1	HOUSE OF REPRESENTATIVES - FLOOR VERSION
2	STATE OF OKLAHOMA
3	1st Session of the 55th Legislature (2015)
4	HOUSE BILL 1409 By: Billy and Ritze
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7	AS INTRODUCED
8	An Act relating to public health and safety; amending
9	63 O.S. 2011, Sections 1-738.2, 1-738.3, 1-738.3a, 1- 738.8, 1-738.13, 1-738m, as amended by Section 2,
10	Chapter 303, O.S.L. 2013, Section 2, Chapter 175, O.S.L. 2014 and Section 6, Chapter 175, O.S.L. 2014
11	(63 O.S. Supp. 2014, Sections 1-738m, 1-746.2 and 1- 746.6), which relate to abortion; increasing time
12	period of voluntary and informed consent prior to abortion; requiring certain facilities to publish
13	link on website to State Board of Medical Licensure and Supervision's website; requiring certain
14	information on link; updating references; and providing an effective date.
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17	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
18	SECTION 1. AMENDATORY 63 O.S. 2011, Section 1-738.2, is
19	amended to read as follows:
20	Section 1-738.2 A. No abortion shall be performed in this
21	state except with the voluntary and informed consent of the woman
22	upon whom the abortion is to be performed.
23	B. Except in the case of a medical emergency, consent to an
24	abortion is voluntary and informed if and only if:
	HB1409 HFLR UNDERLINED language denotes Amendments to present Statutes.

BOLD FACE CAPITALIZED language denotes Committee Amendments. Strike thru language denotes deletion from present Statutes.

- a. not less than twenty-four (24) seventy-two (72) hours
 prior to the performance of the abortion, the woman is
 told the following, by telephone or in person, by the
 physician who is to perform the abortion, or by a
 referring physician, or by an agent of either
 physician:
 - (1) the name of the physician who will perform the abortion,
 - (2) the medical risks associated with the particular abortion procedure to be employed,
 - (3) the probable gestational age of the unborn child at the time the abortion is to be performed,
 - (4) the medical risks associated with carrying her child to term, and
 - (5) that ultrasound imaging and heart tone monitoring that enable the pregnant woman to view her unborn child or listen to the heartbeat of the unborn child are available to the pregnant woman. The physician or agent of the physician shall inform the pregnant woman that the web site website and printed materials described in Section 1-738.3 of this title, contain phone numbers and addresses for facilities that offer such services at no cost,

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- b. the information required by this paragraph may be
 provided by telephone without conducting a physical
 examination or tests of the woman. If the information
 is supplied by telephone, the information shall be
 based on facts supplied to the physician,
- c. the information required by this paragraph shall not
 be provided by a tape recording, but shall be provided
 during a consultation in which the physician is able
 to ask questions of the woman and the woman is able to
 ask questions of the physician,
- 11d.if a physical examination, tests, or other new12information subsequently indicates, in the medical13judgment of the physician, the need for a revision of14the information previously supplied to the woman, that15revised information may be communicated to the woman16at any time prior to the performance of the abortion,17and
- e. nothing in subparagraph a of this paragraph may be
 construed to preclude provision of the required
 information in a language understood by the woman
 through a translator;
- 22 2. Not less than twenty-four (24) seventy-two (72) hours prior
 23 to the abortion, the woman is informed, by telephone or in person,
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1 by the physician who is to perform the abortion, by a referring physician, or by an agent of either physician: 2 3 that medical assistance benefits may be available for a. prenatal care, childbirth, and neonatal care, 4 5 b. that the father is liable to assist in the support of her child, even in instances in which the father has 6 7 offered to pay for the abortion, that: 8 с. 9 (1) she has the option to review the printed materials described in Section 1-738.3 of this 10 11 title, 12 (2) those materials have been provided by the State 13 Board of Medical Licensure and Supervision, and 14 they describe the unborn child and list agencies (3) 15 that offer alternatives to abortion, and 16 (1) if the woman chooses to exercise her option to d. 17 view the materials in a printed form, they shall 18 be mailed to her, by a method chosen by the 19 woman, or 20 if the woman chooses to exercise her option to (2) 21 view the materials via the Internet, the woman 22 shall be informed at least twenty-four (24) 23 seventy-two (72) hours before the abortion of the

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1 2 specific address of the Internet $\frac{\text{website}}{\text{website}}$ where the material can be accessed.

The information required by this paragraph may be provided by a tape recording if provision is made to record or otherwise register specifically whether the woman does or does not choose to review the printed materials;

7 3. The woman certifies in writing, prior to the abortion, that 8 she has been told the information described in subparagraph a of 9 paragraph 1 of this subsection and in subparagraphs a, b and c of 10 paragraph 2 of this subsection and that she has been informed of her 11 option to review or reject the printed information described in 12 Section 1-738.3 of this title; and

4. Prior to the abortion, the physician who is to perform the
abortion or the agent of the physician receives a copy of the
written certification prescribed by paragraph 3 of this subsection.

16 C. The State Board of Medical Licensure and Supervision and the 17 State Board of Osteopathic Examiners shall promulgate rules to 18 ensure that physicians who perform abortions and referring 19 physicians or agents of either physician comply with all the 20 requirements of this section.

D. Before the abortion procedure is performed, the physician shall confirm with the patient that she has received information regarding:

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The medical risks associated with the particular abortion
 procedure to be employed;

3 2. The probable gestational age of the unborn child at the time4 the abortion is to be performed; and

5 3. The medical risks associated with carrying the unborn child6 to term.

7 SECTION 2. AMENDATORY 63 O.S. 2011, Section 1-738.3, is
8 amended to read as follows:

9 Section 1-738.3 A. Within one hundred twenty (120) days of the 10 effective date of this act, the State Board of Medical Licensure and 11 Supervision shall cause to be published, in English and in Spanish, 12 and shall update on an annual basis, the following printed materials 13 in such a way as to ensure that the information is easily 14 comprehensible:

a. geographically indexed materials designed to inform
 the woman of public and private agencies, including
 adoption agencies and services that are available to
 assist a woman through pregnancy, upon childbirth, and
 while the child is dependent, including:

(1) a comprehensive list of the agencies available,

(2) a description of the services they offer,

including which agencies offer, at no cost to the pregnant woman, ultrasound imaging that enables a pregnant woman to view the unborn child or heart

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tone monitoring that enables the pregnant woman to listen to the heartbeat of the unborn child, and

- 4 a description of the manner, including telephone (3) 5 numbers, in which they might be contacted, or at the option of the Board a toll-free, twenty-four-6 b. 7 hour-a-day telephone number which may be called to obtain, in a mechanical, automated, or auditory 8 9 format, a list and description of agencies in the 10 locality of the caller and of the services they offer; 11 and
- 2. a. materials designed to inform the woman of the probable
 anatomical and physiological characteristics of the
 unborn child at two-week gestational increments from
 the time when a woman can be known to be pregnant to
 full term, including:
 - (1) any relevant information on the possibility of the survival of the unborn child, and
- 19 (2) pictures or drawings representing the development
 20 of unborn children at two-week gestational
 21 increments, provided that the pictures or
 22 drawings shall describe the dimensions of the
 23 unborn child and shall be realistic and
 24 appropriate for the stage of pregnancy depicted,

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1	b. the materials shall be objective, nonjudgmental, and
2	designed to convey only accurate scientific
3	information about the unborn child at the various
4	gestational ages, and
5	c. the material shall also contain objective information
6	describing:
7	(1) the methods of abortion procedures commonly
8	employed,
9	(2) the medical risks commonly associated with each
10	of those procedures,
11	(3) the possible detrimental psychological effects of
12	abortion and of carrying a child to term, and
13	(4) the medical risks commonly associated with
14	carrying a child to term , and
15	d. the material shall contain the statement "Abortion
16	shall terminate the life of a whole, separate, unique,
17	living human being."
18	B. 1. The materials referred to in subsection A of this
19	section shall be printed in a typeface large enough to be clearly
20	legible.
21	2. The materials required under this section shall be available
22	at no cost from the State Board of Medical Licensure and Supervision
23	and shall be distributed upon request in appropriate numbers to any
24	person, facility, or hospital.
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C. 1. The Board shall provide on its stable Internet web site
 website the information described under subsection A of this
 section.

4 2. The web site website provided for in this subsection shall
5 be maintained at a minimum resolution of 72 PPI.

6 D. Any facility performing abortions that has a website shall 7 publish an easily identifiable link on the homepage of such website that directly links to the Board's website that provides informed 8 9 consent materials under the Woman's Right-to-Know Act. Such link 10 shall read: "The State Board of Medical Licensure and Supervision 11 maintains a website containing information about the development of 12 the unborn child, as well as video of ultrasound images of the 13 unborn child at various stages of development. The Board's website 14 can be reached by clicking here." 15 63 O.S. 2011, Section 1-738.3a, is SECTION 3. AMENDATORY

16 | amended to read as follows:

Section 1-738.3a A. By February 1, 2008, the State Department of Health shall prepare and make available on its stable Internet web site <u>website</u> the form described in subsection B of this section. A copy of this act shall be posted on the <u>web-site</u> <u>website</u>. Physicians performing abortions shall complete and electronically submit the required forms to the Department no later than April 1 for the previous calendar year. Nothing in the report shall contain

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1 the name, address, or any other identifying information of any 2 patient.

B. The form for physicians shall contain a listing for thefollowing information:

5 1. The number of females to whom the physician, or an agent of the physician, provided the information described in Section 1-738.2 6 7 of Title 63 of the Oklahoma Statutes; of that number, the number provided the information by telephone and the number provided the 8 9 information in person; and of each of those numbers, the number 10 provided the information in the capacity of a referring physician 11 and the number provided the information in the capacity of a 12 physician who is to perform the abortion; and of each of those 13 numbers, the number provided the information by the physician and 14 the number provided the information by an agent of the physician;

2. The number of females who availed themselves of the opportunity to obtain a copy of the printed information described in Section 1-738.3 of Title 63 of the Oklahoma Statutes other than on the <u>web site</u> <u>website</u>, and the number who did not; and of each of those numbers, the number who, to the best of the information and belief of the reporting physician, went on to obtain the abortion; and

3. The number of abortions performed by the physician in which information otherwise required to be provided at least twenty-four (24) <u>seventy-two (72)</u> hours before the abortion was not so provided HB1409 HFLR

1 because an immediate abortion was necessary to avert the death of the female, and the number of abortions in which the information was 2 3 not so provided because a delay would cause substantial and 4 irreversible impairment of a major bodily function.

5 С. The State Department of Health shall ensure that the reporting forms described in subsection B of this section are 6 7 posted, on its stable Internet web site website, within one hundred twenty (120) days after the effective date of this act. The State 8 9 Department of Health shall notify the following of the requirements of this act: 10

11 1. By March 1, 2008, all physicians licensed to practice in 12 this state;

13 2. Each physician who subsequently becomes newly licensed to 14 practice in this state, at the same time as official notification to 15 that physician that the physician is so licensed; and

16 3. By December 1 of each year, other than the calendar year in 17 which forms are first made available to all physicians licensed to 18 practice in this state.

19 D. By February 28 of each year following a calendar year in any 20 part of which this section was in effect, each physician who 21 provided, or whose agent provided, information to one or more 22 females in accordance with Section 1-738.2 of Title 63 of the 23 Oklahoma Statutes during the previous calendar year shall 24 electronically submit to the State Department of Health the form HB1409 HFLR

described in subsection B of this section, with the requested data
 entered accurately and completely.

Reports that are not electronically submitted by the end of 3 Ε. 4 a grace period of thirty (30) days following the due date shall be 5 subject to a late fee of Five Hundred Dollars (\$500.00) for each additional thirty-day period or portion of a thirty-day period the 6 7 reports are overdue. Any physician required to report in accordance with this section who has not completed and electronically submitted 8 9 a report, or has electronically submitted only an incomplete report, 10 more than one (1) year following the due date, may, in an action 11 brought by the State Department of Health, be directed by a court of 12 competent jurisdiction to electronically submit a complete report 13 within a period stated by court order or be subject to sanctions for 14 civil contempt.

15 F. By June 30 of each year, the State Department of Health shall prepare and make available on its stable Internet web site 16 17 website a public report providing statistics for the previous 18 calendar year compiled from all items listed in subsection B of this 19 section. Each report shall also provide statistics for all previous 20 calendar years, adjusted to reflect any additional information from 21 late or corrected reports. The State Department of Health shall 22 take care to ensure that none of the information included in the 23 public reports could reasonably lead to the identification of any

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1 individual providing or provided information in accordance with subsection B of this section. 2

3 G. The State Department of Health may promulgate rules in 4 accordance with the Administrative Procedures Act to alter the dates 5 established by this section or consolidate the form or report described in this section with other forms or reports to achieve 6 administrative convenience, fiscal savings or to reduce the burden 7 of reporting requirements, as long as reporting forms are made 8 9 available, on its stable Internet web site to all licensed 10 physicians in the state, and the report described in this section is issued at least once every year. 11

63 O.S. 2011, Section 1-738.8, is 12 SECTION 4. AMENDATORY 13 amended to read as follows

14 Section 1-738.8 A. Except in the case of a medical emergency, 15 at least twenty-four (24) seventy-two (72) hours prior to an 16 abortion being performed on an unborn child whose probable 17 gestational age is twenty (20) weeks or more, the physician 18 performing the abortion or the agent of the physician shall inform 19 the pregnant female, by telephone or in person, of the right to 20 review the printed materials described in Section 10 1-738.10 of 21 this act title, that these materials are available on a state-22 sponsored web site website, and the web address of that web site 23 website. The physician or the agent of the physician shall orally 24 inform the female that the materials have been provided by the State HB1409 HFLR Page 13

1 of Oklahoma and that the materials contain information on pain and the unborn child. If the female chooses to view the materials other 2 3 than on the web site website, the materials shall either be given to 4 the female at least $\frac{1}{1}$ twenty-four (24) seventy-two (72) hours before 5 the abortion, or mailed to received by the female at least seventy-6 two (72) hours before the abortion by certified mail, restricted delivery to the addressee. The information required by this 7 subsection may be provided by a tape recording if provision is made 8 9 to record or otherwise register specifically whether the female does 10 or does not choose to receive the printed materials given or mailed.

11 Β. The female shall certify in writing, prior to the abortion, that the information described in subsection A of this section has 12 13 been furnished to the female and that the female has been informed 14 of the opportunity to review the printed materials described in 15 Section 10 1-738.10 of this act title. Prior to the performance of 16 the abortion, the physician who is to perform the abortion or the 17 agent of the physician shall obtain a copy of the written 18 certification and retain the copy on file with the medical record of 19 the female for at least three (3) years following the date of 20 receipt.

21 SECTION 5. 63 O.S. 2011, Section 1-738.13, is AMENDATORY 22 amended to read as follows:

23 Section 1-738.13 A. Within ninety (90) days after the Unborn 24 Child Pain Awareness/Prevention Act becomes law, the State HB1409 HFLR

> UNDERLINED language denotes Amendments to present Statutes. BOLD FACE CAPITALIZED language denotes Committee Amendments. Strike thru language denotes deletion from present Statutes.

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Department of Health shall prepare a reporting form for physicians
 containing a reprint of the Unborn Child Pain Awareness/Prevention
 Act and listing:

1. The number of females to whom the physician or an agent of the physician provided the information described in subsection A of Section & <u>1-738.8</u> of this act <u>title</u>; of that number, the number provided by telephone and the number provided in person; and of each of those numbers, the number provided in the capacity of a referring physician and the number provided in the capacity of a physician who is to perform the abortion or agent of such a physician;

11 2. The number of females who availed themselves of the 12 opportunity to obtain a copy of the printed information described in 13 Section 10 <u>1-738.10</u> of this act <u>title</u> other than on the web site 14 <u>website</u>, and the number who did not; and of each of those numbers, 15 the number who, to the best of the information and belief of the 16 reporting physician, went on to obtain the abortion; and

17 3. The number of abortions performed by the physician in which 18 information otherwise required to be provided at least twenty-four 19 (24) seventy-two (72) hours before the abortion was not so provided 20 because an immediate abortion was necessary to avert the death of 21 the female, and the number of abortions in which such information 22 was not so provided because a delay would create serious risk of 23 substantial and irreversible impairment of a major bodily function.

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1 The Department shall ensure that copies of the reporting в. 2 forms described in subsection A of this section are provided:

3 Within one hundred twenty days (120) days after the Unborn 1. Child Pain Awareness/Prevention Act becomes law, to all physicians 4 5 licensed to practice in this state;

2. To each physician who subsequently becomes newly licensed to 6 7 practice in this state, at the same time as official notification to that physician that the physician is so licensed; and 8

9 3. By December 1 of each year, other than the calendar year in 10 which forms are distributed in accordance with paragraph 1 of this 11 subsection, to all physicians licensed to practice in this state.

12 C. By February 28 of each year following a calendar year in any 13 part of which the Unborn Child Pain Awareness/Prevention Act was in 14 effect, each physician who provided, or whose agent provided, 15 information to one or more females in accordance with Section 8 of 16 this act during the previous calendar year shall submit to the 17 Department a copy of the form described in subsection A of this 18 section, with the requested data entered accurately and completely.

19 D. Reports that are not submitted by the end of a grace period 20 of thirty (30) days following the due date shall be subject to a 21 late fee of Five Hundred Dollars (\$500.00) for each additional 22 thirty-day period or portion of a thirty-day period the reports are 23 overdue. Any physician required to report in accordance with this 24 section who has not submitted a report, or has submitted only an HB1409 HFLR Page 16

1 incomplete report, more than one (1) year following the due date 2 may, in an action brought by the State Board of Medical Licensure 3 and Supervision, be directed by a court of competent jurisdiction to submit a complete report within a period stated by court order or be 4 5 subject to sanctions for civil contempt.

By June 30 of each year, the Department shall issue a public 6 Ε. 7 report providing statistics for the previous calendar year compiled from all of the reports covering that year submitted in accordance 8 9 with this section for each of the items listed in subsection A of 10 this section. Each such report shall also provide the statistics for all previous calendar years, adjusted to reflect any additional 11 12 information from late or corrected reports. The Department shall 13 take care to ensure that none of the information included in the 14 public reports could reasonably lead to the identification of any 15 individual providing or provided information in accordance with 16 subsection A or B of Section 8 1-738.8 of this act title.

17 F. The Department, by rule promulgated in accordance with the 18 Administrative Procedures Act, may alter the dates established by 19 paragraph 3 of subsection B, subsection C, or subsection E of this 20 section or consolidate the forms or reports described in this 21 section with other forms or reports to achieve administrative 22 convenience or fiscal savings or to reduce the burden of reporting 23 requirements, so long as reporting forms are sent to all licensed 24 physicians in the state at least once every year and the report HB1409 HFLR

1 described in subsection E of this section is issued at least once 2 every year.

3 SECTION 6. AMENDATORY 63 O.S. 2011, Section 1-738m, as 4 amended by Section 2, Chapter 303, O.S.L. 2013 (63 O.S. Supp. 2014, 5 Section 1-738m), is amended to read as follows:

Section 1-738m. A. Beginning in 2013, by June 1 of each year,
the Department shall issue, on its stable Internet website, a public
Annual Abortion Report providing statistics for the previous
calendar year compiled from all of the reports covering that year
submitted in accordance with the Statistical Abortion Reporting Act.

B. The Department's public report shall also provide statistics for all previous calendar years for which abortion-reporting requirements have been in effect, adjusted to reflect any additional information from late or corrected reports.

15 C. The Annual Abortion Report shall include, but not be limited16 to, the following information:

The number of induced abortions performed in the previous
 calendar year, broken down by month and county in which the abortion
 was performed;

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2. The number of abortions classified by:

- a. the state or foreign country of residence of the
 mother,
- b. the age, marital status, and race of the mother, and
 c. the number of years of education of the mother;

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1 3. The number of abortions classified by: 2 the number of previous pregnancies of the mother, a. 3 previous live births to the mother, b. previous miscarriages, and 4 с. 5 d. previous induced abortions; The number of abortions by week of gestational age; 6 4. 7 5. The number of abortions performed by each reported method; 6. The number of abortions resulting in an infant born alive; 8 9 of these, the number of cases in which life-sustaining measures were 10 taken; and a statistical summary of the length of survival of such infants; 11 7. The number of cases in which anesthesia was administered to 12 13 the mother and the number of each type of anesthesia; 14 The number of cases in which anesthesia was administered to 8. 15 the unborn child, and the number of each type of anesthesia and of 16 each method of administration; 17 9. The number of each reported method of fetal disposal; 18 The reasons reported for the abortions, and the number of 10. 19 times each reported reason was cited; 20 The number of abortions paid for by: 11. 21 private insurance, a. 22 b. public health plan, 23 Medicaid, с. 24 d. private pay, or HB1409 HFLR Page 19

1 e. other; 2 The number of abortions in which medical health insurance 12. 3 coverage was under: 4 a fee-for-service insurance company, a. 5 b. a managed care company, or 6 с. other; 7 13. A statistical summary of the fees collected; Specialty area of medicine of the physician; 8 14. 9 15. The number of abortions in which ultrasound equipment was 10 used before, during, or after the abortion, and the number of times vaginal ultrasound, abdominal ultrasound, or both were used in each 11 of the three circumstances; 12 13 16. The number of abortions before which an ultrasound was 14 performed by: 15 the physician performing the abortion, a. 16 a physician other than the physician performing the b. 17 abortion, or 18 с. other; 19 The number of abortions resulting in reported 17. 20 complications, and of those, how many were reported by the physician 21 who performed the abortion, and how many were reported by another 22 physician, the types of reported complications, and the number of 23 each type based on data which shall be compiled and transmitted to 24 the State Department of Health by the State Board of Medical HB1409 HFLR

Licensure and Supervision and the State Board of Osteopathic
 Examiners;

3 18. The number of abortions resulting in the reported death of 4 the mother;

5 19. The number of females to whom the physician provided the 6 information in subparagraph a of paragraph 1 of subsection B of 7 Section 1-738.2 of this title; of that number, the number provided 8 by telephone and the number provided in person; and of each of those 9 numbers, the number provided in the capacity of a referring 10 physician and the number provided in the capacity of a physician who 11 is to perform the abortion;

12 20. The number of females to whom physicians or agents of 13 physicians provided the information in paragraph 2 of subsection B 14 of Section 1-738.2 of this title; of that number, the number 15 provided by telephone and the number provided in person; of each of 16 those numbers, the number provided in the capacity of a referring physician and the number provided in the capacity of a physician who 17 18 is to perform the abortion; and of each of those numbers, the number 19 provided by the physician and the number provided by an agent of the 20 physician;

21 21. The number of females who availed themselves of the 22 opportunity to have a copy of the printed information described in 23 Section 1-738.3 of this title mailed to them; and of that number,

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1 the number who, based on the submitted reports, did and did not 2 obtain an abortion;

3 22. The number of abortions performed by the physician in which 4 information otherwise required to be provided at least twenty-four 5 (24) seventy-two (72) hours before the abortion was not so provided because an immediate abortion was necessary to avert the death of 6 7 the female, and the number of abortions in which such information was not so provided because a delay would create serious risk of 8 9 substantial and irreversible impairment of a major bodily function; 10 23. The number of females to whom physicians or their agents 11 provided the information described in subsection A of Section 1-738.8 of this title; of that number: 12

a. the number provided by telephone and the number
provided in person; and of each of those numbers, the
number provided in the capacity of a referring
physician and the number provided in the capacity of a
physician who is to perform the abortion, or by the
agent of such physician, and

b. the number of females who availed themselves of the
opportunity to be given or mailed the materials
described in Section 1-738.10 of this title, and the
number who did not; and of each of those numbers, the
number who, to the best of the information and belief

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of the reporting physician, went on to obtain the abortion;

3 24. The number of females to whom the information described in 4 subsection A of Section 1-738.8 of this title would have had to be 5 provided but for a medical emergency determination; of that number, 6 the number for whom an immediate abortion was necessary to avert the 7 death of the female, and the number for whom a delay would have 8 created serious risk of substantial and irreversible impairment of a 9 major bodily function;

10 25. The number of abortions performed within the scope of 11 employment of Oklahoma state employees and employees of an agency or 12 political subdivision of the state, the number of abortions 13 performed with the use of public institutions, facilities, 14 equipment, or other physical assets owned, leased, or controlled by 15 this state, its agencies, or political subdivisions, and for each 16 category:

a. the number of abortions reported as necessary to save
the life of the mother, the life-endangering
conditions identified, and the number of each such
condition reported,

b. the number of abortions reported from pregnancies
resulting from forcible rape, the number of such rapes
reported to law enforcement authorities, general
categories of law enforcement authorities to whom

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1 reports were made and the number made to each 2 category, and a statistical summary of the length of 3 time between the dates of reporting to law enforcement 4 authorities and the dates of the abortions, and 5 с. the number of abortions reported from pregnancies resulting from incest committed against a minor, the 6 7 number of perpetrators of incest in such cases reported to law enforcement authorities, general 8 9 categories of law enforcement authorities to whom 10 reports were made and the number made to each 11 category, and a statistical summary of the length of 12 time between the dates of reporting to law enforcement 13 authorities and the dates of the abortions;

14 26. The number of females to a parent of whom the physician 15 provided notice as required by Section 1-740.2 of this title; of 16 that number, the number provided personally as described in that 17 section, and the number provided by mail as described in that 18 section, and of each of those numbers, the number of females who, to 19 the best of the information and belief of the reporting physician, 20 went on to obtain the abortion;

21 27. The number of females upon whom the physician performed an 22 abortion without the notice to or consent of the parent of the minor 23 required by Section 1-740.2 of this title; of that number, the 24 number who were emancipated minors and the number who suffered from HB1409 HFLR Page 24

1 a medical emergency, and of the latter, the number of cases in which 2 a parent was notified subsequently and the number of cases in which 3 a judicial waiver was obtained. In the case of medical emergencies 4 in which a parent was informed subsequently, a statistical summary 5 of the period of time elapsed before notification;

6 28. The number of abortions performed after receiving judicial
7 authorization to do so without parental notice and consent;

8 29. The number of abortions performed on minors after judicial 9 authorizations were granted because of a finding that the minor girl 10 was mature and capable of giving informed consent;

30. The number of abortions performed on minors after judicial authorizations were granted because of a finding that the performance of the abortion without parental notification and consent was in the best interest of the minor;

15 31. The number of abortions performed after which the remains 16 of the fetus after the abortion were examined to ensure that all 17 such remains were evacuated from the mother's body;

18 32. The number of male children aborted and female children 19 aborted, as determined from the examination of fetal remains after 20 abortion;

21 33. The number of male children aborted and female children 22 aborted, as determined by any method other than those reported in 23 paragraph 32 of this subsection;

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1 34. The number of instances in which the mother was informed 2 prior to the abortion that the child to be aborted was a female; 3 35. The number of abortions performed without surgery but rather as the result of the administration of chemicals;

5 36. The number of abortions performed as reported in paragraph 35 of this subsection, in which the physician was present in the 6 7 same room as the woman to whom the chemicals were administered at the time any such chemicals were first administered; 8

9 37. The number of abortions performed for each hospital at 10 which the abortionist had hospital privileges at the time of the abortion; 11

12 38. The number of abortions performed at which ultrasound 13 equipment was used before the abortion;

14 39. The number of abortions reported in paragraph 38 of this 15 subsection, during which the mother was under the effect of 16 anesthesia at the time of the ultrasound;

17 40. The number of abortions performed at which ultrasound 18 equipment was used during the abortion;

19 The number of abortions reported in paragraph 40 of this 41. 20 subsection, during which the mother was under the effect of 21 anesthesia at the time of the ultrasound;

22 The number of abortions performed at which ultrasound 42. 23 equipment was used after the abortion;

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43. The number of abortions reported in paragraph 42 of this
 subsection, during which the mother was under the effect of
 anesthesia at the time of the ultrasound;

4 44. The mean gestational age of the fetus at the time of the5 abortion, as determined by ultrasounds reported;

45. The number of abortions for which no determination of
probable postfertilization age was made as required by Section 1745.5 of this title; and

9 46. The number of abortions in which the pregnant woman was 10 told that it may be possible to make the embryonic or fetal 11 heartbeat of the unborn child audible for the pregnant woman to 12 hear; the number of abortions in which the pregnant woman was asked 13 if she would like to hear the heartbeat; and the number of abortions 14 in which the embryonic or fetal heartbeat of the unborn child was 15 made audible for the pregnant woman to hear, using a Doppler fetal 16 heart rate monitor.

D. Beginning in 2013, by June 1 of each year, the State Department of Health shall post, on its stable Internet website, a public Annual Judicial Bypass of Abortion Parental Consent Summary Report providing statistics which shall be compiled and supplied to the Department by the Administrative Office of the Courts giving the total number of petitions or motions filed under Section 1-740.3 of this title and of that number, the number in which:

24 1. The court appointed a guardian ad litem;

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- 2. The court appointed counsel;

The judge issued an order authorizing an abortion without 2 3. 3 parental notification or consent, and of those: the number authorized due to a determination by the 4 a. 5 judge that the minor was mature and capable of giving 6 consent to the proposed abortion, and 7 b. the number authorized due to a determination by the judge that an abortion was in the best interest of the 8 9 minor; and 10 4. The judge denied such an order, and of this, the number of: 11 a. denials from which an appeal was filed, 12 b. the appeals that resulted in the denial being 13 affirmed, and 14 appeals that resulted in reversals of the denials. с. 15 Ε. Each Annual Judicial Bypass of Abortion Parental Consent 16 Summary Report shall also provide the statistics for all previous 17 calendar years for which the public statistical report was required 18 to be issued, adjusted to reflect any additional information from 19 late or corrected reports. 20 The Department's public reports shall not contain the name, F. 21 address, hometown, county of residence, or any other identifying 22 information of any individual female, and shall take care to ensure 23 that none of the information included in its public reports could 24 reasonably lead to the identification of any individual female about HB1409 HFLR Page 28

1 whom information is reported in accordance with the Statistical Abortion Reporting Act or of any physician providing information in 2 3 accordance with the Statistical Abortion Reporting Act. Nor shall 4 the information described in the preceding sentence be subject to 5 the Oklahoma Open Records Act.

SECTION 7. Section 2, Chapter 175, O.S.L. 6 AMENDATORY 2014 (63 O.S. Supp. 2014, Section 1-746.2), is amended to read as 7 follows: 8

9 Section 1-746.2 No abortion shall be performed or induced or 10 attempted to be performed or induced without the voluntary and 11 informed consent of the female upon whom the abortion is to be 12 performed or induced or attempted to be performed or induced. 13 Except in the case of a medical emergency, consent to an abortion is 14 voluntary and informed if and only if, at least twenty-four (24) 15 seventy-two (72) hours before the abortion:

16 1. In the case of a female seeking an abortion of her unborn 17 child diagnosed with a fetal anomaly incompatible with life, the 18 female is informed, by telephone or in person, by the physician who 19 is to perform the abortion or the physician's agent:

- 20 that perinatal hospice services are available, a. 21
- 22 that she has the right to review the printed materials с. 23 described in this section,
- 24

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b.

UNDERLINED language denotes Amendments to present Statutes. BOLD FACE CAPITALIZED language denotes Committee Amendments. Strike thru language denotes deletion from present Statutes.

this service is an alternative to abortion,

- d. that these materials are available on a state sponsored website, and
- 3

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e. what the website address is where she can access this information.

5 The information required by this paragraph may be provided by a tape 6 recording if provision is made to record or otherwise register 7 specifically whether the female does or does not choose to have the 8 printed materials given or mailed to her;

9 2. The physician or the physician's agent shall orally inform 10 the female that the materials have been provided by the State of Oklahoma and that they list the places which offer perinatal hospice 11 12 services both in her state and nationally. If the female chooses to 13 view the materials other than on the website, they shall either be 14 given to her at least twenty-four (24) seventy-two (72) hours before 15 the abortion, or mailed to received by her at least seventy-two (72) 16 hours before the abortion by certified mail, restricted delivery to 17 addressee, which means the postal employee can only deliver the mail 18 to the addressee;

19 3. The female certifies in writing, prior to the abortion, that 20 the information described in paragraphs 1 and 2 of this section has 21 been furnished her, and that she has been informed of her 22 opportunity to review the information referred to in paragraph 2 of 23 this section; and

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4. Prior to the performance of the abortion, the physician who
 is to perform the abortion or the physician's agent receives a copy
 of the written certification prescribed by paragraph 3 of this
 section. This certification shall be maintained in the female
 patient's file for not less than five (5) years.

6 SECTION 8. AMENDATORY Section 6, Chapter 175, O.S.L. 7 2013 (63 O.S. Supp. 2014, Section 1-746.6), is amended to read as 8 follows:

9 Section 1-746.6 A. Within ninety (90) days after this act is 10 enacted, the State Board of Medical Licensure and Supervision shall 11 prepare a reporting form for physicians containing a reprint of this 12 act and listing:

13 1. The number of females to whom the physician or an agent of 14 the physician provided the information described in paragraph 1 of 15 Section 2 of this act; of that number, the number provided by 16 telephone and the number provided in person; of each of those 17 numbers, the number provided in the capacity of a referring 18 physician and the number provided in the capacity of a physician who 19 is to perform the abortion; and of each of those numbers, the number 20 provided by the physician and the number provided by an agent of the 21 physician;

22 2. The number of females who availed themselves of the
 23 opportunity to obtain a copy of the printed information described in
 24 Section 3 of this act other than on the website, and the number who
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1 did not; and of each of those numbers, the number who, to the best 2 of the reporting physician's information and belief, went on to 3 obtain the abortion; and

3. The number of abortions performed by the physician in which information otherwise required to be provided at least twenty-four (24) seventy-two (72) hours before the abortion was not so provided because an immediate abortion was necessary to avert the female's death, and the number of abortions in which such information was not so provided because a delay would create serious risk of substantial and irreversible impairment of a major bodily function.

B. The Board shall ensure that copies of the reporting formsdescribed in subsection A of this section are provided:

Within one hundred twenty (120) days after this act is
 enacted, to all physicians licensed to practice in this state;

15 2. To each physician who subsequently becomes newly licensed to 16 practice in this state, at the same time as official notification to 17 that physician that the physician is so licensed; and

3. By December 1 of each year, other than the calendar year in
which forms are distributed in accordance with paragraph 1 of this
subsection, to all physicians licensed to practice in this state.

C. By February 28 of each year following a calendar year in any
 part of which this act was in effect, each physician who provided,
 or whose agent provided, information to one or more females in
 accordance with Section 2 of this act during the previous calendar
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year shall submit to the Board a copy of the form described in
 subsection A of this section, with the requested data entered
 accurately and completely.

Reports that are not submitted by the end of a grace period 4 D. 5 of thirty (30) days following the due date shall be subject to a late fee of Five Hundred Dollars (\$500.00) for each additional 6 7 thirty-day period or portion of a thirty-day period they are overdue. Any physician required to report in accordance with this 8 9 section who has not submitted a report, or has submitted only an 10 incomplete report, more than one (1) year following the due date, 11 may, in an action brought by the Board, be directed by a court of 12 competent jurisdiction to submit a complete report within a period 13 stated by court order or be subject to sanctions for civil contempt.

14 By June 30 of each year the State Board of Medical Licensure Ε. 15 and Supervision shall issue a public report providing statistics for 16 the previous calendar year compiled from all of the reports covering 17 that year submitted in accordance with this section for each of the 18 items listed in subsection A of this section. Each such report 19 shall also provide the statistics for all previous calendar years, 20 adjusted to reflect any additional information from late or 21 corrected reports. The Board shall take care to ensure that none of 22 the information included in the public reports could reasonably lead 23 to the identification of any individual provided information in 24 accordance with paragraph 1 of Section 2 of this act.

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2 paragraph 3 of subsection B or subsection C or E of this section 3 consolidate the forms or reports described in this section with	
4 other forms or reports to achieve administrative convenience or	s, so
5 fiscal savings or to reduce the burden of reporting requirement	
6 long as reporting forms are sent to all licensed physicians in	the
7 state at least once every year and the report described in	
8 subsection E of this section is issued at least once every year	•
9 SECTION 9. This act shall become effective November 1, 201	5.
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11 COMMITTEE REPORT BY: COMMITTEE ON PUBLIC HEALTH, dated 02/04/20 DO PASS, As Coauthored.	15 -
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