

House _____ Amendment NO. _____

Offered By

AMEND Senate Bill No. 194, Page 1, Section A, Line 2, by inserting immediately after all of said section and line the following:

"188.027. 1. Except in the case of medical emergency, no abortion shall be performed or induced on a woman without her voluntary and informed consent, given freely and without coercion. Consent to an abortion is voluntary and informed and given freely and without coercion if, and only if, at least seventy-two hours prior to the abortion:

(1) The physician who is to perform or induce the abortion or a qualified professional has informed the woman orally, reduced to writing, and in person, of the following:

(a) The name of the physician who will perform or induce the abortion;

(b) Medically accurate information that a reasonable patient would consider material to the decision of whether or not to undergo the abortion, including:

a. A description of the proposed abortion method;

b. The immediate and long-term medical risks to the woman associated with the proposed abortion method including, but not limited to, infection, hemorrhage, cervical tear or uterine perforation, harm to subsequent pregnancies or the ability to carry a subsequent child to term, and possible adverse psychological effects associated with the abortion; and

c. The immediate and long-term medical risks to the woman, in light of the anesthesia and medication that is to be administered, the unborn child's gestational age, and the woman's medical history and medical condition;

(c) Alternatives to the abortion which shall include making the woman aware that information and materials shall be provided to her detailing such alternatives to the abortion;

(d) A statement that the physician performing or inducing the abortion is available for any questions concerning the abortion, together with the telephone number that the physician may be later reached to answer any questions that the woman may have;

(e) The location of the hospital that offers obstetrical or gynecological care located within thirty miles of the location where the abortion is performed or induced and at which the physician performing or inducing the abortion has clinical privileges and where the woman may receive follow-up care by the physician if complications arise;

(f) The gestational age of the unborn child at the time the abortion is to be performed or induced; ~~and~~

(g) The anatomical and physiological characteristics of the unborn child at the time the abortion is to be performed or induced; and

(h) A description of the disposal process of the aborted fetus;

(2) The physician who is to perform or induce the abortion or a qualified professional has presented the woman, in person, ~~printed~~ materials provided by the department, which describe the

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1 probable anatomical and physiological characteristics of the unborn child at two-week gestational
2 increments from conception to full term, including color photographs or images of the developing
3 unborn child at two-week gestational increments. Such descriptions shall include information about
4 brain and heart functions, the presence of external members and internal organs during the
5 applicable stages of development and information on when the unborn child is viable. The [printed]
6 materials shall prominently display the following statement: "The life of each human being begins
7 at conception. Abortion will terminate the life of a separate, unique, living human being.";

8 (3) The physician who is to perform or induce the abortion or a qualified professional has
9 presented the woman, in person, [printed] materials provided by the department, which describe the
10 various surgical and drug-induced methods of abortion relevant to the stage of pregnancy, as well as
11 the immediate and long-term medical risks commonly associated with each abortion method
12 including, but not limited to, infection, hemorrhage, cervical tear or uterine perforation, harm to
13 subsequent pregnancies or the ability to carry a subsequent child to term, and the possible adverse
14 psychological effects associated with an abortion;

15 (4) The physician who is to perform or induce the abortion or a qualified professional shall
16 provide the woman with the opportunity to view at least seventy-two hours prior to the abortion an
17 active ultrasound of the unborn child and hear the heartbeat of the unborn child if the heartbeat is
18 audible. The woman shall be provided with a geographically indexed list maintained by the
19 department of health care providers, facilities, and clinics that perform ultrasounds, including those
20 that offer ultrasound services free of charge. Such materials shall provide contact information for
21 each provider, facility, or clinic including telephone numbers and, if available, website addresses.
22 Should the woman decide to obtain an ultrasound from a provider, facility, or clinic other than the
23 abortion facility, the woman shall be offered a reasonable time to obtain the ultrasound examination
24 before the date and time set for performing or inducing an abortion. The person conducting the
25 ultrasound shall ensure that the active ultrasound image is of a quality consistent with standard
26 medical practice in the community, contains the dimensions of the unborn child, and accurately
27 portrays the presence of external members and internal organs, if present or viewable, of the unborn
28 child. The auscultation of fetal heart tone must also be of a quality consistent with standard medical
29 practice in the community. If the woman chooses to view the ultrasound or hear the heartbeat or
30 both at the abortion facility, the viewing or hearing or both shall be provided to her at the abortion
31 facility at least seventy-two hours prior to the abortion being performed or induced;

32 (5) Prior to an abortion being performed or induced on an unborn child of twenty-two
33 weeks gestational age or older, the physician who is to perform or induce the abortion or a qualified
34 professional has presented the woman, in person, [printed] materials provided by the department
35 that offer information on the possibility of the abortion causing pain to the unborn child. This
36 information shall include, but need not be limited to, the following:

37 (a) At least by twenty-two weeks of gestational age, the unborn child possesses all the
38 anatomical structures, including pain receptors, spinal cord, nerve tracts, thalamus, and cortex, that
39 are necessary in order to feel pain;

40 (b) A description of the actual steps in the abortion procedure to be performed or induced,
41 and at which steps the abortion procedure could be painful to the unborn child;

42 (c) There is evidence that by twenty-two weeks of gestational age, unborn children seek to
43 evade certain stimuli in a manner that in an infant or an adult would be interpreted as a response to
44 pain;

45 (d) Anesthesia is given to unborn children who are twenty-two weeks or more gestational
46 age who undergo prenatal surgery;

47 (e) Anesthesia is given to premature children who are twenty-two weeks or more gestational
48 age who undergo surgery;

1 (f) Anesthesia or an analgesic is available in order to minimize or alleviate the pain to the
2 unborn child;

3 (6) The physician who is to perform or induce the abortion or a qualified professional has
4 presented the woman, in person, [printed] materials provided by the department explaining to the
5 woman alternatives to abortion she may wish to consider. Such materials shall:

6 (a) Identify on a geographical basis public and private agencies available to assist a woman
7 in carrying her unborn child to term, and to assist her in caring for her dependent child or placing
8 her child for adoption, including agencies commonly known and generally referred to as pregnancy
9 resource centers, crisis pregnancy centers, maternity homes, and adoption agencies. Such materials
10 shall provide a comprehensive list by geographical area of the agencies, a description of the services
11 they offer, and the telephone numbers and addresses of the agencies; provided that such materials
12 shall not include any programs, services, organizations, or affiliates of organizations that perform or
13 induce, or assist in the performing or inducing of, abortions or that refer for abortions;

14 (b) Explain the Missouri alternatives to abortion services program under section 188.325,
15 and any other programs and services available to pregnant women and mothers of newborn children
16 offered by public or private agencies which assist a woman in carrying her unborn child to term and
17 assist her in caring for her dependent child or placing her child for adoption, including but not
18 limited to prenatal care; maternal health care; newborn or infant care; mental health services;
19 professional counseling services; housing programs; utility assistance; transportation services; food,
20 clothing, and supplies related to pregnancy; parenting skills; educational programs; job training and
21 placement services; drug and alcohol testing and treatment; and adoption assistance;

22 (c) Identify the state website for the Missouri alternatives to abortion services program
23 under section 188.325, and any toll-free number established by the state operated in conjunction
24 with the program;

25 (d) Prominently display the statement: "There are public and private agencies willing and
26 able to help you carry your child to term, and to assist you and your child after your child is born,
27 whether you choose to keep your child or place him or her for adoption. The state of Missouri
28 encourages you to contact those agencies before making a final decision about abortion. State law
29 requires that your physician or a qualified professional give you the opportunity to call agencies like
30 these before you undergo an abortion.";

31 (7) The physician who is to perform or induce the abortion or a qualified professional has
32 presented the woman, in person, [printed] materials provided by the department explaining that the
33 father of the unborn child is liable to assist in the support of the child, even in instances where he
34 has offered to pay for the abortion. Such materials shall include information on the legal duties and
35 support obligations of the father of a child, including, but not limited to, child support payments,
36 and the fact that paternity may be established by the father's name on a birth certificate or statement
37 of paternity, or by court action. Such [printed] materials shall also state that more information
38 concerning paternity establishment and child support services and enforcement may be obtained by
39 calling the family support division within the Missouri department of social services; and

40 (8) The physician who is to perform or induce the abortion or a qualified professional shall
41 inform the woman that she is free to withhold or withdraw her consent to the abortion at any time
42 without affecting her right to future care or treatment and without the loss of any state or federally
43 funded benefits to which she might otherwise be entitled.

44 2. All information required to be provided to a woman considering abortion by subsection 1
45 of this section shall be presented to the woman individually, in the physical presence of the woman
46 and in a private room, to protect her privacy, to maintain the confidentiality of her decision, to
47 ensure that the information focuses on her individual circumstances, to ensure she has an adequate
48 opportunity to ask questions, and to ensure that she is not a victim of coerced abortion. Should a

1 woman be unable to read materials provided to her, they shall be read to her. Should a woman need
2 an interpreter to understand the information presented in the written materials, an interpreter shall
3 be provided to her. Should a woman ask questions concerning any of the information or materials,
4 answers shall be provided in a language she can understand.

5 3. No abortion shall be performed or induced unless and until the woman upon whom the
6 abortion is to be performed or induced certifies in writing on a checklist form provided by the
7 department that she has been presented all the information required in subsection 1 of this section
8 and shall indicate whether the information was provided in writing or via video, that she has been
9 provided the opportunity to view an active ultrasound image of the unborn child and hear the
10 heartbeat of the unborn child if it is audible, and that she further certifies that she gives her
11 voluntary and informed consent, freely and without coercion, to the abortion procedure. 4. No
12 abortion shall be performed or induced on an unborn child of twenty-two weeks gestational age or
13 older unless and until the woman upon whom the abortion is to be performed or induced has been
14 provided the opportunity to choose to have an anesthetic or analgesic administered to eliminate or
15 alleviate pain to the unborn child caused by the particular method of abortion to be performed or
16 induced. The administration of anesthesia or analgesics shall be performed in a manner consistent
17 with standard medical practice in the community.

18 5. No physician shall perform or induce an abortion unless and until the physician has
19 obtained from the woman her voluntary and informed consent given freely and without coercion. If
20 the physician has reason to believe that the woman is being coerced into having an abortion, the
21 physician or qualified professional shall inform the woman that services are available for her and
22 shall provide her with private access to a telephone and information about such services, including
23 but not limited to the following:

- 24 (1) Rape crisis centers, as defined in section 455.003;
- 25 (2) Shelters for victims of domestic violence, as defined in section 455.200; and
- 26 (3) Orders of protection, pursuant to chapter 455.

27 6. No physician shall perform or induce an abortion unless and until the physician has
28 received and signed a copy of the form prescribed in subsection 3 of this section. The physician
29 shall retain a copy of the form in the patient's medical record.

30 7. In the event of a medical emergency as provided by section 188.039, the physician who
31 performed or induced the abortion shall clearly certify in writing the nature and circumstances of
32 the medical emergency. This certification shall be signed by the physician who performed or
33 induced the abortion, and shall be maintained under section 188.060.

34 8. No person or entity shall require, obtain, or accept payment for an abortion from or on
35 behalf of a patient until at least seventy-two hours have passed since the time that the information
36 required by subsection 1 of this section has been provided to the patient. Nothing in this subsection
37 shall prohibit a person or entity from notifying the patient that payment for the abortion will be
38 required after the seventy-two-hour period has expired if she voluntarily chooses to have the
39 abortion.

40 9. The term "qualified professional" as used in this section shall refer to a physician,
41 physician assistant, registered nurse, licensed practical nurse, psychologist, licensed professional
42 counselor, or licensed social worker, licensed or registered under chapter 334, 335, or 337, acting
43 under the supervision of the physician performing or inducing the abortion, and acting within the
44 course and scope of his or her authority provided by law. The provisions of this section shall not be
45 construed to in any way expand the authority otherwise provided by law relating to the licensure,
46 registration, or scope of practice of any such qualified professional.

47 10. By November 30, 2010, the department shall produce the written materials and forms
48 described in this section. Any written materials produced shall be printed in a typeface large

1 enough to be clearly legible. All information shall be presented in an objective, unbiased manner
 2 designed to convey only accurate scientific and medical information. The department shall furnish
 3 the written materials and forms at no cost and in sufficient quantity to any person who performs or
 4 induces abortions, or to any hospital or facility that provides abortions. The department shall make
 5 all information required by subsection 1 of this section available to the public through its
 6 department website. The department shall maintain a toll-free, twenty-four-hour hotline telephone
 7 number where a caller can obtain information on a regional basis concerning the agencies and
 8 services described in subsection 1 of this section. No identifying information regarding persons
 9 who use the website shall be collected or maintained. The department shall monitor the website on
 10 a regular basis to prevent tampering and correct any operational deficiencies.

11 11. In order to preserve the compelling interest of the state to ensure that the choice to
 12 consent to an abortion is voluntary and informed, and given freely and without coercion, the
 13 department shall use the procedures for adoption of emergency rules under section 536.025 in order
 14 to promulgate all necessary rules, forms, and other necessary material to implement this section by
 15 November 30, 2010.

16 12. If the provisions in subsections 1 and 8 of this section requiring a seventy-two-hour
 17 waiting period for an abortion are ever temporarily or permanently restrained or enjoined by judicial
 18 order, then the waiting period for an abortion shall be twenty-four hours; provided, however, that if
 19 such temporary or permanent restraining order or injunction is stayed or dissolved, or otherwise
 20 ceases to have effect, the waiting period for an abortion shall be seventy-two hours.

21 13. The department of health and senior services shall create a video that contains all the
 22 information required to be provided to a woman considering an abortion under subsection 1 of this
 23 section, except paragraph (a), the physician's telephone number under paragraph (d), and paragraph
 24 (e) of subdivision (1) of subsection 1 of this section.

25 188.028. 1. Except in the case of a medical emergency, no person shall knowingly perform
 26 or induce an abortion upon a pregnant woman under the age of eighteen years unless:

27 (1) The attending physician has secured the informed written consent of the minor and one
 28 parent or guardian, and the consenting parent or guardian of the minor has notified any other
 29 custodial parent or guardian in writing prior to the securing of the informed written consent of the
 30 minor and one parent or guardian. For purposes of this subdivision, "custodial parent" means any
 31 parent of a minor in a family in which the parents have not separated or dissolved their marriage, or
 32 any parent of a minor who has been awarded joint legal custody or joint physical custody of such
 33 minor by a court of competent jurisdiction. Notice shall not be required for any parent or guardian:

34 (a) Who has been found guilty of any offense in violation of chapter 565, relating to
 35 offenses against the person; chapter 566, relating to sexual offenses; chapter 567, relating to
 36 prostitution; chapter 568, relating to offenses against the family; or chapter 573, related to
 37 pornography and related offenses, if a child was a victim;

38 (b) Who has been found guilty of any offense in any other state or foreign country, or under
 39 federal, tribal, or military jurisdiction if a child was a victim, which would be a violation of chapter
 40 565, 566, 567, 568, or 573 if committed in this state;

41 (c) Who is listed on the sexual offender registry under sections 589.400 to 589.425;

42 (d) Against whom an order of protection has been issued, including a foreign order of
 43 protection given full faith and credit in this state under section 455.067;

44 (e) Whose custodial, parental, or guardianship rights have been terminated by a court of
 45 competent jurisdiction; or

46 (f) Whose whereabouts are unknown after reasonable inquiry, who is a fugitive from justice,
 47 who is habitually in an intoxicated or drugged condition, or who has been declared mentally
 48 incompetent or incapacitated by a court of competent jurisdiction; or

(2) The minor is emancipated and the attending physician has received the informed written consent of the minor; or

(3) The minor has been granted the right to self-consent to the abortion by court order pursuant to subsection 2 of this section, and the attending physician has received the informed written consent of the minor; or

(4) The minor has been granted consent to the abortion by court order, and the court has given its informed written consent in accordance with subsection 2 of this section, and the minor is having the abortion willingly, in compliance with subsection 3 of this section.

2. The right of a minor to self-consent to an abortion under subdivision (3) of subsection 1 of this section or court consent under subdivision (4) of subsection 1 of this section may be granted by a court pursuant to the following procedures:

(1) The minor or next friend shall make an application to the juvenile court which shall assist the minor or next friend in preparing the petition and notices required pursuant to this section. The minor or the next friend of the minor shall thereafter file a petition setting forth the initials of the minor; the age of the minor; the names and addresses of each parent, guardian, or, if the minor's parents are deceased and no guardian has been appointed, any other person standing in loco parentis of the minor; that the minor has been fully informed of the risks and consequences of the abortion; that the minor is of sound mind and has sufficient intellectual capacity to consent to the abortion; that, if the court does not grant the minor majority rights for the purpose of consent to the abortion, the court should find that the abortion is in the best interest of the minor and give judicial consent to the abortion; that the court should appoint a guardian ad litem of the child; and if the minor does not have private counsel, that the court should appoint counsel. The petition shall be signed by the minor or the next friend;

(2) A hearing on the merits of the petition, to be held on the record, shall be held as soon as possible within five days of the filing of the petition. If any party is unable to afford counsel, the court shall appoint counsel at least twenty-four hours before the time of the hearing. At the hearing, the court shall hear evidence relating to the emotional development, maturity, intellect and understanding of the minor; the nature, possible consequences, and alternatives to the abortion; and any other evidence that the court may find useful in determining whether the minor should be granted majority rights for the purpose of consenting to the abortion or whether the abortion is in the best interests of the minor;

(3) In the decree, the court shall for good cause:

(a) Grant the petition for majority rights for the purpose of consenting to the abortion; or

(b) Find the abortion to be in the best interests of the minor and give judicial consent to the abortion, setting forth the grounds for so finding; or

(c) Deny the petition, setting forth the grounds on which the petition is denied;

(4) If the petition is allowed, the informed consent of the minor, pursuant to a court grant of majority rights, or the judicial consent, shall bar an action by the parents or guardian of the minor on the grounds of battery of the minor by those performing or inducing the abortion. The immunity granted shall only extend to the performance or inducement of the abortion in accordance herewith and any necessary accompanying services which are performed in a competent manner. The costs of the action shall be borne by the parties;

(5) An appeal from an order issued under the provisions of this section may be taken to the court of appeals of this state by the minor or by a parent or guardian of the minor. The notice of intent to appeal shall be given within twenty-four hours from the date of issuance of the order. The record on appeal shall be completed and the appeal shall be perfected within five days from the filing of notice to appeal. Because time may be of the essence regarding the performance or inducement of the abortion, the supreme court of this state shall, by court rule, provide for expedited

1 appellate review of cases appealed under this section.

2 3. If a minor desires an abortion, then she shall be orally informed of and, if possible, sign
3 the written consent required ~~[by section 188.039]~~ under this chapter in the same manner as an adult
4 person. No abortion shall be performed or induced on any minor against her will, except that an
5 abortion may be performed or induced against the will of a minor pursuant to a court order
6 described in subdivision (4) of subsection 1 of this section that the abortion is necessary to preserve
7 the life of the minor.

8 188.036. 1. No physician shall perform an abortion on a woman if the physician knows that
9 the woman conceived the unborn child for the purpose of providing fetal organs or tissue for
10 medical transplantation to herself or another, and the physician knows that the woman intends to
11 procure the abortion to utilize those organs or tissue for such use for herself or another.

12 2. No person shall utilize the fetal organs or tissue resulting from an abortion for medical
13 transplantation, if the person knows that the abortion was procured for the purpose of utilizing those
14 organs or tissue for such use.

15 3. No person shall offer any inducement, monetary or otherwise, to a woman or a
16 prospective father of an unborn child for the purpose of conceiving an unborn child for the medical,
17 scientific, experimental or therapeutic use of the fetal organs or tissue.

18 4. No person shall offer any inducement, monetary or otherwise, to the mother or father of
19 an unborn child for the purpose of procuring an abortion for the medical, scientific, experimental or
20 therapeutic use of the fetal organs or tissue.

21 5. No person shall knowingly donate or make an anatomical gift of the fetal organs or tissue
22 resulting from an abortion to any person or entity for medical, scientific, experimental, therapeutic,
23 or any other use.

24 6. No person shall knowingly offer or receive any valuable consideration for the fetal organs
25 or tissue resulting from an abortion, provided that nothing in this subsection shall prohibit payment
26 for burial or other final disposition of the fetal remains so long as the final disposition does not
27 include any donation or anatomical gift of fetal organs or tissue, or payment for a pathological
28 examination, autopsy or postmortem examination of the fetal remains.

29 ~~[6-]~~ 7. If any provision in this section or the application thereof to any person, circumstance
30 or period of gestation is held invalid, such invalidity shall not affect the provisions or applications
31 which can be given effect without the invalid provision or application, and to this end the provisions
32 of this section are declared severable.

33 8. Any person who violates the provisions of subsection 3, 4, 5, or 6 of this section shall be
34 guilty of a class C felony, and the court may impose a fine in an amount not less than twice the
35 amount of any valuable consideration received.

36 9. Nothing in this section shall prohibit the utilization of fetal organs or tissue resulting
37 from an abortion for medical or scientific purposes to determine the cause or causes of any anomaly,
38 illness, death, or genetic condition of the fetus, the paternity of the fetus, or for law enforcement
39 purposes.

40 188.047. ~~[A representative sample of]~~ 1. All tissue and remains of a human fetus, as
41 defined in section 194.375, removed at the time of abortion shall be ensured as nonhazardous in
42 compliance with department of natural resources regulations and submitted to a board eligible or
43 certified pathologist, who shall file a copy of the tissue report with the state department of health
44 and senior services, and who shall provide a copy of the report to the abortion facility or hospital in
45 which the abortion was performed or induced and the pathologist's report shall be made a part of the
46 patient's permanent record.

47 2. The tissue report shall include:

48 (1) The pathologist's estimation, to a reasonable degree of scientific certainty, of the

1 gestational age of the fetal remains;

2 (2) Whether all tissue and remains of a human fetus were received that would be common
3 for a specimen of such estimated gestational age;

4 (3) If the pathologist finds that all tissue and remains of a human fetus were not received,
5 what portion of the tissue and remains of a human fetus were not received;

6 (4) A gross diagnosis and detailed gross findings of what was received including the percent
7 blood clot and the percent tissue;

8 (5) The date the tissue and remains of a human fetus were remitted to be disposed and the
9 location of such disposal;

10 (6) A certification that all submitted tissue and remains of a human fetus have been disposed
11 in accordance with state laws and regulations; and

12 (7) The name of the entity and physical address of the entity conducting the examination of
13 the specimen containing the remains of a human fetus.

14 3. Each specimen containing remains of a human fetus shall be given a unique identification
15 number to allow the specimen to be tracked from the abortion facility or hospital where the abortion
16 was performed or induced to the pathology lab and to its final disposition location. The unique
17 identification number shall be conspicuously adhered to the exterior of the specimen container.

18 4. A report shall be created and submitted to the department for each specimen containing
19 remains of a human fetus at each facility that handles the specimen, including the abortion facility
20 or hospital where the abortion was performed or induced, the pathology lab, and the location of
21 final disposition. Each report shall document, if applicable, the date the specimen containing
22 remains of a human fetus was collected, transported, received, and disposed. The report by the
23 location of final disposition shall verify that all fetal tissue was received and has been properly
24 disposed according to state laws and regulations.

25 5. The department shall reconcile each notice of abortion with its corresponding pathology
26 report. If the department does not receive the notice of abortion and the pathology report, the
27 department shall conduct an investigation. If the department finds that the abortion facility or
28 hospital where the abortion was performed or induced was not in compliance with the provisions of
29 this section, the department shall consider such noncompliance a deficiency requiring an
30 unscheduled inspection of the facility to ensure the deficiency is remedied. If such deficiency is not
31 remedied, the department shall suspend the abortion facility's or hospital's license for no less than
32 one year.

33 6. Beginning January 1, 2018, the department shall make an annual report to the general
34 assembly. The report shall include, but not be limited to, all reports and information received by the
35 department under the provisions of this section, the number of any deficiencies of each abortion
36 facility in the calendar year and whether such deficiencies were remedied, and the following for
37 each abortion procedure reported to the department the previous calendar year:

38 (1) The location of the abortion facility;

39 (2) The age of the fetus aborted;

40 (3) The termination procedure used with a clinical estimation of gestation;

41 (4) Whether the department received the tissue report for that abortion, along with a
42 certification of the disposal of the remains; and

43 (5) The existence and nature, if any, of any inconsistencies or concerns between the abortion
44 report submitted under section 188.052 and the tissue report submitted under subsection 1 of this
45 section.

46
47 The report shall not contain any personal patient information the disclosure of which is prohibited
48 by state or federal law.

1 7. The mother of the aborted fetus shall be given the option to have the fetus returned to her
 2 for final disposition after the fetus has been released from the pathology lab.

3 188.052. 1. An individual abortion report for each abortion performed or induced upon a
 4 woman shall be completed by her attending physician. The report shall include:

5 (1) The attending physician's estimation, to a reasonable degree of scientific certainty, of
 6 the gestational age of the fetal remains;

7 (2) Whether all tissue and remains of a human fetus, as defined in section 194.375, were
 8 removed that would be common for a specimen of such estimated gestational age; and

9 (3) If the attending physician finds that all tissue and remains of a human fetus were not
 10 removed, what portion of the tissue and remains of a human fetus were not removed.

11 2. An individual complication report for any post-abortion care performed upon a woman
 12 shall be completed by the physician providing such post-abortion care. This report shall include:

13 (1) The date of the abortion;

14 (2) The name and address of the abortion facility or hospital where the abortion was
 15 performed;

16 (3) The nature of the abortion complication diagnosed or treated.

17 3. All abortion reports shall be signed by the attending physician, and submitted to the state
 18 department of health and senior services within forty-five days from the date of the abortion. All
 19 complication reports shall be signed by the physician providing the post-abortion care and submitted
 20 to the department of health and senior services within forty-five days from the date of the post-
 21 abortion care.

22 4. A copy of the abortion report shall be made a part of the medical record of the patient of
 23 the facility or hospital in which the abortion was performed.

24 5. The state department of health and senior services shall be responsible for collecting all
 25 abortion reports and complication reports and collating and evaluating all data gathered therefrom
 26 and shall annually publish a statistical report based on such data from abortions performed in the
 27 previous calendar year.

28 188.160. 1. Each hospital, ambulatory surgical center, pathology lab, medical research
 29 entity, and disposal facility involved in handling fetal remains from an elective abortion shall
 30 establish and implement a written policy adopted by each hospital, ambulatory surgical center,
 31 pathology lab, medical research entity, and disposal facility relating to the protections for employees
 32 who disclose information under subsection 2 of this section. This policy shall include a time frame
 33 for completion of investigations related to complaints, not to exceed thirty days, and a method for
 34 notifying the complainant of the disposition of the investigation. This policy shall be submitted to
 35 the department to verify implementation. At a minimum, such policy shall include the following
 36 provisions:

37 (1) No supervisor or individual with authority to hire or fire in a hospital, ambulatory
 38 surgical center, pathology lab, medical research entity, or disposal facility shall prohibit employees
 39 from disclosing information under subsection 2 of this section;

40 (2) No supervisor or individual with authority to hire or fire in a hospital, ambulatory
 41 surgical center, pathology lab, medical research entity, or disposal facility shall use or threaten to
 42 use his or her supervisory authority to knowingly discriminate against, dismiss, penalize, or in any
 43 way retaliate against or harass an employee because the employee in good faith reported or
 44 disclosed any information under subsection 2 of this section, or in any way attempt to dissuade,
 45 prevent, or interfere with an employee who wishes to report or disclose such information; and

46 (3) Establish a program to identify a compliance officer who is a designated person
 47 responsible for administering the reporting and investigation process and an alternate person should
 48 the primary designee be implicated in the report.

2. The provisions of this section shall apply to information disclosed or reported in good faith by an employee concerning alleged violations of applicable federal or state laws or administrative rules concerning the handling of fetal remains. All information disclosed, collected, and maintained under this subsection and under the written policy requirements of this section shall be accessible to the department at all times and shall be reviewed by the department at least annually. Complainants shall be notified of the department's access to such information and of the complainant's right to notify the department of any information concerning alleged violations of applicable federal or state laws or administrative rules concerning abortions or the handling of fetal remains.

3. Prior to any disclosure to individuals or agencies other than the department, employees wishing to make a disclosure under the provisions of this section shall first report to the individual or individuals designated by the hospital, ambulatory surgical center, pathology lab, medical research entity, or disposal facility under subsection 1 of this section.

4. If the compliance officer, compliance committee, or management official discovers credible evidence of misconduct from any source and, after a reasonable inquiry, has reason to believe that the misconduct may violate criminal, civil, or administrative law, the hospital, ambulatory surgical center, pathology lab, medical research entity, or disposal facility shall report the existence of misconduct to the appropriate governmental authority within a reasonable period, but not more than seven days after determining that there is credible evidence of a violation.

5. Reports made to the department shall be subject to the provisions of section 197.477; provided that, the restrictions of section 197.477 shall not be construed to limit the employee's ability to subpoena from the original source the information reported to the department under this section.

6. Each written policy shall allow employees making a report who wish to remain anonymous to do so and shall include safeguards to protect the confidentiality of the employee making the report, the confidentiality of patients, and the integrity of data, information, and medical records.

7. Each hospital, ambulatory surgical center, pathology lab, medical research entity, and disposal facility shall, within forty-eight hours of the receipt of a report, notify the employee that his or her report has been received and is being reviewed unless the employee wishes to remain anonymous.

8. Beginning December 1, 2017, each hospital, ambulatory surgical center, pathology lab, medical research entity, and disposal facility involved in handling fetal remains from an elective abortion shall post a notice at their place of employment in a sufficient number of places on the premises to assure that such notice will reasonably be seen by all employees. A hospital, ambulatory surgical center, pathology lab, medical research entity, or disposal facility involved in handling fetal remains from an elective abortion for whom services are performed by individuals who may not reasonably be expected to see a posted notice shall notify each such employee in writing of the contents of such notice. The notice shall include all information provided in this section.

194.375. 1. Sections 194.375 to 194.390 shall be known and may be cited as the "Disposition of Fetal Remains Act".

2. As used in sections 194.375 to 194.390, the following terms mean:

(1) "Final disposition", the burial, cremation, or other disposition of the remains of a human fetus following a spontaneous fetal demise occurring after a gestation period of less than twenty completed weeks;

(2) "Remains of a human fetus", the [fetal] remains [~~or fetal products of conception of a mother after a miscarriage, regardless of the gestational age or whether the remains have been obtained by spontaneous or accidental means~~] of the dead offspring of a human being that has

1 reached a stage of development so that there are cartilaginous structures or fetal or skeletal parts
2 after an abortion or miscarriage, whether the remains have been obtained by induced, spontaneous,
3 or accidental means.

4 197.230. 1. The department of health and senior services shall make, or cause to be made,
5 such inspections and investigations as it deems necessary. The department may delegate its powers
6 and duties to investigate and inspect ambulatory surgical centers to an official of a political
7 subdivision having a population of at least four hundred fifty thousand if such political subdivision
8 is deemed qualified by the department to inspect and investigate ambulatory surgical centers. The
9 official so designated shall submit a written report of his or her findings to the department and the
10 department may accept the recommendations of such official if it determines that the facility
11 inspected meets minimum standards established pursuant to sections 197.200 to 197.240.

12 2. In the case of any ambulatory surgical center operated for the purpose of performing or
13 inducing an abortion, the department shall make or cause to be made an unannounced on-site
14 inspection and investigation at least annually. Such on-site inspection and investigation shall
15 include, but not be limited to, the following areas:

16 (1) Compliance with all statutory and regulatory requirements for an ambulatory surgical
17 center, including requirements that the facility maintain adequate staffing and equipment to respond
18 to medical emergencies;

19 (2) Compliance with the requirement in section 188.047 that all fetal organs or tissue
20 removed at the time of abortion be submitted to a board certified or eligible pathologist and that the
21 resultant tissue report be made a part of the patient's permanent record;

22 (3) Review of patient records to ensure that no consent forms or other documentation
23 authorizes any utilization of fetal organs or tissue in violation of sections 188.036 and 194.275;

24 (4) Compliance with sections 188.205, 188.210, and 188.215 prohibiting the use of public
25 funds, facilities, and employees to perform or to assist a prohibited abortion or to encourage or to
26 counsel a woman to have a prohibited abortion; and

27 (5) Compliance with the requirement in section 197.215 that continuous physician services
28 or registered professional nursing services be provided whenever a patient is in the facility.

29 3. Inspection, investigation, and quality assurance reports shall be made available to the
30 public. Any portion of a report may be redacted when made publicly available if such portion
31 would disclose information that is not subject to disclosure under the law."; and
32

33 Further amend said bill by amending the title, enacting clause, and intersectional references
34 accordingly.