

HB 544 -- ABORTION

SPONSOR: Quade

PREGNANCY RESOURCE CENTERS (Section 135.630)

This bill changes Section 135.630, RSMo, relating to tax credits for contributions to pregnancy resource centers, back to the version that existed prior to the enactment of HB 126 in 2019, including changing the current definition of "pregnancy resource center" and capping the tax credit for one taxpayer at 50% of the taxpayer's contribution. The bill also reinstates the sunset provision for the tax credit program to sunset on December 31, 2024.

SANCTUARY OF LIFE (Section 188.010)

The bill changes the language in Section 188.010 to reflect the version that existed prior to the enactment of HB 126 in 2019, including removing a reference to Almighty God.

INFORMED CONSENT (Section 188.027)

Prior to performing an abortion, a physician must present to his or her patient printed materials from the Department of Health and Senior Services. This bill modifies the requirements of the printed materials regarding the pain capability of an unborn child. The bill changes the requirements back to the requirements that existed prior to the enactment of HB 126 in 2019.

The bill also prohibits abortions to be performed or induced on an unborn child of 22 weeks gestational age or older without a woman having the opportunity to choose to have an anesthetic or analgesic administered to the unborn child.

PARENTAL NOTIFICATION IN CASES OF ABORTION UPON A MINOR (Section 188.028)

Currently, Missouri law states that an abortion on a minor shall not be knowingly performed until the attending physician has secured the written informed consent of the minor and one parent or guardian, and the consenting parent or guardian has notified any other custodial parent, with specified exceptions. This bill removes the provision that the consenting parent or guardian notify any other parent or guardian in writing before giving consent, except under certain circumstances.

ABORTION PROVIDER INSURANCE (Section 188.043)

This bill changes the medical malpractice insurance an abortion provider is required to have from \$1 million per occurrence and \$3 million in the annual aggregate to proof of medical malpractice insurance coverage of \$500 thousand, which was the amount required prior to the enactment of HB 126 in 2019.

#### INDIVIDUAL ABORTION REPORT (Sections 188.052)

Currently, the attending physician must complete an abortion report for each abortion performed. This bill removes the requirements that the physician include a certification that he or she does not have any knowledge that the woman sought the abortion solely because of a prenatal diagnosis indicating Down Syndrome or the potential of Down Syndrome in the unborn child, as well as a certification that the physician does not have any knowledge that the woman sought the abortion solely because of the sex or race of the unborn child. The bill clarifies that reports are to be submitted to the Department of Health and Senior Services.

REPEALED LANGUAGE (Sections 188.017, 188.018, 188.026, 188.033, 188.038, 188.044, 188.056, 188.057, 188.058, and 188.375)

The bill also repeals provisions enacted by HB 126 in 2019.

The repealed language includes the "Right to Life of the Unborn Child Act" requiring that an abortion performed or induced upon a woman, unless in cases of medical emergencies, shall be a class B felony and shall subject the person performing or inducing the abortion to suspension or revocation of his or her professional license. The bill also repeals the severability clause and "Missouri Stands for the Unborn Act" (Sections 188.017, 188.018, 188.026).

The bill also repeals language requiring in-state abortion facilities or family planning agencies to provide specified printed materials when providing a woman an out-of-state abortion referral (Section 188.033).

The bill repeals the prohibition on any person performing an abortion on a woman if the person knows that the woman is seeking the abortion because of Down Syndrome or because of the sex or race of the unborn child (Section 188.038).

The bill repeals requirements that a person performing or inducing an abortion carry tail insurance of at least \$1 million per occurrence and \$3 million in the annual aggregate for personal injury to or death of a child who survives an abortion induced by a drug or chemical that carries a Food and Drug Administration or other specified warning that the chemical may cause birth defects,

disability, or other injury in a child who survives the abortion (Section 188.044).

The bill also repeals the "Late-Term Pain-Capable Unborn Child Protection Act," which prohibited any abortion, except in the case of a medical emergency, from being performed or induced on a woman carrying a late-term pain-capable unborn child, defined as an unborn child at 20 weeks gestational age or later (Section 188.375)

This bill is the same as HB 11 (2022, Special Session).