLEY, and Ms. NORTON) introduced the following bill; which was referred to the Committee on Energy and Commerce

A BILL

To establish the Office of Sexual and Reproductive Health and Well-Being within the Department of Health and Human Services, to generate a whole-of-government approach to protecting and affirming sexual and reproductive rights, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Protect Sexual and
5 Reproductive Health Act of 2023”.

1 **SEC. 2. SEXUAL AND REPRODUCTIVE HEALTH AND WELL-**
 2 **BEING; REPRODUCTIVE JUSTICE AND EQUITY**
 3 **GRANT PROGRAM.**

4 (a) IN GENERAL.—The Public Health Service Act
 5 (42 U.S.C. 201 et seq.) is amended by inserting after title
 6 XXXIII of such Act (42 U.S.C. 300mm et seq.) the fol-
 7 lowing:

8 **“TITLE XXXIV—SEXUAL AND RE-**
 9 **PRODUCTIVE HEALTH AND**
 10 **WELL-BEING**

11 **“SEC. 3401. OFFICE OF SEXUAL AND REPRODUCTIVE**
 12 **HEALTH AND WELL-BEING.**

13 “(a) ESTABLISHMENT.—The Office of Population Af-
 14 fairs in the Department of Health and Human Services
 15 is hereby redesignated as the Office of Sexual and Repro-
 16 ductive Health and Well-Being (in this section referred to
 17 as the ‘Office’), to be headed by a Director of National
 18 Sexual and Reproductive Health and Well-Being (in this
 19 section referred to as the ‘Director’). The Director shall
 20 be appointed by the Secretary.

21 “(b) RESPONSIBILITIES.—The Director shall have re-
 22 sponsibility for overseeing activities that promote sexual
 23 and reproductive health and well-being, including—

24 “(1) funding, conducting, and publicly dissemi-
 25 nating the findings of, research on policies, pro-
 26 grams, infrastructure, and other investments that

1 serve to protect and increase access to services re-
2 lated to sexual and reproductive health and well-
3 being;

4 “(2) not later than 1 year after the date of en-
5 actment of this title, developing a national strategy
6 to promote sexual and reproductive health and well-
7 being, to be known as the Sexual and Reproductive
8 Health and Well-Being Strategy (in this section re-
9 ferred to as the ‘SRHW Strategy’);

10 “(3) coordinating implementation of the SRHW
11 Strategy by—

12 “(A) coordinating among Federal depart-
13 ments and agencies, including the Interagency
14 Task Force on Sexual and Reproductive Health
15 and Well-Being established under section 3402;

16 “(B) assessing Federal regulations and
17 programs funded by the Federal Government
18 with respect to sexual and reproductive health
19 and well-being to ensure that such regulations
20 and programs are consistent with the SRHW
21 Strategy;

22 “(C) providing to the public updates, find-
23 ings, and recommendations on sexual and re-
24 productive health services collected from the re-

1 ports made by recipients of grants under sec-
2 tion 3403;

3 “(D) leading activities to engage the pub-
4 lic, including publicly available listening ses-
5 sions with affected communities;

6 “(E) coordinating with other Federal de-
7 partments and agencies, as appropriate, to de-
8 velop guidelines and recommendations for
9 health care providers to implement best prac-
10 tices for protecting sexual and reproductive
11 health and well-being;

12 “(F) supporting and helping to coordinate
13 interagency initiatives that advance, streamline,
14 and otherwise implement research programs,
15 services, and activities that protect and increase
16 access to sexual and reproductive health and
17 well-being;

18 “(G) administering grant programs that
19 support State governments, local governments,
20 and community-based organizations in pro-
21 tecting and increasing access to sexual and re-
22 productive health and well-being research pro-
23 grams, services, and activities; and

1 “(H) consulting with the Attorney General
2 and the Chair of the Federal Trade Commission
3 to develop strategies to—

4 “(i) protect consumers’ privacy when
5 seeking provision of, or information about,
6 sexual and reproductive health care serv-
7 ices; and

8 “(ii) strengthen the protection of sen-
9 sitive information related to sexual and re-
10 productive health care services and bolster
11 patient-provider confidentiality;

12 “(4) carrying out community outreach pro-
13 grams to—

14 “(A) inform local communities about the
15 Office; and

16 “(B) notify potential grants recipients of
17 funding opportunities; and

18 “(5) submitting to Congress reports in accord-
19 ance with subsection (d).

20 “(c) SRHW STRATEGY REQUIREMENTS.—

21 “(1) CONTENT.—The SRHW Strategy shall—

22 “(A) identify areas to develop and imple-
23 ment a sexual and reproductive health frame-
24 work that moves beyond a biomedical model of
25 health to include services with respect to health,

1 well-being, economic stability, and freedom from
2 discrimination;

3 “(B) include recommendations—

4 “(i) to integrate sexual and reproduc-
5 tive health equity and reproductive justice
6 into processes and policies used, and pro-
7 grams provided, by Federal agencies;

8 “(ii) to remove Federal barriers to full
9 reproductive autonomy; and

10 “(iii) to support patient-centered care
11 models in hospitals, Federally qualified
12 health centers, and entities eligible to re-
13 ceive funds under title X;

14 “(C) with respect to the recommendations
15 under subparagraph (B), include goals that are
16 comprehensive, research-based, and long-range;
17 and

18 “(D) include short-term measurable goals
19 to promote sexual and reproductive health and
20 well-being that may be realistically achieved.

21 “(2) CONSULTATION.—In developing the
22 SRHW Strategy, the Director shall consult with—

23 “(A) patients and communities;

24 “(B) State and local governments; and

1 “(C) nonprofit and nongovernmental enti-
2 ties and community-based organizations.

3 “(d) REPORTS.—Not later than 18 months after the
4 date of enactment of this section, and on an annual basis
5 thereafter, the Director shall submit to the Committee on
6 Energy and Commerce and the Committee on Appropria-
7 tions of the House of Representatives and the Committee
8 on Health, Education, Labor, and Pensions and the Com-
9 mittee on Appropriations of the Senate, and post on the
10 website of the Office, a report containing—

11 “(1) a summary of the state of sexual and re-
12 productive health and well-being in the United
13 States;

14 “(2) a description of the effectiveness of the
15 SRHW Strategy, including a summary of plans for
16 implementing Federal policy recommendations; and

17 “(3) a detailed description of the actions taken
18 by Federal agencies to implement the SRHW Strat-
19 egy.

20 “(e) DEFINITIONS.—In this section:

21 “(1) PATIENT-CENTERED CARE.—The term
22 ‘patient-centered care’ refers to a health care philos-
23 ophy where—

24 “(A) the health needs and desired health
25 outcomes of a patient are the driving force be-

1 hind all health care decisions and quality meas-
2 urements; and

3 “(B) patients are partners with health care
4 providers and such providers consider, with re-
5 spect to a patient, clinical, emotional, mental,
6 spiritual, social, and financial perspectives.

7 “(2) REPRODUCTIVE HEALTH.—The term ‘re-
8 productive health’—

9 “(A) means a state of complete physical,
10 mental, and social well-being; and

11 “(B) includes all matters relating to the
12 reproductive system and the functions and proc-
13 esses of such system, and ensuring that an indi-
14 vidual—

15 “(i) is able to have a satisfying and
16 safe sex life; and

17 “(ii) possesses the capability to repro-
18 duce and the freedom to decide if, when,
19 and how often to reproduce.

20 “(3) REPRODUCTIVE JUSTICE.—The term ‘re-
21 productive justice’ means—

22 “(A) the human right to maintain personal
23 bodily autonomy;

24 “(B) the ability to choose whether to have
25 children; and

1 “(C) the ability to parent children in safe
2 and sustainable communities.

3 “(4) **SEXUAL AND REPRODUCTIVE HEALTH AND**
4 **WELL-BEING.**—The term ‘sexual and reproductive
5 health and well-being’ includes having access to
6 trauma-informed, culturally sensitive services and
7 support to attain the highest level of sexual and re-
8 productive health.

9 “(5) **SEXUAL AND REPRODUCTIVE HEALTH EQ-**
10 **UITY.**—The term ‘sexual and reproductive health eq-
11 uity’ means a health policy framework that—

12 “(A) ensures that individuals (including in-
13 dividuals across a range of age, gender, race,
14 and other identities) have what is necessary to
15 attain the highest level of sexual and reproduc-
16 tive health including having self-determination
17 and the ability to achieve reproductive goals;
18 and

19 “(B) includes government policies that
20 value and support individuals fairly and justly.

21 **“SEC. 3402. INTERAGENCY TASK FORCE ON SEXUAL AND**
22 **REPRODUCTIVE HEALTH AND WELL-BEING.**

23 “(a) **ESTABLISHMENT.**—The Secretary and the Di-
24 rector of the Gender Policy Council, acting jointly, shall
25 establish and maintain an interagency task force to be

1 known as the Interagency Task Force on Sexual and Re-
2 productive Health and Well-Being (referred to in this sec-
3 tion as the ‘Task Force’) to coordinate and promote Fed-
4 eral programs and activities related to sexual and repro-
5 ductive health and well-being.

6 “(b) MEMBERS.—The Task Force shall be composed
7 of the following members (or their designees):

8 “(1) The Secretary of Health and Human Serv-
9 ices, who shall serve as a Co-Chair of the Task
10 Force.

11 “(2) The Director of the Gender Policy Council,
12 who shall serve as a Co-Chair of the Task Force.

13 “(3) The Attorney General of the United
14 States.

15 “(4) The Secretary of Housing and Urban De-
16 velopment.

17 “(5) The Secretary of Education.

18 “(6) The Secretary of Labor.

19 “(7) The Administrator of the Environmental
20 Protection Agency.

21 “(8) The Secretary of Transportation.

22 “(9) The Secretary of Homeland Security.

23 “(10) The Secretary of the Interior.

24 “(11) The Secretary of State.

25 “(12) The Secretary of Agriculture.

1 “(13) The Secretary of Defense.

2 “(14) The Secretary of the Treasury.

3 “(15) The Secretary of Veterans Affairs.

4 “(16) The Secretary of Energy.

5 “(17) The Chair of the Federal Trade Commis-
6 sion.

7 “(18) The heads of other Federal departments
8 and agencies, as determined necessary by the Sec-
9 retary of Health and Human Services and Director
10 of the Gender Policy Council.

11 “(c) DUTIES.—The Task Force shall—

12 “(1) identify and coordinate activities to protect
13 and strengthen access to essential reproductive
14 health care and support services, and promote sexual
15 and reproductive health and well-being;

16 “(2) coordinate Federal interagency policy-
17 making, program development, and outreach ef-
18 forts—

19 “(A) to address barriers that individuals
20 and entities may face in seeking and providing
21 reproductive health care services; and

22 “(B) to promote and protect sexual and re-
23 productive health and well-being;

24 “(3) on an annual basis, conduct a comprehen-
25 sive equity-focused assessment of all Federal funds

1 allocated for, and all Federal programs that support,
2 sexual and reproductive health and well-being;

3 “(4) facilitate ongoing efforts to provide and
4 support a whole-of-government approach to pro-
5 tecting and promoting sexual and reproductive
6 health and well-being; and

7 “(5) support implementation of the SRHW
8 Strategy by—

9 “(A) developing agency-specific implemen-
10 tation and accountability plans; and

11 “(B) tracking and reporting, on an annual
12 basis, information related to the Task Force’s
13 activities, assessments, and policy recommenda-
14 tions for protecting and improving sexual and
15 reproductive health and well-being.

16 “(d) MEETINGS.—For the purpose of carrying out
17 this section, the Task Force may hold such meetings, and
18 sit and act at such times and places, as the Task Force
19 considers appropriate.

20 “(e) INFORMATION.—The Task Force may secure di-
21 rectly from any Federal agency such information as may
22 be necessary to enable the Task Force to carry out this
23 section. Upon request of the Co-Chairs of the Task Force,
24 the head of such agency shall furnish such information
25 to the Task Force.

1 **“SEC. 3403. REPRODUCTIVE JUSTICE AND EQUITY GRANT**
2 **PROGRAM.**

3 “(a) IN GENERAL.—The Secretary shall award
4 grants to eligible entities to pay for programs and services
5 related to improving patient access to sexual and repro-
6 ductive health care.

7 “(b) TIMING.—Beginning not later than 30 days
8 after the date of enactment of this section, the Secretary
9 shall solicit applications for grants under this section.

10 “(c) USE OF FUNDS.—An eligible entity receiving a
11 grant under this section shall use the grant to pay for
12 programs and services related to improving patient access
13 to sexual and reproductive health care, which may include
14 any of the following:

15 “(1) Mobile sexual and reproductive health care
16 clinics.

17 “(2) Travel expenses.

18 “(3) Lodging.

19 “(4) Food assistance.

20 “(5) Childcare.

21 “(6) Translation services.

22 “(7) Doula care.

23 “(8) Patient education and information serv-
24 ices.

25 “(9) Direct financial assistance.

26 “(10) Housing assistance.

1 “(11) Legal aid.

2 “(12) Comprehensive sex education.

3 “(13) Medical costs.

4 “(14) Behavioral health counseling.

5 “(d) PRIORITY.—In selecting the recipients of grants
6 under this section, the Secretary shall give priority to eligi-
7 ble entities that—

8 “(1) serve people who live in a jurisdiction that
9 has banned or severely restricted access to abortion;

10 “(2) serve people who travel to a jurisdiction
11 other than the one where they live to be provided
12 abortion services; or

13 “(3) have a program in operation, or submit as
14 part of the application required under subsection (d)
15 a plan to establish and operate a program, to help
16 patients access abortion services.

17 “(e) DEFINITIONS.—In this section:

18 “(1) The term ‘eligible entity’—

19 “(A) means a nonprofit organization, or a
20 community-based organization, that assists in-
21 dividuals seeking an abortion through pro-
22 grams, services, or activities that are unbiased
23 and medically and factually accurate; and

24 “(B) excludes any entity that discourages
25 individuals from seeking an abortion.

1 “(2) The term ‘nonprofit organization’ means
2 an organization that—

3 “(A) is described in subsection (c)(3) of
4 section 501 of the Internal Revenue Code of
5 1986; and

6 “(B) is, under subsection (a) of such sec-
7 tion, exempt from taxation.

8 “(f) AUTHORIZATION OF APPROPRIATIONS.—To
9 carry out this section, there is authorized to be appro-
10 priated \$500,000,000 for each of fiscal years 2024
11 through 2028.”.

12 (b) CONFORMING CHANGES; REFERENCES.—

13 (1) REPEALS.—Sections 3 and 4 of the Family
14 Planning Services and Population Research Act of
15 1970 (42 U.S.C. 3505a, 3505b) are hereby repealed.

16 (2) REFERENCES.—Any reference to the Office
17 of Population Affairs of the Department of Health
18 and Human Services or the Deputy Assistant Sec-
19 retary of Population Affairs in any law, rule, regula-
20 tion, certificate, directive, instruction, or other offi-
21 cial paper in force on the effective date of this Act
22 shall be deemed to refer and apply to the Office of
23 National Sexual and Reproductive Health and Well-

- 1 Being or the Director of National Sexual and Repro-
- 2 ductive Health and Well-Being, respectively.

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