



CAPITOL HALL

REPORT



Serving the counties of District 2: Fannin, Delta, Hunt, Hopkins, Rains, Rockwall, Kaufman, Van Zandt, and part of Dallas County

Securing the Right to Live

Before the 84th session began, knowledgeable observers predicted that the Senate would move significantly to the right. Now that we are passed the halfway point, it looks like that prediction is becoming a reality. There are now five very good bills in the Senate to enhance and protect the "right-to-life" for Texans.

I am honored to support these pro-life and end-of-life bills, which are expected to come up for a vote soon. I believe that life is given by God, and we should leave it in his hands. Our founders also espoused the sanctity of life in the Declaration of Independence, saying, "We hold these truths to be self-evident, that all men are created equal, that they are endowed by their Creator with certain unalienable Rights, that among these are Life, Liberty, and the pursuit of Happiness." They further wrote that the government should work to secure these rights, and for that reason our office is honored to co-author these great, truly conservative pieces of legislation.

Pro-Life Bills-

1. **Closing loopholes that endanger pregnant minors- SB 1564 (Sen. Burton) & HB 2531 (Rep. Krause)**
Current Texas law requires both parental consent and notice before a pregnant minor can undergo an elective abortion. To circumvent parental involvement, however, pregnant minors may petition a judge for permission. Loopholes in this judicial bypass process exploit the minors and the courts. This bill would add more protections for pregnant minors and clarify the court proceeding.
2. **Pro-life health insurance reform- SB 575 (Sen. Larry Taylor) & HB 1435 (Rep. Smithee)**
This bill ensures that coverage for elective abortion is not included in basic health insurance plans in Texas. The bill removes automatic coverage for abortion from private insurance plans, the federal exchanges mandated by ACA (Obamacare), and benefits for state employees. Separate, supplemental coverage for elective abortions would still be available for those who wanted that specific service.
3. **Coerced abortion prevention bill- SB 831 (Sen. Kolkhorst) & HB 1648 (Rep. Molly White)**
Abortion providers would be required to inform women about their full rights and protections against coercion through forms, signs, & screening mechanisms at the clinic. A woman who is coerced would be given a private phone to call abuse/assistance hotlines. Because the bill makes coerced abortion a crime, law enforcement has a duty to respond at the clinic, and pending investigation, the crime may be prosecuted.

Advanced Directive Reform Bills-

Neither doctors or hospitals should have the authority to unilaterally terminate a life for their convenience. Unfortunately, current law allows a care-provider to end life-sustaining medical treatment for a patient, despite the statements and advanced directives of the patient. Providers can give patients and/or families ten days to move to another facility or find another physician, and the providers are not required to continue life-sustaining treatment beyond that point. This policy has been fatal for some patients.

These two bills we have co-authored will defend patients' end-of-life rights:

1. **DNR Consent Bill- SB 1546 (Sen. Perry) & HB 2949 (Rep. Klick)**
Current Texas law is silent on Do-Not-Resuscitate Orders (called DNR or DNAR) in hospital settings. This bill requires medical professionals to secure the consent of the patient or surrogate before issuing a DNR Order that can authorize the withholding of life-saving care and could hasten the death of the patient.
2. **Reform the Texas Advance Directive Act- SB 1163 (Sen. Hancock) & HB 3414 (Rep. Frank)**
This reform to current law would limit the statutory process to withdraw or withhold only treatment that is physiologically futile. This bill would also clarify that treatment decisions cannot be based on discriminatory judgments against persons with disabilities, the elderly, and terminally-ill patients. This bill does not address or change the ten-day transfer period.