To require the Secretary of Health and Human Services to furnish tailored information to expecting mothers, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. RUBIO (for himself, Mr. MARSHALL, Mr. WICKER, Mr. INHOFE, Mrs. HYDE-SMITH, Mr. THUNE, Mr. SCOTT of Florida, Mr. CRUZ, and Mrs. FISCHER) introduced the following bill; which was read twice and referred to the Committee on

A BILL

To require the Secretary of Health and Human Services to furnish tailored information to expecting mothers, 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
4 SECTION 1. SHORT TITLE.
5 This Act may be cited as the “Standing with Moms
6 Act”.
7
8 SEC. 2. AWARENESS FOR EXPECTING MOTHERS.
9 The Public Health Service Act is amended by adding
10 at the end the following:
“TITLE XXXIV—AWARENESS FOR EXPECTING MOTHERS

“SEC. 3401. WEBSITE AND PORTAL.

“(a) WEBSITE.—Not later than 1 year after the date of enactment of this section, the Secretary shall publish a user-friendly public website, life.gov, to provide a comprehensive list of Federal, State, local governmental, and private resources available to pregnant women including—

“(1) resources to mental health counseling, pregnancy counseling, and other prepartum and postpartum services;

“(2) comprehensive information on alternatives to abortion;

“(3) information about abortion risks, including complications and failures; and

“(4) links to information on child development from moment of conception.

“(b) PORTAL.—Not later than 1 year after the date of enactment of this section, the Secretary shall publish a portal on the public website of the Department of Health and Human Services that—

“(1) through a series of questions, will furnish specific tailored information to the user on what pregnancy-related information they are looking for, such as—
“(A) Federal, State, local governmental, and private resources that may be available to the woman within her zip code, including the resources specified in subsection (c); and

“(B) risks related to abortion at all stages of fetal gestation; and

“(2) provides for the submission of feedback on how user-friendly and helpful the portal was in providing the tailored information the user was seeking.

“(c) RESOURCES.—The Federal, State, local governmental, and private resources specified in this subsection are the following:

“(1) Mentorship opportunities, including pregnancy help and case management resources.

“(2) Health and well-being services, including women’s medical services such as obstetrical and gynecological support services for women, abortion pill reversal, breastfeeding, general health services, primary care, and dental care.

“(3) Financial assistance, work opportunities, nutrition assistance, childcare, and education opportunities.

“(4) Material or legal support, including transportation, food, nutrition, clothing, household goods, baby supplies, housing, shelters, maternity homes,
tax preparation, legal support for child support, family leave, breastfeeding protections, and custody issues.

“(5) Recovery and mental health services, including services with respect to addiction or suicide intervention, intimate partner violence, sexual assault, rape, sex trafficking, and counseling for women and families surrounding unexpected loss of a child.

“(6) Prenatal diagnostic services, including disability support organizations, medical interventions for a baby, perinatal hospice resources, pregnancy and infant loss support, and literature on pregnancy wellness.

“(7) Healing and support services for abortion survivors and their families.

“(8) Services providing care for children, including family planning education, adoption, foster care, and short-term care resources.

“(d) ADMINISTRATION.—The Secretary may not delegate implementation or administration of the portal established under subsection (b) below the level of the Office of the Secretary.

“(e) FOLLOW-UP.—The Secretary shall develop a plan under which—
“(1) the Secretary includes in the portal established under subsection (b), a mechanism for users of the portal to take an assessment through the portal and provide consent to use the user’s contact information;

“(2) the Secretary conducts outreach via phone or email to follow up with users of the portal established under subsection (b) on additional resources that would be helpful for the users to review; and

“(3) upon the request of a user of the portal for specific information, after learning of the additional resources through the portal, agents of the Department of Health and Human Services make every effort to furnish specific information to such user in coordination with Federal, State, local governmental, and private health care providers and resources.

“(f) Resource List Aggregation.—

“(1) In general.—Pursuant to criteria developed in subsection (e)(2), each State shall provide recommendations of State, local governmental, and private resources under subsection (b)(1)(A) to include in the portal.

“(2) Criteria for making recommendations.—The Secretary shall develop criteria to provide to the States to determine whether resources
recommended as described in paragraph (1) for inclusion in the portal can appear in the portal. Such criteria shall include the requirement that the resource provider is not a prohibited entity and the requirement that the resource provider has been engaged in providing services for a minimum of 3 consecutive years.

“(3) GRANT PROGRAM.—

“(A) IN GENERAL.—The Secretary may provide grants to States to establish or support a system that aggregates the resources described in subsection (b)(1)(A), in accordance with the criteria developed under paragraph (2), and that may be coordinated, to the extent determined appropriate by the State, by a statewide, regionally-based, or community-based public entity or private nonprofit.

“(B) APPLICATIONS.—To be eligible to receive a grant under subparagraph (A), a State shall submit an application to the Secretary at such time, in such manner, and containing such information as the Secretary may require, including a plan for outreach and awareness activities, and a list of service providers that
would be included in the State system supported by the grant.

“(g) MATERNAL MENTAL HEALTH HOTLINE.—The Secretary shall ensure that the Maternal Mental Health Hotline of the Health Resources and Services Administration—

“(1) disseminates information regarding, and linkages to, the life.gov website and portal described in subsections (a) and (b);

“(2) has the capacity to help families in every State and community in the Nation; and

“(3) includes live chat features, 24 hours a day, to connect individuals to the information the portal hosts.

“(h) PROHIBITION REGARDING CERTAIN ENTITIES.—The resources listed on the life.gov website, and made available through the portal and hotline established under this section may not include any resource offered by a prohibited entity.

“(i) SERVICES IN DIFFERENT LANGUAGES.—The life.gov website and hotline shall ensure the widest possible access to services for families who speak languages other than English.

“(j) REPORTING REQUIREMENTS.—
“(1) IN GENERAL.—Not later than 180 days after date on which the life.gov website and portal are established under subsection (a), the Secretary shall submit to Congress a report on—

“(A) the traffic of the website and the interactive portal;

“(B) user feedback on the accessibility and helpfulness of the website and interactive portal in tailoring to the user’s needs;

“(C) insights on gaps in Federal, State, local governmental, and private programming with respect to services for pregnant and postpartum women; and

“(D) suggestions on how to improve user experience and accessibility based on user feedback and missing resources that would be helpful to include in future updates.

“(2) CONFIDENTIALITY.—The report under paragraph (1) shall not include any personal identifying information regarding individuals who have used the website or portal.

“(k) DEFINITIONS.—In this section:

“(1) ABORTION.—The term ‘abortion’ means the use or prescription of any instrument, medicine, drug, or other substance or device to intentionally—
“(A) kill the unborn child of a woman known to be pregnant; or

“(B) prematurely terminate the pregnancy of a woman known to be pregnant, with an intention other than to—

“(i) increase the probability of a live birth or of preserving the life or health of the child after live birth; or

“(ii) remove a dead unborn child.

“(2) BORN ALIVE.—The term ‘born alive’ has the meaning given such term in section 8(b) of title 1, United States Code.

“(3) PROHIBITED ENTITY.—The term ‘prohibited entity’ means an entity, including its affiliates, subsidiaries, successors, and clinics that performs, induces, refers for, or counsels in favor of abortions, or provides financial support to any other organization that conducts such activities.

“(4) UNBORN CHILD.—The term ‘unborn child’ means an individual organism of the species homo sapiens, beginning at fertilization, until the point of being born alive.”.