#### SECOND REGULAR SESSION

# SENATE BILL NO. 699

### 101ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR MOON.

3753S.02I ADRIANE D. CROUSE, Secretary

## AN ACT

To repeal sections 1.205, 170.015, 188.010, 188.015, 188.017, 188.018, 188.020, 188.021, 188.023, 188.025, 188.026, 188.027, 188.028, 188.030, 188.031, 188.033, 188.035, 188.036, 188.038, 188.039, 188.043, 188.044, 188.047, 188.052, 188.055, 188.056, 188.057, 188.058, 188.060, 188.065, 188.070, 188.075, 188.080, 188.100, 188.105, 188.110, 188.115, 188.120, 188.125, 188.160, 188.200, 188.205, 188.210, 188.215, 188.220, 188.230, 188.250, 188.325, 188.335, 188.375, 191.211, 191.320, 191.724, 191.831, 191.923, 191.975, 192.665, 192.667, 194.390, 196.1127, 197.150, 197.152, 197.158, 197.160, 197.162, 197.165, 197.200, 197.205, 197.215, 197.220, 197.225, 197.230, 197.235, 197.240, 197.285, 197.287, 197.289, 197.293, 197.295, 197.315, 208.655, 334.100, 334.245, 376.805, 376.1199, 491.060, 556.061, 562.031, 562.071, 563.026, 565.300, 574.200, 595.027, and 595.120, RSMo, and to enact in lieu thereof forty-six new sections relating to abortion, with penalty provisions and an emergency clause.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Sections 1.205, 170.015, 188.010, 188.015, Section A. 2 188.017, 188.018, 188.020, 188.021, 188.023, 188.025, 188.026, 3 188.027, 188.028, 188.030, 188.031, 188.033, 188.035, 188.036, 4 188.038, 188.039, 188.043, 188.044, 188.047, 188.052, 188.055, 188.056, 188.057, 188.058, 188.060, 188.065, 188.070, 188.075, 5 188.080, 188.100, 188.105, 188.110, 188.115, 188.120, 188.125, 6 188.160, 188.200, 188.205, 188.210, 188.215, 188.220, 188.230, 7 188.250, 188.325, 188.335, 188.375, 191.211, 191.320, 191.724, 8 9 191.831, 191.923, 191.975, 192.665, 192.667, 194.390, 196.1127,

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    197.150, 197.152, 197.158, 197.160, 197.162, 197.165, 197.200,
    197.205, 197.215, 197.220, 197.225, 197.230, 197.235, 197.240,
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    197.285, 197.287, 197.289, 197.293, 197.295, 197.315, 208.655,
    334.100, 334.245, 376.805, 376.1199, 491.060, 556.061, 562.031,
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    562.071, 563.026, 565.300, 574.200, 595.027, and 595.120, RSMo,
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    are repealed and forty-six new sections enacted in lieu thereof,
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    to be known as sections 1.205, 170.015, 188.010, 188.015,
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    188.020, 188.023, 188.125, 191.211, 191.320, 191.724, 191.831,
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    191.923, 191.975, 192.665, 192.667, 196.1127, 197.150, 197.152,
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    197.158, 197.160, 197.162, 197.165, 197.200, 197.205, 197.215,
    197.220, 197.225, 197.230, 197.235, 197.240, 197.285, 197.287,
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    197.289, 197.293, 197.295, 197.315, 334.100, 376.1199, 491.060,
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    556.061, 562.031, 562.071, 563.026, 565.015, 595.027, and
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    595.120, to read as follows:
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          1.205. 1. The general assembly of this state finds
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    that:
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              The life of each human being begins at conception;
          (1)
              Unborn children have protectable interests in
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          (2)
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    life, health, and well-being;
              The natural parents of unborn children have
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    protectable interests in the life, health, and well-being of
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    their unborn child.
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              [Effective January 1, 1988,] The laws of this state
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    shall be interpreted and construed to acknowledge on behalf
    of the unborn child at every stage of development, all the
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    rights, privileges, and immunities available to other
    persons, citizens, and residents of this state[, subject
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    only to] in accordance with the Constitution of the United
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    States[, and decisional interpretations thereof by the
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    United States Supreme Court and specific provisions to the
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contrary in the statutes and constitution of this state].

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3. As used in this section, the term "unborn children" 18 or "unborn child" shall include all unborn child or children 19 20 or the offspring of human beings from the moment of 21 conception, as defined in section 188.015, until birth at every stage of biological development.

- 23 4. Nothing in this section shall be interpreted as creating a cause of action against a woman for indirectly 24 25 harming her unborn child by failing to properly care for 26 herself or by failing to follow any particular program of 27 prenatal care.
- 170.015. 1. Any course materials and instruction 2 relating to human sexuality and sexually transmitted 3 diseases shall be medically and factually accurate and shall:
- Present abstinence from sexual activity as the 4 (1)preferred choice of behavior in relation to all sexual 5 6 activity for unmarried pupils because it is the only method 7 that is one hundred percent effective in preventing 8 pregnancy, sexually transmitted diseases and the emotional 9 trauma associated with adolescent sexual activity, and advise students that teenage sexual activity places them at 10 a higher risk of dropping out of school because of the 11 consequences of sexually transmitted diseases and unplanned 12 13 pregnancy;
- 14 (2) Stress that sexually transmitted diseases are serious, possible, health hazards of sexual activity. 15 16 Pupils shall be provided with the latest medical information 17 regarding exposure to human immunodeficiency virus, acquired immune deficiency syndrome (AIDS), human papilloma virus, 18 hepatitis and other sexually transmitted diseases; 19
- 20 Present students with the latest medically factual information regarding both the possible side effects and 21 health benefits of all forms of contraception, including the 22

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success and failure rates for the prevention of pregnancy and sexually transmitted diseases; or shall present students with information on contraceptives and pregnancy in a manner consistent with the provisions of the federal abstinence education law, 42 U.S.C. Section 710;

- 28 (4) Include a discussion of the possible emotional and psychological consequences of preadolescent and adolescent sexual activity and the consequences of adolescent pregnancy, as well as the advantages of adoption, including the adoption of special needs children, and the processes involved in making an adoption plan;
- Teach skills of conflict management, personal 34 (5) 35 responsibility and positive self-esteem through discussion and role-playing at appropriate grade levels to emphasize 36 that the pupil has the power to control personal behavior. 37 Pupils shall be encouraged to base their actions on 38 reasoning, self-discipline, sense of responsibility, self-39 control, and ethical considerations, such as respect for 40 41 one's self and others. Pupils shall be taught not to make unwanted physical and verbal sexual advances or otherwise 42 exploit another person. Pupils shall be taught to resist 43 unwanted sexual advances and other negative peer pressure; 44
  - (6) Advise pupils of the laws pertaining to their financial responsibility to children born in and out of wedlock and advise pupils of the provisions of chapter 566 pertaining to statutory rape;
- 49 (7) Teach pupils about the dangers of sexual
  50 predators, including online predators when using electronic
  51 communication methods such as the internet, cell phones,
  52 text messages, chat rooms, email, and instant messaging
  53 programs. Pupils shall be taught how to behave responsibly
  54 and remain safe on the internet and the importance of having

open communication with responsible adults and reporting any

- 56 inappropriate situation, activity, or abuse to a responsible
- 57 adult, and depending on intent and content, to local law
- 58 enforcement, the Federal Bureau of Investigation, or the
- 59 National Center for Missing & Exploited Children's
- 60 CyberTipline;
- 61 (8) Teach pupils about the consequences, both personal
- 62 and legal, of inappropriate text messaging, even among
- 63 friends; and
- (9) Teach pupils about sexual harassment, sexual
- 65 violence, and consent:
- 66 (a) For the purposes of this subdivision, the term
- 67 "consent" shall mean a freely given agreement to the conduct
- 68 at issue by a competent person. An expression of lack of
- 69 consent through words or conduct means there is no consent.
- 70 Lack of verbal or physical resistance or submission
- 71 resulting from the use of force, threat of force, or placing
- 72 another person in fear does not constitute consent. A
- 73 current or previous dating or social or sexual relationship
- 74 by itself or the manner of dress of the person involved with
- 75 the accused in the conduct at issue shall not constitute
- 76 consent;
- 77 (b) For the purposes of this subdivision, the term
- 78 "sexual harassment" shall mean uninvited and unwelcome
- 79 verbal or physical behavior of a sexual nature especially by
- 80 a person in authority toward a subordinate;
- 81 (c) For the purposes of this subdivision, the term
- 82 "sexual violence" shall mean causing or attempting to cause
- 83 another to engage involuntarily in any sexual act by force,
- 84 threat of force, duress, or without that person's consent.
- 85 2. Policies concerning referrals and parental
- 86 notification regarding contraception shall be determined by

local school boards or charter schools, consistent with the provisions of section 167.611.

- 3. A school district or charter school which provides human sexuality instruction may separate students according to gender for instructional purposes.
  - 4. The board of a school district or charter school shall determine the specific content of the district's or school's instruction in human sexuality, in accordance with subsections 1 to 3 of this section, and shall ensure that all instruction in human sexuality is appropriate to the age of the students receiving such instruction.
  - 5. Before providing any course materials and instruction relating to human sexuality and sexually transmitted diseases to any student, regardless of the course title or description, a school district or charter school shall notify the parent or legal guardian of each student enrolled in the district or school of[:
  - (1) the basic content of the district's or school's human sexuality and sexually transmitted diseases course materials and instruction to be provided to the student[; and
  - (2) The parent's right to remove]. After receipt of such basic content, the parent or legal guardian of each student shall indicate in writing whether the parent or legal guardian desires to allow the district or school to include the student [from] in any part of the district's or school's human sexuality and sexually transmitted diseases course materials and instruction. No school shall provide any course materials and instruction relating to human sexuality and sexually transmitted diseases to a student until the district or school has received such written indication from the student's parent or legal guardian that

118	the st	udent	may	receive	such	course	materials	and
119	instruction.							

- 120 6. A school district or charter school shall make all
  121 curriculum materials used in the district's or school's
- 122 human sexuality instruction available for public inspection
- 123 pursuant to chapter 610 prior to the use of such materials
- 124 in actual instruction.
- [7. No school district or charter school, or its
- personnel or agents, shall provide abortion services, or
- permit a person or entity to offer, sponsor, or furnish in
- any manner any course materials or instruction relating to
- 129 human sexuality or sexually transmitted diseases to its
- 130 students if such person or entity is a provider of abortion
- services.
- 8. As used in this section, the following terms mean:
- 133 (1) "Abortion", the same meaning as such term is
- defined in section 188.015;
- 135 (2) "Abortion services":
- (a) Performing, inducing, or assisting in the
- performance or inducing of an abortion which is not
- necessary to save the life of the mother;
- (b) Encouraging a patient to have an abortion or
- referring a patient for an abortion, which is not necessary
- to save the life of the mother; or
- (c) Developing or dispensing drugs, chemicals, or
- devices intended to be used to induce an abortion which is
- not necessary to save the life of the mother.]
- 7. (1) Violation of this section is a class C
- 146 misdemeanor.
- 147 (2) In any legal proceeding related to a violation of
- 148 this section, no entity directly or indirectly receiving any
- 149 taxpayer funds shall provide any legal advice, counsel, or

representation to any person or entity that violates this section.

188.010. In recognition that Almighty God is the

- 2 author of life, that all men and women are "endowed by their
- 3 Creator with certain unalienable Rights, that among these
- 4 are Life", and that Article I, Section 2 of the Constitution
- 5 of Missouri provides that all persons have a natural right
- 6 to life, it is the intention of the general assembly of the
- 7 state of Missouri to:
- 8 (1) Defend the right to life of all humans, born and
- 9 unborn;
- 10 (2) Declare that the state and all of its political
- 11 subdivisions are a "sanctuary of life" that protects
- 12 pregnant women and their unborn children; and
- 13 (3) [Regulate] Abolish abortion [to the full extent
- 14 permitted by the Constitution of the United States,
- 15 decisions of the United States Supreme Court, and federal
- 16 statutes] in this state.

188.015. As used in this chapter, the following terms

- 2 mean:
- 3 (1) "Abortion":
- 4 (a) The act of using or prescribing any instrument,
- 5 device, medicine, drug, or any other means or substance with
- 6 the intent to destroy the life of an embryo or fetus in his
- 7 or her mother's womb; or
- 8 (b) The intentional termination of the pregnancy of a
- 9 mother by using or prescribing any instrument, device,
- 10 medicine, drug, or other means or substance with an
- 11 intention other than to increase the probability of a live
- 12 birth or to remove a dead unborn child;

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["Abortion facility", a clinic, physician's
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          (2)
    office, or any other place or facility in which abortions
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    are performed or induced other than a hospital;
               "Conception", the fertilization of the ovum of a
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    female by a sperm of a male;
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               "Department", the department of health and senior
          [(4)
    services;
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               "Down Syndrome", the same meaning as defined in
    section 191.923;
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              "Gestational age", length of pregnancy as measured
    from the first day of the woman's last menstrual period;
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                    "Medical emergency", a condition which, based
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         (7) ] (3)
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    on reasonable medical judgment, so complicates the medical
    condition of a pregnant woman as to necessitate the
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    immediate abortion of her pregnancy to avert the death of
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    the pregnant woman or for which a delay will create a
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    serious risk of substantial and irreversible physical
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    impairment of a major bodily function of the pregnant woman;
          [(8) "Physician", any person licensed to practice
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    medicine in this state by the state board of registration
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    for the healing arts;
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               "Reasonable medical judgment", a medical judgment
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    that would be made by a reasonably prudent physician,
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    knowledgeable about the case and the treatment possibilities
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    with respect to the medical conditions involved;
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                     "Unborn child", the offspring of human
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          (10)] (4)
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    beings from the moment of conception until birth and at
    every stage of its biological development, including the
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    human conceptus, zygote, morula, blastocyst, embryo, and
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    fetus[;
                "Viability" or "viable", that stage of fetal
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    development when the life of the unborn child may be
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45 continued indefinitely outside the womb by natural or

- 46 artificial life-supportive systems;
- 47 (12) "Viable pregnancy" or "viable intrauterine
- 48 pregnancy", in the first trimester of pregnancy, an
- 49 intrauterine pregnancy that can potentially result in a
- 11 liveborn baby].
  - 188.020. No person shall perform or induce an abortion
- 2 [except a physician].
  - 188.023. Any licensed health care professional who
- 2 delivers a baby [or performs an abortion], who has prima
- 3 facie evidence that a patient has been the victim of
- 4 statutory rape in the first degree or statutory rape in the
- 5 second degree, or if the patient is under the age of
- 6 eighteen, that [he or she] the patient has been a victim of
- 7 sexual abuse, including rape in the first or second degree,
- 8 or incest, shall be required to report such offenses in the
- 9 same manner as provided for by section 210.115.
  - 188.125. 1. It is the intent of the general assembly
- 2 to acknowledge the right of an alternatives to abortion
- 3 agency to operate freely and engage in speech without
- 4 governmental interference as protected by the Constitution
- 5 of the United States and the Constitution and laws of
- 6 Missouri, the right of a person not to be compelled by the
- 7 government to participate in abortion contrary to his, her,
- 8 or its religious beliefs or moral convictions, and that the
- 9 Constitution of the United States and the Constitution and
- 10 laws of Missouri shall be interpreted, construed, applied,
- 11 and enforced to fully protect such rights.
- 12 2. A political subdivision of this state is preempted
- 13 from enacting, adopting, maintaining, or enforcing any
- 14 order, ordinance, rule, regulation, policy, or other similar
- 15 measure that prohibits, restricts, limits, controls,

directs, interferes with, or otherwise adversely affects an

- 17 alternatives to abortion agency or its officers', agents',
- 18 employees', or volunteers' operations or speech including,
- 19 but not limited to, counseling, referrals, or education of,
- 20 advertising or information to, or other communications with,
- 21 clients, patients, other persons, or the public.
- 22 3. Nothing in subsection 2 of this section shall
- 23 preclude or preempt a political subdivision of this state
- 24 from exercising its lawful authority to regulate zoning or
- 25 land use or to enforce a building or fire code regulation;
- 26 provided that, such political subdivision treats an
- 27 alternatives to abortion agency in the same manner as a
- 28 similarly situated agency and that such authority is not
- 29 used to circumvent the intent of subsection 2 of this
- 30 section.
- 4. [A political subdivision of this state is preempted
- from enacting, adopting, maintaining, or enforcing any
- order, ordinance, rule, regulation, policy, or other similar
- measure that has the purpose or effect of requiring a person
- 35 to directly or indirectly participate in abortion if such
- 36 participation is contrary to the religious beliefs or moral
- 37 convictions of such person.
- 38 5. A political subdivision of this state is preempted
- from enacting, adopting, maintaining, or enforcing any
- 40 order, ordinance, rule, regulation, policy, or other similar
- 41 measure requiring a real estate broker, real estate
- 42 salesperson, real estate broker-salesperson, appraisal firm,
- appraiser, as such terms are defined in chapter 339, a
- 44 property owner, or any other person to buy, sell, exchange,
- 45 purchase, rent, lease, advertise for, or otherwise conduct
- 46 real estate transactions for, to, or with an abortion
- 47 facility or for, to, or with a person for the purpose of

48 performing or inducing an abortion not necessary to save the

- 49 life of the mother, if such requirement is contrary to the
- religious beliefs or moral convictions of such real estate
- 51 broker, real estate salesperson, real estate broker-
- 52 salesperson, appraisal firm, appraiser, property owner, or
- other person.
- 6. A political subdivision of this state is preempted
- from enacting, adopting, maintaining, or enforcing any
- order, ordinance, rule, regulation, policy, or other similar
- 57 measure requiring an employer, employee, health plan
- 58 provider, health plan sponsor, health care provider, or any
- 59 other person to provide coverage for or to participate in a
- health plan that includes benefits that are not otherwise
- required by state law.
- 7. In any action to enforce the provisions of this
- 63 section, a court of competent jurisdiction may order
- injunctive or other equitable relief, recovery of damages or
- other legal remedies, or both, as well as payment of
- fees, costs, and expenses. The relief
- and remedies set forth shall not be deemed exclusive and
- shall be in addition to any other relief or remedies
- 69 permitted by law.
- 70 8.] In addition to a private cause of action by a
- 71 person whose rights are violated contrary to the provisions
- 72 of this section, the attorney general is also authorized to
- 73 bring a cause of action to defend the rights guaranteed
- 74 under this section.
- 75 [9.] 5. Nothing in this section shall be construed to
- 76 prohibit a political subdivision from enacting, adopting,
- 77 maintaining, or enforcing any order, ordinance, rule,
- 78 regulation, policy, or other similar measure to assist
- 79 pregnant women to carry their unborn children to term or to

- 80 assist women in caring for their dependent children or
- 81 placing their children for adoption including, but not
- 82 limited to, by funding or otherwise assisting an
- 83 alternatives to abortion agency to provide services to such
- 84 women and children.
- 85 6. An employee of an alternatives to abortion agency
- 86 shall not voluntarily disclose information communicated to
- 87 the employee relating to and in connection with an
- 88 individual who has presented themselves to the agency for
- 89 the purpose of seeking an alternative to an abortion, except
- 90 by permission of the individual. The information shall be
- 91 considered privileged and confidential; provided, that such
- 92 information may be shared with other employees of the agency
- 93 for purposes of providing services to that individual.
- 94 [10.] 7. As used in this section, [the following terms
- 95 mean:
- 96 (1)] "alternatives to abortion agency" shall mean:
- 97 (a) A maternity home as defined in section 135.600;
- 98 (b) A pregnancy resource center as defined in section
- 99 135.630; or
- 100 (c) An agency or entity that has the primary purpose
- 101 of providing services or counseling to pregnant women to
- 102 assist such women in carrying their unborn children to term
- instead of having abortions and to assist such women in
- 104 caring for their dependent children or placing their
- 105 children for adoption, as described in section 188.325,
- 106 regardless of whether such agency or entity is receiving
- 107 funding or reimbursement from the state for such purposes[;
- 108 (2) "Participate in abortion":
- 109 (a) To undergo an abortion; or
- 110 (b) To perform or induce, assist in, refer or counsel
- for, advocate for, promote, procure, reimburse for, or

provide health plan coverage for an abortion not necessary

- to save the life of the mother].
  - 191.211. State expenditures for new programs and
  - 2 initiatives enacted by sections 103.178, 143.999, [188.230,]
  - 3 191.231, 191.825 to 191.839, 208.177, 208.178, 208.179 and
  - 4 208.181, 211.490, 285.240, 337.093, 374.126, 376.891 to
  - 5 376.894, 431.064, 660.016, 660.017 and 660.018, and the
  - 6 state expenditures for the new initiatives and expansion of
  - 7 programs enacted by revising sections 105.711 and 105.721,
  - 8 191.520, 191.600, 198.090, 208.151, 208.152 and 208.215, as
  - 9 provided by H.B. 564, 1993, shall be funded exclusively by
- 10 federal funds and the funding sources established in
- 11 sections 149.011, 149.015, 149.035, 149.061, 149.065,
- 12 149.160, 149.170, 149.180, 149.190 and 149.192, and no
- 13 future general revenue shall be appropriated to fund such
- 14 new programs or expansions.
  - 191.320. The department may contract with tertiary
- 2 genetic centers to provide genetic diagnostic and counseling
- 3 services, to initiate and conduct investigations of the
- 4 causes, mortality, methods of treatment, prevention and cure
- 5 of genetic disorders and related birth defects, and to
- 6 develop and administer programs and activities which aid in
- 7 the prevention or treatment of a particular genetic
- 8 disorder. It may establish outreach clinics to be located
- 9 throughout the state. The department may divide the state
- 10 into regions for this purpose. The boundaries of such
- 11 regions, to the extent practicable, shall be contiguous with
- 12 relevant boundaries of political subdivisions and health
- 13 service areas. These centers and clinics may provide
- 14 genetic diagnostic evaluations, treatment, counseling and
- 15 follow-up for families with or at high risk for a genetic
- 16 disease, such as sickle cell anemia, cystic fibrosis,

- 17 inherited cardiovascular disease, inherited forms of mental
- 18 retardations, or hemophilia, provided that such evaluations,
- 19 treatment, and counseling shall not include referral for
- 20 abortions [unless such abortions are certified in writing by
- 21 a physician that, in his professional judgment, the life of
- the mother would be endangered if the fetus were carried to
- 23 term1.
  - 191.724. 1. The rights guaranteed under this section
- 2 are in addition to the rights guaranteed under section
- 3 376.805, relating to health plan coverage of abortion, and
- 4 section 376.1199, relating to health plan coverage of
- 5 certain obstetrical and gynecological benefits and
- 6 pharmaceutical coverage.
- 7 2. No employee, self-employed person, or any other
- 8 person shall be compelled to obtain coverage for, or be
- 9 discriminated against or penalized for declining or refusing
- 10 coverage for, [abortion,] contraception[,] or sterilization
- in a health plan if such items or procedures are contrary to
- 12 the religious beliefs or moral convictions of such employee
- or person.
- 3. No employer, health plan provider, health plan
- 15 sponsor, health care provider, or any other person or entity
- 16 shall be compelled to provide coverage for, or be
- 17 discriminated against or penalized for declining or refusing
- 18 coverage for, [abortion,] contraception[,] or sterilization
- 19 in a health plan if such items or procedures are contrary to
- 20 the religious beliefs or moral convictions of such employer,
- 21 health plan provider, health plan sponsor, health care
- 22 provider, person, or entity.
- 4. No governmental entity, public official, or entity
- 24 acting in a governmental capacity shall discriminate against
- 25 or penalize an employee, self-employed person, employer,

- 26 health plan provider, health plan sponsor, health care
- 27 provider, or any other person or entity because of such
- 28 employee's, self-employed person's, employer's, health plan
- 29 provider's, health plan sponsor's, health care provider's,
- 30 or other person's or entity's unwillingness, based on
- 31 religious beliefs or moral convictions, to obtain or provide
- 32 coverage for, pay for, participate in, or refer for,
- 33 [abortion,] contraception[,] or sterilization in a health
- 34 plan.
- 35 5. Whenever the attorney general has a reasonable
- 36 cause to believe that any person or entity or group of
- 37 persons or entities is being, has been, or is threatened to
- 38 be denied any of the rights granted by this section or other
- 39 law that protects the religious beliefs or moral convictions
- 40 of such persons or entities, and such denial raises an issue
- 41 of general public importance, the attorney general may bring
- 42 a civil action in any appropriate state or federal court.
- 43 Such complaint shall set forth the facts and request such
- 44 appropriate relief, including but not limited to an
- 45 application for a permanent or temporary injunction,
- 46 restraining order, mandamus, an order under the federal
- 47 Administrative Procedure Act, Religious Freedom Restoration
- 48 Act, or other federal law, an order under section 1.302
- 49 relating to free exercise of religion, or other order
- 50 against the governmental entity, public official, or entity
- 51 acting in a governmental capacity responsible for such
- 52 denial or threatened denial of rights, as the attorney
- 53 general deems necessary to ensure the full enjoyment of the
- 54 rights granted by law. Nothing contained herein shall
- 55 preclude a private cause of action against a governmental
- 56 entity, public official, or entity acting in a governmental
- 57 capacity by any person or entity or group of persons or

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- 58 entities aggrieved by a violation of this section or other 59 law that protects the religious beliefs or moral convictions 60 of such persons or entities, or be considered a limitation on any other remedy permitted by law. A court may order any 61 62 appropriate relief, including recovery of damages, payment of reasonable attorney's fees, costs, and expenses. 63
- For purposes of this section, "sterilization" shall 64 65 mean any elective medical procedure for which the sole purpose is to make an individual incapable of reproduction. 66
- 191.831. 1. There is hereby established in the state treasury a "Health Initiatives Fund", to which shall be 2 3 deposited all revenues designated for the fund under subsection 8 of section 149.015, and subsection 3 of section 4 149.160, and section 167.609, and all other funds donated to 5 6 the fund or otherwise deposited pursuant to law. 7 treasurer shall administer the fund. Money in the fund
- 8 shall be appropriated to provide funding for implementing
- the new programs and initiatives established by sections 9 10 105.711 and 105.721. The moneys in the fund may further be
- used to fund those programs established by sections 191.411, 11
- 191.520 and 191.600, sections 208.151 and 208.152, and 12
- sections 103.178, 143.999, 167.600 to 167.621, [188.230,] 13
- 191.211, 191.231, 191.825 to 191.839, 192.013, 208.177, 14
- 15 208.178, 208.179 and 208.181, 211.490, 285.240, 337.093,
- 374.126, 376.891 to 376.894, 431.064, 660.016, 660.017 and 16
- 17 660.018; in addition, not less than fifteen percent of the
- proceeds deposited to the health initiative fund pursuant to 18
- sections 149.015 and 149.160 shall be appropriated annually 19
- to provide funding for the C-STAR substance abuse 20
- rehabilitation program of the department of mental health, 21
- or its successor program, and a C-STAR pilot project 22
- developed by the director of the division of alcohol and 23

drug abuse and the director of the department of corrections as an alternative to incarceration, as provided in subsections 2, 3, and 4 of this section. Such pilot project

27 shall be known as the "Alt-care" program. In addition, some

28 of the proceeds deposited to the health initiatives fund

29 pursuant to sections 149.015 and 149.160 shall be

30 appropriated annually to the division of alcohol and drug

31 abuse of the department of mental health to be used for the

32 administration and oversight of the substance abuse traffic

33 offenders program defined in section 302.010 and section

34 577.001. The provisions of section 33.080 to the contrary

35 notwithstanding, money in the health initiatives fund shall

36 not be transferred at the close of the biennium to the

37 general revenue fund.

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components:

- The director of the division of alcohol and drug 38 39 abuse and the director of the department of corrections 40 shall develop and administer a pilot project to provide a comprehensive substance abuse treatment and rehabilitation 41 42 program as an alternative to incarceration, hereinafter referred to as "Alt-care". Alt-care shall be funded using 43 money provided under subsection 1 of this section through 44 the Missouri Medicaid program, the C-STAR program of the 45 department of mental health, and the division of alcohol and 46 47 drug abuse's purchase-of-service system. Alt-care shall offer a flexible combination of clinical services and living 48 49 arrangements individually adapted to each client and her 50 children. Alt-care shall consist of the following
  - (1) Assessment and treatment planning;
- (2) Community support to provide continuity,monitoring of progress and access to services and resources;
  - (3) Counseling from individual to family therapy;

living skills; and

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- 56 (4) Day treatment services which include accessibility 57 seven days per week, transportation to and from the Alt-care 58 program, weekly drug testing, leisure activities, weekly 59 events for families and companions, job and education 60 preparedness training, peer support and self-help and daily
- (5) Living arrangement options which are permanent,substance-free and conducive to treatment and recovery.
- 3. Any female who is pregnant or is the custodial 64 65 parent of a child or children under the age of twelve years, and who has pleaded quilty to or found quilty of violating 66 the provisions of chapter 195, and whose controlled 67 68 substance abuse was a precipitating or contributing factor in the commission of the offense, and who is placed on 69 probation may be required, as a condition of probation, to 70 71 participate in Alt-care, if space is available in the pilot 72 project area. Determinations of eligibility for the 73 program, placement, and continued participation shall be 74 made by the division of alcohol and drug abuse, in consultation with the department of corrections. 75
  - 4. The availability of space in Alt-care shall be determined by the director of the division of alcohol and drug abuse in conjunction with the director of the department of corrections. If the sentencing court is advised that there is no space available, the court shall consider other authorized dispositions.
- 191.923. 1. The general assembly of the state of

  Missouri hereby finds and declares that pregnant women who

  choose to undergo prenatal screening should have access to

  timely and informative counseling about the conditions being

  tested for, the accuracy of such tests, and resources for

  obtaining support services for such conditions. Informed

- 7 consent is a critical component of all genetic testing and
- 8 prenatal screening[, particularly as the results of such
- 9 testing or screening and the counseling that follows may
- 10 lead to the unnecessary abortion of unborn humans with Down
- 11 Syndrome or other prenatally diagnosed conditions].
- 12 2. As used in this section, the following terms shall
- 13 mean:
- 14 (1) "Down Syndrome", a chromosomal disorder caused by
- 15 an error in cell division that results in the presence of an
- 16 extra whole or partial copy of chromosome 21;
- 17 (2) "Health care provider", any person or entity
- 18 licensed, accredited, or certified by the state of Missouri
- 19 to perform specified health services;
- 20 (3) "Prenatally diagnosed condition", any adverse
- 21 fetal health condition identified by prenatal genetic
- 22 testing or indicated by prenatal screening procedures;
- 23 (4) "Prenatal test", a diagnostic procedure or
- 24 screening procedure performed upon a pregnant woman or her
- 25 unborn offspring to obtain information about her offspring's
- health or development.
- 27 3. When a prenatally diagnosed condition, including
- 28 but not limited to Down Syndrome, becomes known as a result
- of one or more prenatal tests, the physician or other health
- 30 care professional who requested or ordered prenatal tests,
- 31 or his or her designee, shall provide the patient with
- 32 current information about the conditions that were tested
- 33 for, the accuracy of such tests, and resources for obtaining
- 34 support services for such conditions, including information
- 35 hotlines specific to Down Syndrome or other prenatally
- 36 diagnosed conditions, resource centers, and clearinghouses
- 37 for such conditions, support programs for parents and

families, and the alternatives to abortion services program

- 39 under section 188.325.
- 4. The department of health and senior services shall
- 41 establish a clearinghouse of information concerning
- 42 supportive services providers, information hotlines specific
- 43 to Down Syndrome or other prenatally diagnosed conditions,
- 44 resource centers, education, other support programs for
- 45 parents and families, and the alternatives to abortion
- 46 services program under section 188.325.
  - 191.975. 1. This section shall be known and may be
- 2 cited as the "Adoption Awareness Law".
- 3 2. To raise public awareness and to educate the
- 4 public, the department of social services, with the
- 5 assistance of the department of health and senior services,
- 6 shall be responsible for:
- 7 (1) Collecting and distributing resource materials to
- 8 educate the public about foster care and adoption;
- 9 (2) Developing and distributing educational materials,
- 10 including but not limited to videos, brochures and other
- 11 media as part of a comprehensive public relations campaign
- 12 about the positive option of adoption and foster care. The
- 13 materials shall include, but not be limited to, information
- 14 about:
- 15 (a) The benefits of adoption and foster care;
- 16 (b) Adoption and foster care procedures;
- 17 (c) Means of financing the cost of adoption and foster
- 18 care including, but not limited to, adoption subsidies,
- 19 foster care payments, and adoption tax credits;
- 20 (d) Options for birth parents in choosing adoptive
- 21 parents;
- (e) Protection for and rights of birth parents and
- 23 adoptive parents prior to and following the adoption;

24 (f) Location of adoption and foster care agencies;

25 (g) Information regarding various state health and

26 social service programs for pregnant women and children,

27 including but not limited to medical assistance programs and

28 temporary assistance for needy families (TANF); and

- 29 (h) Referrals to appropriate counseling services,
- 30 including but not be limited to counseling services for
- 31 parents who are considering retaining custody of their
- 32 children, placing their children for adoption, or becoming
- foster or adoptive parents[; but excluding any referrals for
- abortion or to abortion facilities];
- 35 (3) Making such educational materials available
- 36 through state and local public health clinics, public
- 37 hospitals, family planning clinics, [abortion facilities as
- defined in section 188.015, maternity homes as defined in
- 39 section 135.600, child-placing agencies licensed pursuant to
- 40 sections 210.481 to 210.536, attorneys whose practice
- 41 involves private adoptions, in vitro fertilization clinics
- 42 and private physicians for distribution to their patients
- 43 who request such educational materials. Such materials
- 44 shall also be available to the public through the department
- 45 of social services' internet website;
- 46 (4) Establishing a toll-free telephone number for
- 47 information on adoption and foster care, and to answer
- 48 questions and assist persons inquiring about becoming
- 49 adoptive or foster parents.
- 50 3. In addition, the department may establish and
- 51 implement an ongoing advertising campaign for the
- 52 recruitment of adoptive and foster care families, with a
- 53 special emphasis on the recruitment of qualified adoptive
- 54 and foster care families for special needs children. Such
- 55 advertising campaign may utilize, but shall not be limited

- 56 to, the following media: television, radio, outdoor
- 57 advertising, newspaper, magazines and other print media,
- 58 websites, and the internet. The department may contract
- 59 with professional advertising agencies or other professional
- 60 entities to conduct such advertising campaign on behalf of
- 61 the department.
- 4. The provisions of this section shall be subject to
- 63 appropriations.
- 5. The department of social services shall promulgate
- 65 rules for the implementation of this section in accordance
- 66 with chapter 536.
  - 192.665. As used in this section, section 192.667, and
  - 2 sections 197.150 to 197.165, the following terms mean:
  - 3 (1) "Charge data", information submitted by health
  - 4 care providers on current charges for leading procedures and
  - 5 diagnoses;
  - 6 (2) "Charges by payer", information submitted by
  - 7 hospitals on amount billed to Medicare, Medicaid, other
  - 8 government sources and all nongovernment sources combined as
  - 9 one data element;
- 10 (3) "Department", the department of health and senior
- 11 services;
- 12 (4) "Financial data", information submitted by
- 13 hospitals drawn from financial statements which includes the
- 14 balance sheet, income statement, charity care and bad debt
- 15 and charges by payer, prepared in accordance with generally
- 16 accepted accounting principles;
- 17 (5) "Health care provider", hospitals as defined in
- 18 section 197.020 and ambulatory surgical centers [and
- abortion facilities] as defined in section 197.200;
- 20 (6) "Nosocomial infection", as defined by the federal
- 21 Centers for Disease Control and Prevention and applied to

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22 infections within hospitals, ambulatory surgical centers,
23 abortion facilities, and other facilities;

- (7) "Nosocomial infection incidence rate", a riskadjusted measurement of new cases of nosocomial infections
  by procedure or device within a population over a given
  period of time, with such measurements defined by rule of
  the department pursuant to subsection 3 of section 192.667
  for use by all hospitals, ambulatory surgical centers,
  [abortion facilities,] and other facilities in complying
  with the requirements of the Missouri nosocomial infection
  control act of 2004;
- 33 (8) "Other facility", a type of facility determined to 34 be a source of infections and designated by rule of the 35 department pursuant to subsection 11 of section 192.667;
- "Patient abstract data", data submitted by 36 (9)hospitals which includes but is not limited to date of 37 birth, sex, race, zip code, county of residence, admission 38 date, discharge date, principal and other diagnoses, 39 40 including external causes, principal and other procedures, procedure dates, total billed charges, disposition of the 41 patient and expected source of payment with sources 42 categorized according to Medicare, Medicaid, other 43 government, workers' compensation, all commercial payors 44 45 coded with a common code, self-pay, no charge and other.

192.667. 1. All health care providers shall at least annually provide to the department charge data as required by the department. All hospitals shall at least annually provide patient abstract data and financial data as required by the department. Hospitals as defined in section 197.020 shall report patient abstract data for outpatients and inpatients. Ambulatory surgical centers [and abortion]

facilities] as defined in section 197.200 shall provide

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9 patient abstract data to the department. The department
10 shall specify by rule the types of information which shall
11 be submitted and the method of submission.

- The department shall collect data on the incidence 12 of health care-associated infections from hospitals, 13 14 ambulatory surgical centers, [abortion facilities,] and 15 other facilities as necessary to generate the reports 16 required by this section. Hospitals, ambulatory surgical 17 centers, [abortion facilities,] and other facilities shall 18 provide such data in compliance with this section. In order to streamline government and to eliminate duplicative 19 reporting requirements, if the Centers for Medicare and 20 21 Medicaid Services, or its successor entity, requires hospitals to submit health care-associated infection data, 22 then hospitals and the department shall not be required to 23 24 comply with the health care-associated infection data 25 reporting requirements of subsections 2 to 17 of this 26 section applicable to hospitals, except that the department 27 shall post a link on its website to publicly reported data by hospitals on the Centers for Medicare and Medicaid 28 29 Services' Hospital Compare website, or its successor.
  - 3. The department shall promulgate rules specifying the standards and procedures for the collection, analysis, risk adjustment, and reporting of the incidence of health care-associated infections and the types of infections and procedures to be monitored pursuant to subsection 13 of this section. In promulgating such rules, the department shall:
  - (1) Use methodologies and systems for data collection established by the federal Centers for Disease Control and Prevention's National Healthcare Safety Network, or its successor; and

40 (2) Consider the findings and recommendations of the 41 infection control advisory panel established pursuant to 42 section 197.165.

- By January 1, 2017, the infection control advisory 43 panel created by section 197.165 shall make recommendations 44 to the department regarding the Centers for Medicare and 45 Medicaid Services' health care-associated infection data 46 collection, analysis, and public reporting requirements for 47 hospitals, ambulatory surgical centers, and other facilities 48 49 in the federal Centers for Disease Control and Prevention's National Healthcare Safety Network, or its successor, in 50 lieu of all or part of the data collection, analysis, and 51 52 public reporting requirements of this section. The advisory panel recommendations shall address which hospitals shall be 53 required as a condition of licensure to use the National 54 Healthcare Safety Network for data collection; the use of 55 the National Healthcare Safety Network for risk adjustment 56 57 and analysis of hospital submitted data; and the use of the 58 Centers for Medicare and Medicaid Services' Hospital Compare website, or its successor, for public reporting of the 59 incidence of health care-associated infection metrics. 60 The advisory panel shall consider the following factors in 61 developing its recommendation: 62
- 63 (1) Whether the public is afforded the same or greater
  64 access to facility-specific infection control indicators and
  65 metrics;
- 66 (2) Whether the data provided to the public is subject 67 to the same or greater accuracy of risk adjustment;
- 68 (3) Whether the public is provided with the same or 69 greater specificity of reporting of infections by type of 70 facility infections and procedures;

71 (4) Whether the data is subject to the same or greater 72 level of confidentiality of the identity of an individual 73 patient;

- 74 (5) Whether the National Healthcare Safety Network, or 75 its successor, has the capacity to receive, analyze, and 76 report the required data for all facilities;
- 77 (6) Whether the cost to implement the National
  78 Healthcare Safety Network infection data collection and
  79 reporting system is the same or less.
- 80 5. After considering the recommendations of the infection control advisory panel, and provided that the 81 requirements of subsection 13 of this section can be met, 82 83 the department shall implement guidelines from the federal Centers for Disease Control and Prevention's National 84 Healthcare Safety Network, or its successor. It shall be a 85 condition of licensure for hospitals that meet the minimum 86 87 public reporting requirements of the National Healthcare 88 Safety Network and the Centers for Medicare and Medicaid 89 Services to participate in the National Healthcare Safety Network, or its successor. Such hospitals shall permit the 90 National Healthcare Safety Network, or its successor, to 91 92 disclose facility-specific infection data to the department as required under this section, and as necessary to provide 93 94 the public reports required by the department. It shall be 95 a condition of licensure for any ambulatory surgical center [or abortion facility] which does not voluntarily 96 97 participate in the National Healthcare Safety Network, or its successor, to submit facility-specific data to the 98 department as required under this section, and as necessary 99 100 to provide the public reports required by the department.
  - 6. The department shall not require the resubmission of data which has been submitted to the department of health

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103 and senior services or the department of social services 104 under any other provision of law. The department of health 105 and senior services shall accept data submitted by 106 associations or related organizations on behalf of health 107 care providers by entering into binding agreements 108 negotiated with such associations or related organizations 109 to obtain data required pursuant to section 192.665 and this 110 section. A health care provider shall submit the required

112 (1) If the provider does not submit the required data 113 through such associations or related organizations;

information to the department of health and senior services:

- 114 (2) If no binding agreement has been reached within
  115 ninety days of August 28, 1992, between the department of
  116 health and senior services and such associations or related
  117 organizations; or
- 118 (3) If a binding agreement has expired for more than 119 ninety days.
- Information obtained by the department under the 120 provisions of section 192.665 and this section shall not be 121 public information. Reports and studies prepared by the 122 department based upon such information shall be public 123 information and may identify individual health care 124 providers. The department of health and senior services may 125 126 authorize the use of the data by other research 127 organizations pursuant to the provisions of section 128 192.067. The department shall not use or release any information provided under section 192.665 and this section 129 which would enable any person to determine any health care 130 provider's negotiated discounts with specific preferred 131 132 provider organizations or other managed care organizations.
- 133 The department shall not release data in a form which could

be used to identify a patient. Any violation of this subsection is a class A misdemeanor.

- The department shall undertake a reasonable number 136 of studies and publish information, including at least an 137 138 annual consumer quide, in collaboration with health care 139 providers, business coalitions and consumers based upon the information obtained pursuant to the provisions of section 140 141 192.665 and this section. The department shall allow all 142 health care providers and associations and related 143 organizations who have submitted data which will be used in any publication to review and comment on the publication 144 prior to its publication or release for general use. 145 146 publication shall be made available to the public for a 147 reasonable charge.
- 9. Any health care provider which continually and substantially, as these terms are defined by rule, fails to comply with the provisions of this section shall not be allowed to participate in any program administered by the state or to receive any moneys from the state.
- 10. A hospital, as defined in section 197.020, 153 aggrieved by the department's determination of ineligibility 154 155 for state moneys pursuant to subsection 9 of this section may appeal as provided in section 197.071. An ambulatory 156 157 surgical center [or abortion facility] as defined in section 158 197.200 aggrieved by the department's determination of 159 ineligibility for state moneys pursuant to subsection 9 of this section may appeal as provided in section 197.221. 160
- 161 11. The department of health may promulgate rules
  162 providing for collection of data and publication of the
  163 incidence of health care-associated infections for other
  164 types of health facilities determined to be sources of

infections; except that, physicians' offices shall be exempt from reporting and disclosure of such infections.

- 12. By January 1, 2017, the advisory panel shall recommend and the department shall adopt in regulation with an effective date of no later than January 1, 2018, the requirements for the reporting of the following types of infections as specified in this subsection:
- 172 (1) Infections associated with a minimum of four
  173 surgical procedures for hospitals and a minimum of two
  174 surgical procedures for ambulatory surgical centers that
  175 meet the following criteria:
- 176 (a) Are usually associated with an elective surgical
  177 procedure. An "elective surgical procedure" is a planned,
  178 nonemergency surgical procedure that may be either medically
  179 required such as a hip replacement or optional such as
  180 breast augmentation;
- 181 (b) Demonstrate a high priority aspect such as
  182 affecting a large number of patients, having a substantial
  183 impact for a smaller population, or being associated with
  184 substantial cost, morbidity, or mortality; or
- 185 (c) Are infections for which reports are collected by 186 the National Healthcare Safety Network or its successor;
  - (2) Central line-related bloodstream infections;

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- 188 (3) Health care-associated infections specified for
  189 reporting by hospitals, ambulatory surgical centers, and
  190 other health care facilities by the rules of the Centers for
  191 Medicare and Medicaid Services to the federal Centers for
  192 Disease Control and Prevention's National Healthcare Safety
  193 Network, or its successor; and
- 194 (4) Other categories of infections that may be 195 established by rule by the department.

196 The department, in consultation with the advisory panel,

197 shall be authorized to collect and report data on subsets of

- 198 each type of infection described in this subsection.
- 199 13. In consultation with the infection control
- advisory panel established pursuant to section 197.165, the
- 201 department shall develop and disseminate to the public
- 202 reports based on data compiled for a period of twelve
- 203 months. Such reports shall be updated quarterly and shall
- 204 show for each hospital, ambulatory surgical center,
- 205 [abortion facility,] and other facility metrics on risk-
- 206 adjusted health care-associated infections under this
- 207 section.
- 208 14. The types of infections under subsection 12 of
- 209 this section to be publicly reported shall be determined by
- 210 the department by rule and shall be consistent with the
- 211 infections tracked by the National Healthcare Safety
- 212 Network, or its successor.
- 213 15. Reports published pursuant to subsection 13 of
- 214 this section shall be published and readily accessible on
- 215 the department's internet website. The reports shall be
- 216 distributed at least annually to the governor and members of
- 217 the general assembly. The department shall make such
- 218 reports available to the public for a period of at least two
- 219 years.
- 220 16. The Hospital Industry Data Institute shall publish
- 221 a report of Missouri hospitals'[,] and ambulatory surgical
- 222 centers'[, and abortion facilities'] compliance with
- 223 standardized quality of care measures established by the
- 224 federal Centers for Medicare and Medicaid Services for
- 225 prevention of infections related to surgical procedures. If
- 226 the Hospital Industry Data Institute fails to do so by July
- 227 31, 2008, and annually thereafter, the department shall be

- 228 authorized to collect information from the Centers for
- 229 Medicare and Medicaid Services or from hospitals, ambulatory
- 230 surgical centers, and abortion facilities and publish such
- information in accordance with this section.
- 232 17. The data collected or published pursuant to this
- 233 section shall be available to the department for purposes of
- licensing hospitals[,] and ambulatory surgical centers[, and
- abortion facilities] pursuant to chapter 197.
- 18. The department shall promulgate rules to implement
- the provisions of section 192.131 and sections 197.150 to
- 238 197.160. Any rule or portion of a rule, as that term is
- 239 defined in section 536.010, that is created under the
- 240 authority delegated in this section shall become effective
- 241 only if it complies with and is subject to all of the
- 242 provisions of chapter 536 and, if applicable, section
- 243 536.028. This section and chapter 536 are nonseverable and
- 244 if any of the powers vested with the general assembly
- 245 pursuant to chapter 536 to review, to delay the effective
- 246 date, or to disapprove and annul a rule are subsequently
- 247 held unconstitutional, then the grant of rulemaking
- 248 authority and any rule proposed or adopted after August 28,
- 249 2004, shall be invalid and void.
- 250 19. No later than August 28, 2017, each hospital,
- 251 excluding mental health facilities as defined in section
- 252 632.005, and each ambulatory surgical center [and abortion]
- facility] as defined in section 197.200, shall in
- 254 consultation with its medical staff establish an
- 255 antimicrobial stewardship program for evaluating the
- 256 judicious use of antimicrobials, especially antibiotics that
- 257 are the last line of defense against resistant infections.
- 258 The hospital's stewardship program and the results of the
- 259 program shall be monitored and evaluated by hospital quality

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reporting.

260 improvement departments and shall be available upon 261 inspection to the department. At a minimum, the 262 antimicrobial stewardship program shall be designed to evaluate that hospitalized patients receive, in accordance 263 264 with accepted medical standards of practice, the appropriate 265 antimicrobial, at the appropriate dose, at the appropriate 266 time, and for the appropriate duration. 267 Hospitals described in subsection 19 of this 268 section shall meet the National Healthcare Safety Network 269 requirements for reporting antimicrobial usage or resistance 270 by using the Centers for Disease Control and Prevention's 271 Antimicrobial Use and Resistance (AUR) Module when 272 conditions of participation promulgated by the Centers for 273 Medicare and Medicaid Services requiring the electronic 274 reporting of antibiotic use or antibiotic resistance by 275 hospitals become effective. When such antimicrobial usage 276 or resistance reporting takes effect, hospitals shall authorize the National Healthcare Safety Network, or its 277 278 successor, to disclose to the department facility-specific information reported to the AUR Module. Facility-specific 279 280 data on antibiotic usage and resistance collected under this 281 subsection shall not be disclosed to the public, but the 282 department may release case-specific information to other 283 facilities, physicians, and the public if the department 284 determines on a case-by-case basis that the release of such 285 information is necessary to protect persons in a public 286 health emergency. Nothing in this section shall prohibit a hospital from voluntarily reporting antibiotic use or 287 288 antibiotic resistance data through the National Healthcare Safety Network, or its successor, prior to the effective 289 290 date of the conditions of participation requiring the

- 292 The department shall make a report to the general 293 assembly beginning January 1, 2018, and on every January 294 first thereafter on the incidence, type, and distribution of 295 antimicrobial-resistant infections identified in the state 296 and within regions of the state. 196.1127. 1. The moneys appropriated to the life 2 sciences research board pursuant to sections 196.1100 to 196.1124 shall be subject to the provisions of this section. 3 4 2. As used in this section, the following terms shall 5 mean: ["Abortion services" include performing, inducing, 6 (1)or assisting with abortions, as defined in section 188.015, 7 8 or encouraging patients to have abortions, referring patients for abortions not necessary to save the life of the 9 mother, or development of drugs, chemicals, or devices 10 intended to be used to induce an abortion; 11 12 "Child", a human being recognized as a minor pursuant to the laws of this state, including if in vivo, an 13 14 unborn child as defined in section 188.015 and if in vitro, a human being at any of the stages of biological development 15 of an unborn child from conception or inception onward; 16
  - 17 [(3)] (2) "Conception", the same meaning as such term 18 is defined in section 188.015;
  - 19 [(4)] (3) "Facilities and administrative costs", those 20 costs that are incurred for common or joint objectives and 21 therefore cannot be identified readily and specifically with 22 a particular research project or any other institutional 23 activity;
  - [(5)] (4) "Human cloning", the creation of a human being by any means other than by the fertilization of an occyte of a human female by a sperm of a human male;

[(6)] (5) "Prohibited human research", research in a research project in which there is the taking or utilization of the organs, tissues, or cellular material of:

- 30 (a) A deceased child, unless consent is given by the 31 parents in a manner provided in sections 194.210 to 194.290 32 relating to anatomical gifts, and neither parent caused the 33 death of such child or consented to another person causing 34 the death of such child;
- 35 (b) A living child, when the intended or likely result
  36 of such taking or utilization is to kill or cause harm to
  37 the health, safety, or welfare of such child, or when the
  38 purpose is to target such child for possible destruction in
  39 the future;

## 40 [(7)] (6) "Public funds", include:

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- 41 (a) Any moneys received or controlled by the state of
  42 Missouri or any official, department, division, agency, or
  43 political subdivision thereof, including but not limited to
  44 moneys derived from federal, state, or local taxes, gifts,
  45 or grants from any source, settlements of any claims or
  46 causes of action, public or private, bond proceeds, federal
  47 grants or payments, or intergovernmental transfers;
  - (b) Any moneys received or controlled by an official, department, division, or agency of state government or any political subdivision thereof, or to any person or entity pursuant to appropriation by the general assembly or governing body of any political subdivision of this state;
  - [(8)] (7) "Research project", research proposed to be funded by an award of public funds conducted under the auspices of the entity or entities that applied for and received such award, regardless of whether the research is funded in whole or in part by such award. Such research shall include basic research, including the discovery of new

59 knowledge; translational research, including translational

60 knowledge in a usable form; and clinical research, including

- 61 but not limited to health research in human development and
- 62 aging, cancer, endocrine, cardiovascular, neurological,
- 63 pulmonary, and infectious disease.
- 3. Public funds shall not be expended, paid, or
- 65 granted to or on behalf of an existing or proposed research
- project that involves [abortion services,] human cloning[,]
- 67 or prohibited human research. A research project that
- 68 receives an award of public funds shall not share costs with
- 69 another research project, person, or entity not eligible to
- 70 receive public funds pursuant to this subsection; provided
- 71 that a research project that receives an award of public
- 72 funds may pay a pro rata share of facilities and
- 73 administrative costs determined in the award of public funds
- 74 according to standards that ensure that public funds do not
- 75 in any way subsidize facilities and administrative costs of
- 76 other research projects, persons, or entities not eligible
- 77 to receive public funds pursuant to this subsection. The
- 78 application for an award of public funds shall set forth the
- 79 proposed rates of pro rata cost reimbursement and shall
- 80 provide supporting data and rationale for such rates. All
- 81 applicants for and recipients of awards of public funds
- 82 shall comply with the cost accounting principles set forth
- 83 in Part 9905 of Title 48 of the Code of Federal Regulations,
- 84 or successor regulations, in connection with the application
- 85 for and administration of the research project. All moneys
- 86 derived from an award of public funds shall be expended only
- 87 by checks, drafts, or electronic transfers using a separate
- 88 accounting process maintained for each research project. No
- 89 moneys derived from an award of public funds shall be used
- 90 to cover costs for any other research project or to any

91 other person or entity. No moneys derived from an award of 92 public funds shall be passed through to any other research 93 project, person, or entity unless included in the original application for the award of public funds or in subsequent 94 95 amendments or requests to use separate contractors. A 96 research project that receives an award of public funds shall maintain financial records that demonstrate strict 97 98 compliance with this subsection. Any audit conducted 99 pursuant to any grant or contract awarding public funds 100 shall also certify whether there is compliance with this 101 subsection and shall note any noncompliance as a material 102 audit finding.

- The provisions of this section shall inure to the 103 104 benefit of all residents of this state. Any taxpayer of 105 this state or any political subdivision of this state shall have standing to bring suit against the state of Missouri or 106 107 any official, department, division, agency, or political subdivision of this state, and any recipient of public funds 108 who or which is in violation of this subsection in any 109 circuit court with jurisdiction to enforce the provisions of 110 this section. 111
- 5. This section shall not be construed to permit or make lawful any conduct that is otherwise unlawful pursuant to the laws of this state.
- 115 6. Any provision of this section is not severable from
  116 any appropriation subject to this section or any application
  117 declared by any court to be subject to this section. If any
  118 provision of this section is found to be invalid or
  119 unconstitutional, any appropriation subject to this section
  120 or any appropriation declared by any court to be subject to
  121 this section shall be void, invalid, and unenforceable.

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197.150. The department shall require that each
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    hospital, ambulatory surgical center, [abortion facility,]
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    and other facility have in place procedures for monitoring
    and enforcing compliance with infection control regulations
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                    Such procedures shall be coordinated with
    and standards.
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    administrative staff, personnel staff, and the quality
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    improvement program. Such procedures shall include, at a
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    minimum, requirements for the facility's infection control
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    program to conduct surveillance of personnel with a portion
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    of the surveillance to be done in such manner that employees
    and medical staff are observed without their knowledge of
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    such observation, provided that this unobserved surveillance
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    requirement shall not be considered to be grounds for
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    licensure enforcement action by the department until the
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    department establishes clear and verifiable criteria for
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    determining compliance. Such surveillance also may include
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    monitoring of the rate of use of hand hygiene products.
         197.152.
                   1.
                       Infection control officers as defined in
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    federal regulation and other hospital[,] and ambulatory
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    surgical center[, and abortion facility] employees shall be
4
    protected against retaliation by the hospital[,] or
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    ambulatory surgical center[, or abortion facility] for
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    reporting infection control concerns pursuant to section
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    197.285 and shall be entitled to the full benefits of that
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    section. Such infection control officers shall report any
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    interference in the performance of their duties by their
    supervisors to the hospital[,] or ambulatory surgical
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    center[, or abortion facility] compliance officer
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    established by and empowered to act pursuant to section
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13
    197.285.
         2. Infection control officers as defined in federal
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regulation shall also have the authority to order the

16 cessation of a practice that falls outside accepted practices as defined by appropriate state and federal 17 18 regulatory agencies, accreditation organizations, or the standards adopted by the Centers for Disease Control and 19 20 Prevention or the Association of Professionals in Infection 21 Control and Epidemiology. The hospital[,] or ambulatory surgical center[, or abortion facility] may require that 22 23 such a cessation order of an infection control officer be 24 endorsed by the hospital[,] or ambulatory surgical center[, 25 or abortion facility] chief executive officer or his or her 26 designee before taking effect. The hospital[,] or 27 ambulatory surgical center[, or abortion facility] infection control committee shall convene as soon as possible to 28 review such cessation order and may overrule or sustain the 29 directive of the infection control officer. The department 30 shall promulgate rules governing documentation of such 31 32 events. Members of the medical staff who report in good 33 faith infection control concerns to the hospital[,] or 34 ambulatory surgical center[, or abortion facility] 35 administration or medical staff leadership shall not be 36 subject to retaliation or discrimination for doing so. 37 Nothing in this section shall prevent or shield medical 38 39 staff members from being subject to professional review actions for substandard care or breach of standards 40 established in hospital policy, rules, or medical staff 41 42 bylaws. 197.158. Every hospital[,] and ambulatory surgery 2 center[, and abortion facility] shall, beginning June 1, 3 2006, provide each patient an opportunity to submit to the 4 hospital[,] or ambulatory surgical center[, or abortion 5 facility] administration complaints, comments, and

- 6 suggestions related to the care they received or their
- 7 personal observations related to the quality of care
- 8 provided. The department shall promulgate rules to
- 9 implement this section.
  - 197.160. The department of health and senior services
- 2 shall have access to all data and information held by
- 3 hospitals, ambulatory surgical centers, [abortion
- 4 facilities, ] and other facilities related to their infection
- 5 control practices, rates, or treatments of infections.
- 6 Failure to provide such access shall be grounds for full or
- 7 partial licensure suspension or revocation pursuant to
- 8 section 197.293, sections 197.010 to 197.100, or sections
- 9 197.200 to 197.240. If the department determines that the
- 10 hospital, ambulatory surgical center, [abortion facility,]
- or other facility is willfully impeding access to such
- 12 information, the department shall be authorized to direct
- 13 all state agencies to suspend all or a portion of state
- 14 payments to such entity until such time as the desired
- information is obtained by the department.
  - 197.162. The department shall in its licensure of
- 2 hospitals[,] and ambulatory surgical centers[, and abortion
- 3 facilities] give special attention to infection control
- 4 practices and shall direct hospitals[,] and ambulatory
- 5 surgical centers[, and abortion facilities] to set
- 6 quantifiable measures of performance for reducing the
- 7 incidence of nosocomial infections in Missouri. The
- 8 department shall prepare an annual report on infection
- 9 control standards and compliance, which shall be shared with
- 10 the governor and the general assembly.
  - 197.165. 1. The department shall appoint an
- 2 "Infection Control Advisory Panel" for the purposes of
- 3 implementing sections 192.131 and 192.667.

- 4 2. Members of the infection control advisory panel shall include:
- 6 (1) Two public members;
- 7 (2) Three board-certified or board-eligible physicians
- 8 licensed pursuant to chapter 334 who are affiliated with a
- 9 Missouri hospital or medical school, active members of the
- 10 Society for Health Care Epidemiology of America, and have
- 11 demonstrated interest and expertise in health facility
- 12 infection control;
- 13 (3) One physician licensed pursuant to chapter 334 who
- 14 is active in the practice of medicine in Missouri and who
- 15 holds medical staff privileges at a Missouri hospital;
- 16 (4) Four infection control practitioners certified by
- 17 the certification board of infection control and
- 18 epidemiology, at least two of whom shall be practicing in a
- 19 rural hospital or setting and at least two of whom shall be
- 20 registered professional nurses licensed under chapter 335;
- 21 (5) A medical statistician with an advanced degree in
- 22 such specialty;
- 23 (6) A clinical microbiologist with an advanced degree
- 24 in such specialty;
- 25 (7) Three employees of the department, representing
- 26 the functions of hospital[,] and ambulatory surgical
- 27 center[, and abortion facility] licensure, epidemiology and
- 28 health data analysis, who shall serve as ex officio
- 29 nonvoting members of the panel.
- 30 3. Reasonable expenses of the panel shall be paid from
- 31 private donations made specifically for that purpose to the
- 32 "Infection Control Advisory Panel Fund", which is hereby
- 33 created in the state treasury. If such donations are not
- 34 received from private sources, then the provisions of this
- 35 act shall be implemented without the advisory panel.

197.200. As used in sections 197.200 to 197.240, 2 unless the context clearly indicates otherwise, the 3 following terms mean: ["Abortion facility", as such term is defined in 4 section 188.015; 5 6 "Ambulatory surgical center", any public or (2)**]** 7 private establishment operated primarily for the purpose of 8 performing surgical procedures or primarily for the purpose 9 of performing childbirths, and which does not provide 10 services or other accommodations for patients to stay more than twenty-three hours within the establishment, provided, 11 however, that nothing in this definition shall be construed 12 to include the offices of dentists currently licensed 13 pursuant to chapter 332; 14 15 [(3)] (2) "Dentist", any person currently licensed to practice dentistry pursuant to chapter 332; 16 17 [(4)] (3) "Department", the department of health and senior services; 18 [(5)] (4) "Governmental unit", any city, county or 19 other political subdivision of this state, or any 20 department, division, board or other agency of any political 21 22 subdivision of this state; 23 [(6)] (5) "Person", any individual, firm, partnership, 24 corporation, company, or association and the legal successors thereof: 25 "Physician", any person currently licensed 26 [(7)] **(6)** 27 to practice medicine pursuant to chapter 334; "Podiatrist", any person currently licensed 28 [(8)] **(7)** 29 to practice podiatry pursuant to chapter 330.

197.205. 1. No person or governmental unit acting
2 severally or jointly with any other person or governmental
3 unit shall establish, conduct or maintain an ambulatory

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    surgical center [or abortion facility] in this state without
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    a license under sections 197.200 to 197.240 issued by the
    department of health and senior services.
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         2. Nothing in sections 197.200 to 197.240 shall be
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8
    construed to impair or abridge the authority of a
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    governmental unit to license ambulatory surgical centers [or
    abortion facilities], provided that any ordinance of a
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11
    governmental unit shall require compliance with all rules,
    regulations, and standards adopted by the department to
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13
    implement the provisions of sections 197.200 to 197.240.
         197.215. 1. Upon receipt of an application for a
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    license, the department of health and senior services shall
3
    issue a license if the applicant and ambulatory surgical
    center facilities [or abortion facilities] meet the
4
    requirements established under sections 197.200 to 197.240,
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    and have provided affirmative evidence that:
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7
          (1) Each member of the surgical staff is a physician,
    dentist or podiatrist currently licensed to practice in
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9
    Missouri[, and each person authorized to perform or induce
    abortions is a physician currently licensed to practice in
10
11
    Missouri];
              Surgical procedures in ambulatory surgical centers
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    shall be performed only by physicians, dentists or
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    podiatrists, who at the time are privileged to perform
    surgical procedures in at least one licensed hospital in the
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    community in which the ambulatory surgical center is
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    located, thus providing assurance to the public that
    patients treated in the center shall receive continuity of
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    care should the services of a hospital be required;
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    alternatively, applicant shall submit a copy of a current
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    working agreement with at least one licensed hospital in the
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community in which the ambulatory surgical center is

- 23 located, guaranteeing the transfer and admittance of
- 24 patients for emergency treatment whenever necessary;
- 25 (3) Continuous physician services or registered
- 26 professional nursing services are provided whenever a
- 27 patient is in the facility;
- 28 (4) Adequate medical records for each patient are to
- 29 be maintained.
- 30 2. Upon receipt of an application for a license, or
- 31 the renewal thereof, the department shall issue or renew the
- 32 license if the applicant and program meet the requirements
- 33 established under sections 197.200 to 197.240. Each license
- 34 shall be issued only for the persons and premises named in
- 35 the application. A license, unless sooner suspended or
- 36 revoked, shall be issued for a period of one year.
- 3. Each license shall be issued only for the premises
- 38 and persons or governmental units named in the application,
- 39 and shall not be transferable or assignable except with the
- 40 written consent of the department. Licenses shall be posted
- 41 in a conspicuous place on the licensed premises.
- 4. If, during the period in which an ambulatory
- 43 surgical center [license or an abortion facility] license is
- 44 in effect, the license holder or operator legally transfers
- 45 operational responsibilities by any process to another
- 46 person as defined in section 197.200, an application shall
- 47 be made for the issuance of a new license to become
- 48 effective on the transfer date.
  - 197.220. The department of health and senior services
- 2 may deny, suspend or revoke a license in any case in which
- 3 the department finds that there has been a substantial
- 4 failure to comply with the requirements of sections 197.200
- 5 to 197.240, or in any case in which the director of the
- 6 department makes a finding that:

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The applicant, or if the applicant is a firm,
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    partnership or association, any of its members, or if a
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    corporation, any of its officers or directors, or the person
    designated to manage or supervise the facility, has been
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    finally adjudicated and found quilty, or entered a plea of
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    guilty or nolo contendere, in a criminal prosecution under
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    the laws of any state or of the United States, for any
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    offense reasonably related to the qualifications, functions,
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    or duties of an ambulatory surgical center [or of an
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    abortion facility], or for any offense an essential element
    of which is fraud, dishonesty, or an act of violence, or for
17
    any offense involving moral turpitude, whether or not
18
    sentence is imposed;
19
              The licensure status or record of the applicant,
20
          (2)
    or if the applicant is a firm, partnership or association,
21
22
    of any of its members, or if a corporation, of any of its
    officers or directors, or of the person designated to manage
23
24
    or supervise the facility, from any other state, federal
25
    district or land, territory or commonwealth of the United
    States, or of any foreign country where the applicant has
26
    done business in a similar capacity indicates that granting
27
    a license to the applicant would be detrimental to the
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    interests of the public.
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          197.225.
                    [1.] The department of health and senior
    services may adopt such reasonable rules, regulations, and
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3
    standards for the types of services provided as are
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    necessary to carry out the provisions of sections 197.200 to
    197.240, and to assure quality patient care and patient
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    safety, which shall include, but not be limited to:
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7
          (1) Construction of the facility including, but not
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limited to, plumbing, heating, lighting, and ventilation

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9 which should insure the health, safety, comfort, and privacy
10 of patients and protection from fire hazard;

- 11 (2) Number, qualifications, and organization of all
- personnel, having responsibility for any part of the care
- provided to the patients;
- 14 (3) Equipment essential to the health, welfare, and 15 safety of the patients;
- 16 (4) Facilities, programs, and services to be provided 17 in connection with the care of patients in ambulatory 18 surgical centers; and
- 19 (5) Procedures for peer review and for receiving and 20 investigating complaints regarding any ambulatory surgical 21 center or any physician, dentist, podiatrist, nurse, 22 assistant, manager, supervisor, or employee practicing or 23 working in any such facility.
- [2. The department of health and senior services may adopt separate rules, regulations, or standards to apply to ambulatory surgical centers and to apply to abortion facilities.
- 3. Abortion facilities shall be required to maintain a written protocol for managing medical emergencies and the transfer of patients requiring further emergency care to a hospital within a reasonable distance from the abortion facility.]
- 197.230. 1. The department of health and senior
  services shall make, or cause to be made, such inspections
  and investigations as it deems necessary. The department
  may delegate its powers and duties to investigate and
  inspect ambulatory surgical centers [or abortion facilities]
  to an official of a political subdivision having a
  population of at least four hundred fifty thousand if such
- 8 political subdivision is deemed qualified by the department

- 9 to inspect and investigate ambulatory surgical centers. The
- 10 official so designated shall submit a written report of his
- 11 or her findings to the department and the department may
- 12 accept the recommendations of such official if it determines
- 13 that the facility inspected meets minimum standards
- 14 established pursuant to sections 197.200 to 197.240.
- 15 2. [In the case of any abortion facility, the
- department shall make or cause to be made an unannounced on-
- 17 site inspection and investigation at least annually. Such
- on-site inspection and investigation shall include, but not
- 19 be limited to, the following areas:
- (1) Compliance with all statutory and regulatory
- 21 requirements for an abortion facility, including
- requirements that the facility maintain adequate staffing
- and equipment to respond to medical emergencies;
- 24 (2) Compliance with the provisions of chapter 188; and
- 25 (3) Compliance with the requirement in section 197.215
- that continuous physician services or registered
- 27 professional nursing services be provided whenever a patient
- is in the facility.
- 29 3.] Inspection, investigation, and quality assurance
- 30 reports shall be made available to the public. Any portion
- 31 of a report may be redacted when made publicly available if
- 32 such portion would disclose information that is not subject
- 33 to disclosure under the law.
  - 197.235. 1. Any person operating, conducting,
- 2 managing, or establishing an ambulatory surgical center [or
- abortion facility] without a license required by sections
- 4 197.200 to 197.240 is guilty of a class A misdemeanor and,
- 5 upon conviction, shall be subject to a fine of not more than
- 6 five hundred dollars. Each day of continuing violation
- 7 shall constitute a separate offense.

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             The attorney general shall represent the department
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    of health and senior services and shall institute an action
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    in the name of the state for injunctive or other relief
    against any person or governmental unit to restrain or
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    prevent the establishment, conduct, management, or operation
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13
    of an ambulatory surgical center [or abortion facility]
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    without a license issued pursuant to the provisions of
15
    sections 197.200 to 197.240.
             Any person operating, conducting, managing, or
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17
    establishing an ambulatory surgical center [or abortion
    facility] who, in the course of advertising, promoting, or
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    otherwise publicizing the activities, business, location, or
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    any other matter concerning the operations of said
21
    ambulatory surgical center [or abortion facility], uses or
22
    employs in any manner the words "State, Missouri, State of
23
    Missouri, Department of Health and Senior Services, the
    initials 'Mo.'," or any emblem of the state of Missouri or
24
    the department of health and senior services, for the
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26
    purpose of conveying or in any manner reasonably calculated
    to convey the false impression that the state of Missouri or
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    any department, agency, bureau, or instrumentality thereof
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    is involved in the business of said ambulatory surgical
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    center [or abortion facility], or took part in said
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    advertisement, promotion, publicity, or other statement,
    shall be subject to a fine of one hundred dollars per day
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33
    for each day during the period beginning with the day said
    advertisement, promotion, publication, or statement first
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    appears and ending on the day on which it is withdrawn.
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          197.240. After September 28, 1975, no individual or
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    group health insurance policy of insurance providing
    coverage on an expense incurred basis, nor individual or
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    group service or indemnity type contract issued by a
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- 5 nonprofit corporation, nor any self-insured group health
- 6 benefit plan or trust, of any kind or description, shall be
- 7 issued or payment accepted therefor in renewal or
- 8 continuation thereof unless coverage for any service
- 9 performed in an ambulatory surgical center [or abortion
- facility] is provided for therein if such service would have
- 11 been covered under the terms of the policy or contract as an
- 12 eligible inpatient service, except as provided in section
- 13 376.805. Nothing in this section shall apply to a group
- 14 contract, plan or trust which provides health care and
- 15 surgical care directly to its members and their dependents.
- 16 Nothing in this section shall be construed to mandate
- 17 coverage under an individual or group health insurance
- 18 policy of insurance providing coverage on an expense-
- 19 incurred basis, or an individual or group service or
- 20 indemnity type contract issued by a nonprofit corporation,
- 21 or any self-insured group health benefit plan or trust, of
- 22 any kind or description, to provide health insurance for
- 23 services which are usually performed in a physician's office.
  - 197.285. 1. Hospitals[,] and ambulatory surgical
- 2 centers[, and abortion facilities] shall establish and
- 3 implement a written policy adopted by each hospital[,] and
- 4 ambulatory surgical center[, and abortion facility] relating
- 5 to the protections for employees who disclose information
- 6 pursuant to subsection 2 of this section. This policy shall
- 7 include a time frame for completion of investigations
- 8 related to complaints, not to exceed thirty days, and a
- 9 method for notifying the complainant of the disposition of
- 10 the investigation. This policy shall be submitted to the
- 11 department of health and senior services to verify
- 12 implementation. At a minimum, such policy shall include the
- 13 following provisions:

14 (1) No supervisor or individual with authority to hire

or fire in a hospital[,] or ambulatory surgical center[, or

abortion facility] shall prohibit employees from disclosing

- information pursuant to subsection 2 of this section;
- 18 (2) No supervisor or individual with authority to hire
- or fire in a hospital[,] or ambulatory surgical center[, or
- abortion facility] shall use or threaten to use his or her
- 21 supervisory authority to knowingly discriminate against,
- 22 dismiss, penalize or in any way retaliate against or harass
- 23 an employee because the employee in good faith reported or
- 24 disclosed any information pursuant to subsection 2 of this
- 25 section, or in any way attempt to dissuade, prevent or
- 26 interfere with an employee who wishes to report or disclose
- 27 such information;
- 28 (3) Establish a program to identify a compliance
- 29 officer who is a designated person responsible for
- 30 administering the reporting and investigation process and an
- 31 alternate person should the primary designee be implicated
- 32 in the report.
- 2. This section shall apply to information disclosed
- 34 or reported in good faith by an employee concerning:
- 35 (1) Alleged facility mismanagement or fraudulent
- 36 activity;
- 37 (2) Alleged violations of applicable federal or state
- 38 laws or administrative rules concerning patient care,
- 39 patient safety or facility safety; or
- 40 (3) The ability of employees to successfully perform
- 41 their assigned duties.
- 42 All information disclosed, collected and maintained pursuant
- 43 to this subsection and pursuant to the written policy
- 44 requirements of this section shall be accessible to the

45 department of health and senior services at all times and

- 46 shall be reviewed by the department of health and senior
- 47 services at least annually. Complainants shall be notified
- 48 of the department of health and senior services' access to
- 49 such information and of the complainant's right to notify
- 50 the department of health and senior services of any
- 51 information concerning alleged violations of applicable
- 52 federal or state laws or administrative rules concerning
- 53 patient care, patient safety or facility safety.
- 3. Prior to any disclosure to individuals or agencies
- other than the department of health and senior services,
- 56 employees wishing to make a disclosure pursuant to the
- 57 provisions of this section shall first report to the
- 58 individual or individuals designated by the hospital[,] or
- 59 ambulatory surgical center[, or abortion facility] pursuant
- 60 to subsection 1 of this section.
- 4. If the compliance officer, compliance committee or
- 62 management official discovers credible evidence of
- 63 misconduct from any source and, after a reasonable inquiry,
- 64 has reason to believe that the misconduct may violate
- 65 criminal, civil or administrative law, then the hospital[,]
- or ambulatory surgical center[, or abortion facility] shall
- 67 report the existence of misconduct to the appropriate
- 68 governmental authority within a reasonable period, but not
- 69 more than seven days after determining that there is
- 70 credible evidence of a violation.
- 71 5. Reports made to the department of health and senior
- 72 services shall be subject to the provisions of section
- 73 197.477, provided that the restrictions of section 197.477
- 74 shall not be construed to limit the employee's ability to
- 75 subpoena from the original source the information reported
- 76 to the department pursuant to this section.

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         6. Each written policy shall allow employees making a
    report who wish to remain anonymous to do so, and shall
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    include safeguards to protect the confidentiality of the
    employee making the report, the confidentiality of patients
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    and the integrity of data, information and medical records.
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             Each hospital[,] and ambulatory surgical center[,
    and abortion facility] shall, within forty-eight hours of
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    the receipt of a report, notify the employee that his or her
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    report has been received and is being reviewed.
         197.287.
                    [By July 1, 2001,] All hospitals and
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    ambulatory surgical centers[, and by July 1, 2018, all
    abortion facilities] shall provide training programs, with
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    measurable minimal training outcomes relating to quality of
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    patient care and patient safety, to all unlicensed staff
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6
    providing patient care in their facility within ninety days
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    of the beginning date of employment. Standards for such
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    training shall be established by the department of health
    and senior services by rule. It shall be a requirement of
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    hospital[,] and ambulatory surgical center[, and abortion
10
    facility] licensure pursuant to this chapter that all
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    hospitals[,] and ambulatory surgical centers[, and abortion
12
    facilities] submit documentation to the department of health
13
    and senior services on the training program used.
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         197.289. 1. All hospitals[,] and ambulatory surgical
    centers[, and abortion facilities] shall develop and
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    implement a methodology which ensures adequate nurse
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    staffing that will meet the needs of patients.
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    minimum, there shall be on duty at all times a sufficient
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    number of licensed registered nurses to provide patient care
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7
    requiring the judgment and skills of a licensed registered
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nurse and to oversee the activities of all nursing personnel.

- 9 2. There shall be sufficient licensed and ancillary
  10 nursing personnel on duty on each nursing unit to meet the
  11 needs of each patient in accordance with accepted standards
  12 of quality patient care.
  197.293. 1. In addition to the powers established in
- sections 197.070 and 197.220, the department of health and
  senior services shall use the following standards for
  enforcing hospital[,] and ambulatory surgical center[, and
  abortion facility] licensure regulations promulgated to
  enforce the provisions of sections 197.010 to 197.120,
  sections 197.150 to 197.165, and sections 197.200 to 197.240:
- 8 (1) Upon notification of a deficiency in meeting
  9 regulatory standards, the hospital[,] or ambulatory surgical
  10 center[, or abortion facility] shall develop and implement a
  11 plan of correction approved by the department which
  12 includes, but is not limited to, the specific type of
  13 corrective action to be taken and an estimated time to
  14 complete such action;
- 15 (2) If the plan as implemented does not correct the deficiency, the department may either:
- 17 (a) Direct the hospital[,] or ambulatory surgical
  18 center[, or abortion facility] to develop and implement a
  19 plan of correction pursuant to subdivision (1) of this
  20 subsection; or
- (b) Require the hospital[,] or ambulatory surgical center[, or abortion facility] to implement a plan of correction developed by the department;
- 24 (3) If there is a continuing deficiency after
  25 implementation of the plan of correction pursuant to
  26 subdivision (2) of this subsection and the hospital[,] or
  27 ambulatory surgical center[, or abortion facility] has had
  28 an opportunity to correct such deficiency, the department

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29 may restrict new inpatient admissions or outpatient entrants
30 to the service or services affected by such deficiency;

- (4) If there is a continuing deficiency after the department restricts new inpatient admissions or outpatient entrants to the service or services pursuant to subdivision (3) of this subsection and the hospital[,] or ambulatory surgical center[, or abortion facility] has had an opportunity to correct such deficiency, the department may suspend operations in all or part of the service or services affected by such deficiency;
- (5) If there is a continuing deficiency after suspension of operations pursuant to subdivision (4) of this subsection, the department may deny, suspend or revoke the hospital's[,] or ambulatory surgical center's[, or abortion facility's] license pursuant to section 197.070 or section 197.220.
- 45 Notwithstanding the provisions of subsection 1 of this section to the contrary, if a deficiency in meeting 46 47 licensure standards presents an immediate and serious threat to the patients' health and safety, the department may, 48 based on the scope and severity of the deficiency, restrict 49 access to the service or services affected by the deficiency 50 51 until the hospital[,] or ambulatory surgical center[, or 52 abortion facility] has developed and implemented an approved plan of correction. Decisions as to whether a deficiency 53 54 constitutes an immediate and serious threat to the patients' 55 health and safety shall be made in accordance with 56 guidelines established pursuant to regulation of the department of health and senior services and such decisions 57 shall be approved by the bureau of health facility licensing 58 in the department of health and senior services, or its 59 successor agency, or by a person authorized by the 60

by section 621.035.

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regulations to approve such decisions in the absence of the director.

A hospital[,] or ambulatory surgical 197.295. 1. 2 center[, or abortion facility] aggrieved by a decision of 3 the department pursuant to the provisions of paragraph (b) 4 of subdivision (2) and subdivisions (3), (4) and (5) of subsection 1 of section 197.293 may appeal such decision to 5 6 the administrative hearing commission pursuant to section 7 197.071 or section 197.221, and seek judicial review 8 pursuant to section 621.145. An appeal of an action to restrict new inpatient admissions or outpatient entrants, 9 suspend operations or revoke a license shall be heard on an 10 11 expedited basis by the administrative hearing commission. 12 The hospital[,] or ambulatory surgical center[, or abortion 13 facility] may apply to the administrative hearing commission 14 for an order to stay or suspend any such departmental action 15 pending the commission's findings and ruling as authorized

If both the department and the hospital[,] or 17 ambulatory surgical center[, or abortion facility] agree to 18 19 do so, prior to an appeal to the administrative hearing 20 commission pursuant to section 197.071 or section 197.221, an official action of the department made pursuant to 21 22 sections 197.010 to 197.120 or sections 197.200 to 197.240 may be appealed to a departmental hearing officer. 23 24 department of health and senior services shall promulgate 25 rules specifying the qualifications of such a hearing officer, establish procedures to ensure impartial decisions 26 27 and provide for comparable appeal remedies when a

197.315. 1. Any person who proposes to develop or offer a new institutional health service within the state

departmental hearing officer is unavailable.

3 must obtain a certificate of need from the committee prior
4 to the time such services are offered.

- 2. Only those new institutional health services which are found by the committee to be needed shall be granted a certificate of need. Only those new institutional health services which are granted certificates of need shall be offered or developed within the state. No expenditures for new institutional health services in excess of the
- applicable expenditure minimum shall be made by any person unless a certificate of need has been granted.
- 3. After October 1, 1980, no state agency charged by statute to license or certify health care facilities shall issue a license to or certify any such facility, or distinct part of such facility, that is developed without obtaining a certificate of need.
- 4. If any person proposes to develop any new institutional health care service without a certificate of need as required by sections 197.300 to 197.366, the committee shall notify the attorney general, and he shall apply for an injunction or other appropriate legal action in any court of this state against that person.
- 5. After October 1, 1980, no agency of state government may appropriate or grant funds to or make payment of any funds to any person or health care facility which has not first obtained every certificate of need required pursuant to sections 197.300 to 197.366.
- 29 6. A certificate of need shall be issued only for the 30 premises and persons named in the application and is not 31 transferable except by consent of the committee.
- 7. Project cost increases, due to changes in the project application as approved or due to project change orders, exceeding the initial estimate by more than ten

35 percent shall not be incurred without consent of the 36 committee.

- 37 8. Periodic reports to the committee shall be required 38 of any applicant who has been granted a certificate of need 39 until the project has been completed. The committee may 40 order the forfeiture of the certificate of need upon failure 41 of the applicant to file any such report.
- 9. A certificate of need shall be subject to
  forfeiture for failure to incur a capital expenditure on any
  approved project within six months after the date of the
  order. The applicant may request an extension from the
  committee of not more than six additional months based upon
  substantial expenditure made.
- 10. Each application for a certificate of need must be 48 accompanied by an application fee. The time of filing 49 50 commences with the receipt of the application and the application fee. The application fee is one thousand 51 dollars, or one-tenth of one percent of the total cost of 52 53 the proposed project, whichever is greater. All application fees shall be deposited in the state treasury. Because of 54 the loss of federal funds, the general assembly will 55 appropriate funds to the Missouri health facilities review 56 57 committee.
- 11. In determining whether a certificate of need should be granted, no consideration shall be given to the facilities or equipment of any other health care facility located more than a fifteen-mile radius from the applying facility.
- 12. When a nursing facility shifts from a skilled to
  an intermediate level of nursing care, it may return to the
  higher level of care if it meets the licensure requirements,
  without obtaining a certificate of need.

- 13. [In no event shall a certificate of need be denied because the applicant refuses to provide abortion services
- or information.
- 70 14.] A certificate of need shall not be required for
- 71 the transfer of ownership of an existing and operational
- 72 health facility in its entirety.
- 73 [15.] 14. A certificate of need may be granted to a
- 74 facility for an expansion, an addition of services, a new
- 75 institutional service, or for a new hospital facility which
- 76 provides for something less than that which was sought in
- 77 the application.
- 78 [16.] 15. The provisions of this section shall not
- 79 apply to facilities operated by the state, and appropriation
- 80 of funds to such facilities by the general assembly shall be
- 81 deemed in compliance with this section, and such facilities
- 82 shall be deemed to have received an appropriate certificate
- 83 of need without payment of any fee or charge. The
- 84 provisions of this subsection shall not apply to hospitals
- 85 operated by the state and licensed under this chapter,
- 86 except for department of mental health state-operated
- 87 psychiatric hospitals.
- 88 [17.] 16. Notwithstanding other provisions of this
- 89 section, a certificate of need may be issued after July 1,
- 90 1983, for an intermediate care facility operated exclusively
- 91 for the intellectually disabled.
- 92 [18.] 17. To assure the safe, appropriate, and cost-
- 93 effective transfer of new medical technology throughout the
- 94 state, a certificate of need shall not be required for the
- 95 purchase and operation of:
- 96 (1) Research equipment that is to be used in a
- 97 clinical trial that has received written approval from a
- 98 duly constituted institutional review board of an accredited

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99 school of medicine or osteopathy located in Missouri to 100 establish its safety and efficacy and does not increase the 101 bed complement of the institution in which the equipment is 102 to be located. After the clinical trial has been completed, a certificate of need must be obtained for continued use in 103 104 such facility; or

- Equipment that is to be used by an academic health 105 (2)106 center operated by the state in furtherance of its research 107
- or teaching missions. 1. The board may refuse to issue or renew
- any certificate of registration or authority, permit or 2
- 3 license required pursuant to this chapter for one or any
- combination of causes stated in subsection 2 of this 4
- section. The board shall notify the applicant in writing of 5
- the reasons for the refusal and shall advise the applicant 6
- 7 of the applicant's right to file a complaint with the
- 8 administrative hearing commission as provided by chapter
- 9 621. As an alternative to a refusal to issue or renew any
- 10 certificate, registration or authority, the board may, at
- its discretion, issue a license which is subject to 11
- probation, restriction or limitation to an applicant for 12
- licensure for any one or any combination of causes stated in 13
- subsection 2 of this section. The board's order of 14
- probation, limitation or restriction shall contain a 15
- statement of the discipline imposed, the basis therefor, the 16
- 17 date such action shall become effective, and a statement
- 18 that the applicant has thirty days to request in writing a
- hearing before the administrative hearing commission. 19
- the board issues a probationary, limited or restricted 20
- license to an applicant for licensure, either party may file 21
- a written petition with the administrative hearing 22
- commission within thirty days of the effective date of the 23

24 probationary, limited or restricted license seeking review

- of the board's determination. If no written request for a
- 26 hearing is received by the administrative hearing commission
- 27 within the thirty-day period, the right to seek review of
- 28 the board's decision shall be considered as waived.
- 29 2. The board may cause a complaint to be filed with
- 30 the administrative hearing commission as provided by chapter
- 31 621 against any holder of any certificate of registration or
- 32 authority, permit or license required by this chapter or any
- 33 person who has failed to renew or has surrendered the
- 34 person's certificate of registration or authority, permit or
- 35 license for any one or any combination of the following
- 36 causes:
- 37 (1) Use of any controlled substance, as defined in
- 38 chapter 195, or alcoholic beverage to an extent that such
- 39 use impairs a person's ability to perform the work of any
- 40 profession licensed or regulated by this chapter;
- 41 (2) The person has been finally adjudicated and found
- 42 quilty, or entered a plea of quilty or nolo contendere, in a
- 43 criminal prosecution under the laws of any state or of the
- 44 United States, for any offense reasonably related to the
- 45 qualifications, functions or duties of any profession
- 46 licensed or regulated pursuant to this chapter, for any
- 47 offense involving fraud, dishonesty or an act of violence,
- 48 or for any offense involving moral turpitude, whether or not
- 49 sentence is imposed;
- 50 (3) Use of fraud, deception, misrepresentation or
- 51 bribery in securing any certificate of registration or
- 52 authority, permit or license issued pursuant to this chapter
- or in obtaining permission to take any examination given or
- 54 required pursuant to this chapter;

- 55 (4) Misconduct, fraud, misrepresentation, dishonesty,
- 56 unethical conduct or unprofessional conduct in the
- 57 performance of the functions or duties of any profession
- 58 licensed or regulated by this chapter, including, but not
- 59 limited to, the following:
- 60 (a) Obtaining or attempting to obtain any fee, charge,
- 61 tuition or other compensation by fraud, deception or
- 62 misrepresentation; willfully and continually overcharging or
- 63 overtreating patients; or charging for visits to the
- 64 physician's office which did not occur unless the services
- 65 were contracted for in advance, or for services which were
- 66 not rendered or documented in the patient's records;
- 67 (b) Attempting, directly or indirectly, by way of
- 68 intimidation, coercion or deception, to obtain or retain a
- 69 patient or discourage the use of a second opinion or
- 70 consultation;
- 71 (c) Willfully and continually performing inappropriate
- 72 or unnecessary treatment, diagnostic tests or medical or
- 73 surgical services;
- 74 (d) Delegating professional responsibilities to a
- 75 person who is not qualified by training, skill, competency,
- 76 age, experience or licensure to perform such
- 77 responsibilities;
- 78 (e) Misrepresenting that any disease, ailment or
- 79 infirmity can be cured by a method, procedure, treatment,
- 80 medicine or device;
- 81 (f) Performing or prescribing medical services which
- 82 have been declared by board rule to be of no medical or
- 83 osteopathic value;
- (g) Final disciplinary action by any professional
- 85 medical or osteopathic association or society or licensed
- 86 hospital or medical staff of such hospital in this or any

- 87 other state or territory, whether agreed to voluntarily or
- 88 not, and including, but not limited to, any removal,
- 89 suspension, limitation, or restriction of the person's
- 90 license or staff or hospital privileges, failure to renew
- 91 such privileges or license for cause, or other final
- 92 disciplinary action, if the action was in any way related to
- 93 unprofessional conduct, professional incompetence,
- 94 malpractice or any other violation of any provision of this
- 95 chapter;
- 96 (h) Signing a blank prescription form; or dispensing,
- 97 prescribing, administering or otherwise distributing any
- 98 drug, controlled substance or other treatment without
- 99 sufficient examination including failing to establish a
- 100 valid physician-patient relationship pursuant to section
- 101 334.108, or for other than medically accepted therapeutic or
- 102 experimental or investigative purposes duly authorized by a
- 103 state or federal agency, or not in the course of
- 104 professional practice, or not in good faith to relieve pain
- 105 and suffering, or not to cure an ailment, physical infirmity
- or disease, except as authorized in section 334.104;
- 107 (i) Exercising influence within a physician-patient
- 108 relationship for purposes of engaging a patient in sexual
- 109 activity;
- 110 (j) Being listed on any state or federal sexual
- 111 offender registry;
- 112 (k) Terminating the medical care of a patient without
- 113 adequate notice or without making other arrangements for the
- 114 continued care of the patient;
- 115 (1) Failing to furnish details of a patient's medical
- 116 records to other treating physicians or hospitals upon
- 117 proper request; or failing to comply with any other law
- 118 relating to medical records;

119 (m) Failure of any applicant or licensee to cooperate 120 with the board during any investigation;

- (n) Failure to comply with any subpoena or subpoena
- duces tecum from the board or an order of the board;
- 123 (o) Failure to timely pay license renewal fees
- 124 specified in this chapter;
- (p) Violating a probation agreement, order, or other
- 126 settlement agreement with this board or any other licensing
- 127 agency;
- 128 (q) Failing to inform the board of the physician's
- 129 current residence and business address;
- 130 (r) Advertising by an applicant or licensee which is
- 131 false or misleading, or which violates any rule of the
- board, or which claims without substantiation the positive
- 133 cure of any disease, or professional superiority to or
- 134 greater skill than that possessed by any other physician.
- 135 An applicant or licensee shall also be in violation of this
- 136 provision if the applicant or licensee has a financial
- interest in any organization, corporation or association
- 138 which issues or conducts such advertising;
- 139 (s) Any other conduct that is unethical or
- 140 unprofessional involving a minor;
- 141 (5) Any conduct or practice which is or might be
- 142 harmful or dangerous to the mental or physical health of a
- 143 patient or the public; or incompetency, gross negligence or
- 144 repeated negligence in the performance of the functions or
- 145 duties of any profession licensed or regulated by this
- 146 chapter. For the purposes of this subdivision, "repeated
- 147 negligence" means the failure, on more than one occasion, to
- 148 use that degree of skill and learning ordinarily used under
- 149 the same or similar circumstances by the member of the
- 150 applicant's or licensee's profession;

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151 (6) Violation of, or attempting to violate, directly
152 or indirectly, or assisting or enabling any person to
153 violate, any provision of this chapter or chapter 324, or of
154 any lawful rule or regulation adopted pursuant to this
155 chapter or chapter 324;

- (7) Impersonation of any person holding a certificate of registration or authority, permit or license or allowing any person to use his or her certificate of registration or authority, permit, license or diploma from any school;
- 160 (8) Revocation, suspension, restriction, modification, limitation, reprimand, warning, censure, probation or other 161 final disciplinary action against the holder of or applicant 162 for a license or other right to practice any profession 163 regulated by this chapter by another state, territory, 164 federal agency or country, whether or not voluntarily agreed 165 to by the licensee or applicant, including, but not limited 166 167 to, the denial of licensure, surrender of the license, allowing the license to expire or lapse, or discontinuing or 168 limiting the practice of medicine while subject to an 169 investigation or while actually under investigation by any 170 licensing authority, medical facility, branch of the Armed 171 Forces of the United States of America, insurance company, 172 court, agency of the state or federal government, or 173 174 employer;
- 175 (9) A person is finally adjudged incapacitated or 176 disabled by a court of competent jurisdiction;
- 177 (10) Assisting or enabling any person to practice or
  178 offer to practice any profession licensed or regulated by
  179 this chapter who is not registered and currently eligible to
  180 practice pursuant to this chapter; or knowingly performing
  181 any act which in any way aids, assists, procures, advises,
  182 or encourages any person to practice medicine who is not

- 183 registered and currently eligible to practice pursuant to
- 184 this chapter. A physician who works in accordance with
- 185 standing orders or protocols or in accordance with the
- 186 provisions of section 334.104 shall not be in violation of
- 187 this subdivision;
- 188 (11) Issuance of a certificate of registration or
- 189 authority, permit or license based upon a material mistake
- 190 of fact;
- 191 (12) Failure to display a valid certificate or license
- if so required by this chapter or any rule promulgated
- 193 pursuant to this chapter;
- 194 (13) Violation of the drug laws or rules and
- 195 regulations of this state, including but not limited to any
- 196 provision of chapter 195, any other state, or the federal
- 197 government;
- 198 (14) Knowingly making, or causing to be made, or
- 199 aiding, or abetting in the making of, a false statement in
- 200 any birth, death or other certificate or document executed
- 201 in connection with the practice of the person's profession;
- 202 (15) Knowingly making a false statement, orally or in
- 203 writing to the board;
- 204 (16) Soliciting patronage in person or by agents or
- 205 representatives, or by any other means or manner, under the
- 206 person's own name or under the name of another person or
- 207 concern, actual or pretended, in such a manner as to
- 208 confuse, deceive, or mislead the public as to the need or
- 209 necessity for or appropriateness of health care services for
- 210 all patients, or the qualifications of an individual person
- 211 or persons to diagnose, render, or perform health care
- 212 services;
- 213 (17) Using, or permitting the use of, the person's
- 214 name under the designation of "Doctor", "Dr.", "M.D.", or

"D.O.", or any similar designation with reference to the commercial exploitation of any goods, wares or merchandise;

- 217 (18) Knowingly making or causing to be made a false 218 statement or misrepresentation of a material fact, with 219 intent to defraud, for payment pursuant to the provisions of 220 chapter 208 or chapter 630 or for payment from Title XVIII 221 or Title XIX of the Social Security Act;
- 222 (19) Failure or refusal to properly guard against 223 contagious, infectious or communicable diseases or the 224 spread thereof; maintaining an unsanitary office or performing professional services under unsanitary 225 conditions; or failure to report the existence of an 226 227 unsanitary condition in the office of a physician or in any 228 health care facility to the board, in writing, within thirty 229 days after the discovery thereof;
- 230 (20) Any candidate for licensure or person licensed to 231 practice as a physical therapist, paying or offering to pay a referral fee or, notwithstanding section 334.010 to the 232 233 contrary, practicing or offering to practice professional physical therapy independent of the prescription and 234 direction of a person licensed and registered as a physician 235 and surgeon pursuant to this chapter, as a dentist pursuant 236 to chapter 332, as a podiatrist pursuant to chapter 330, as 237 238 an advanced practice registered nurse under chapter 335, or 239 any licensed and registered physician, dentist, podiatrist, 240 or advanced practice registered nurse practicing in another 241 jurisdiction, whose license is in good standing;
  - (21) Any candidate for licensure or person licensed to practice as a physical therapist, treating or attempting to treat ailments or other health conditions of human beings other than by professional physical therapy and as authorized by sections 334.500 to 334.620;

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247 Any person licensed to practice as a physician or 248 surgeon, requiring, as a condition of the physician-patient 249 relationship, that the patient receive prescribed drugs, 250 devices or other professional services directly from 251 facilities of that physician's office or other entities 252 under that physician's ownership or control. A physician shall provide the patient with a prescription which may be 253 254 taken to the facility selected by the patient and a 255 physician knowingly failing to disclose to a patient on a 256 form approved by the advisory commission for professional 257 physical therapists as established by section 334.625 which is dated and signed by a patient or quardian acknowledging 258 that the patient or guardian has read and understands that 259 260 the physician has a pecuniary interest in a physical therapy 261 or rehabilitation service providing prescribed treatment and 262 that the prescribed treatment is available on a competitive 263 basis. This subdivision shall not apply to a referral by one physician to another physician within a group of 264 265 physicians practicing together; 266

- (23) A pattern of personal use or consumption of any controlled substance unless it is prescribed, dispensed or administered by another physician who is authorized by law to do so;
- 270 (24) Habitual intoxication or dependence on alcohol, 271 evidence of which may include more than one alcohol-related 272 enforcement contact as defined by section 302.525;
- 273 (25) Failure to comply with a treatment program or an
  274 aftercare program entered into as part of a board order,
  275 settlement agreement or licensee's professional health
  276 program;
- 277 (26) Revocation, suspension, limitation, probation, or 278 restriction of any kind whatsoever of any controlled

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substance authority, whether agreed to voluntarily or not, or voluntary termination of a controlled substance authority while under investigation;

- establish an abortion facility, or for a physician to
  perform an abortion in an abortion facility[, if such
  facility comes under the definition of an ambulatory
  surgical center pursuant to sections 197.200 to 197.240, and
  such facility has failed to obtain or renew a license as an
  ambulatory surgical center].
  - 3. Collaborative practice arrangements, protocols and standing orders shall be in writing and signed and dated by a physician prior to their implementation.
- 292 After the filing of such complaint before the 293 administrative hearing commission, the proceedings shall be 294 conducted in accordance with the provisions of chapter 621. 295 Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for 296 297 disciplinary action are met, the board may, singly or in 298 combination, warn, censure or place the person named in the 299 complaint on probation on such terms and conditions as the board deems appropriate for a period not to exceed ten 300 years, or may suspend the person's license, certificate or 301 302 permit for a period not to exceed three years, or restrict 303 or limit the person's license, certificate or permit for an 304 indefinite period of time, or revoke the person's license, 305 certificate, or permit, or administer a public or private reprimand, or deny the person's application for a license, 306 307 or permanently withhold issuance of a license or require the 308 person to submit to the care, counseling or treatment of physicians designated by the board at the expense of the 309 individual to be examined, or require the person to attend 310

such continuing educational courses and pass such examinations as the board may direct.

- 5. In any order of revocation, the board may provide
  that the person may not apply for reinstatement of the
  person's license for a period of time ranging from two to
  seven years following the date of the order of revocation.
  All stay orders shall toll this time period.
- 318 6. Before restoring to good standing a license,
  319 certificate or permit issued pursuant to this chapter which
  320 has been in a revoked, suspended or inactive state for any
  321 cause for more than two years, the board may require the
  322 applicant to attend such continuing medical education
  323 courses and pass such examinations as the board may direct.
- 324 7. In any investigation, hearing or other proceeding to determine a licensee's or applicant's fitness to 325 326 practice, any record relating to any patient of the licensee 327 or applicant shall be discoverable by the board and admissible into evidence, regardless of any statutory or 328 329 common law privilege which such licensee, applicant, record custodian or patient might otherwise invoke. In addition, 330 no such licensee, applicant, or record custodian may 331 withhold records or testimony bearing upon a licensee's or 332 applicant's fitness to practice on the ground of privilege 333 334 between such licensee, applicant or record custodian and a 335 patient.

376.1199. 1. Each health carrier or health benefit plan that offers or issues health benefit plans providing obstetrical/gynecological benefits and pharmaceutical coverage, which are delivered, issued for delivery, continued or renewed in this state on or after January 1, 2002, shall:

7 Notwithstanding the provisions of subsection 4 of section 354.618, provide enrollees with direct access to the 8 9 services of a participating obstetrician, participating gynecologist or participating obstetrician/gynecologist of 10 her choice within the provider network for covered 11 services. The services covered by this subdivision shall be 12 limited to those services defined by the published 13 14 recommendations of the accreditation council for graduate medical education for training an obstetrician, gynecologist 15 16 or obstetrician/gynecologist, including but not limited to diagnosis, treatment and referral for such services. 17 health carrier shall not impose additional co-payments, 18 19 coinsurance or deductibles upon any enrollee who seeks or receives health care services pursuant to this subdivision, 20 unless similar additional co-payments, coinsurance or 21 22 deductibles are imposed for other types of health care services received within the provider network. Nothing in 23 this subsection shall be construed to require a health 24 25 carrier to perform, induce, pay for, reimburse, quarantee, 26 arrange, provide any resources for or refer a patient for an abortion, as defined in section 188.015, other than a 27 spontaneous abortion or to prevent the death of the female 28 upon whom the abortion is performed, or to supersede or 29 30 conflict with section 376.805; and Notify enrollees annually of cancer screenings 31 32 covered by the enrollees' health benefit plan and the 33 current American Cancer Society guidelines for all cancer screenings or notify enrollees at intervals consistent with 34 current American Cancer Society guidelines of cancer 35 screenings which are covered by the enrollees' health 36 benefit plans. The notice shall be delivered by mail unless 37

the enrollee and health carrier have agreed on another

- 39 method of notification; and
- 40 (3) Include coverage for services related to
- 41 diagnosis, treatment and appropriate management of
- 42 osteoporosis when such services are provided by a person
- 43 licensed to practice medicine and surgery in this state, for
- 44 individuals with a condition or medical history for which
- 45 bone mass measurement is medically indicated for such
- 46 individual. In determining whether testing or treatment is
- 47 medically appropriate, due consideration shall be given to
- 48 peer-reviewed medical literature. A policy, provision,
- 49 contract, plan or agreement may apply to such services the
- 50 same deductibles, coinsurance and other limitations as apply
- 51 to other covered services; and
- 52 (4) If the health benefit plan also provides coverage
- for pharmaceutical benefits, provide coverage for
- 54 contraceptives either at no charge or at the same level of
- 55 deductible, coinsurance or co-payment as any other covered
- 56 drug.
- 57 No such deductible, coinsurance or co-payment shall be
- 58 greater than any drug on the health benefit plan's
- 59 formulary. As used in this section, "contraceptive" shall
- 60 include all prescription drugs and devices approved by the
- 61 federal Food and Drug Administration for use as a
- 62 contraceptive, but shall exclude all drugs and devices that
- 63 are intended to induce an abortion, as defined in section
- 64 188.015, which shall be subject to section 376.805. Nothing
- 65 in this subdivision shall be construed to exclude coverage
- 66 for prescription contraceptive drugs or devices ordered by a
- 67 health care provider with prescriptive authority for reasons
- 68 other than contraceptive or abortion purposes.

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2. For the purposes of this section, "health carrier"
and "health benefit plan" shall have the same meaning as
defined in section 376.1350.

- The provisions of this section shall not apply to a 72 supplemental insurance policy, including a life care 73 74 contract, accident-only policy, specified disease policy, hospital policy providing a fixed daily benefit only, 75 76 Medicare supplement policy, long-term care policy, shortterm major medical policies of six months or less duration, 77 78 or any other supplemental policy as determined by the director of the department of commerce and insurance. 79
- 4. Notwithstanding the provisions of subdivision (4) of subsection 1 of this section to the contrary:
- 82 (1) Any health carrier shall offer and issue to any 83 person or entity purchasing a health benefit plan, a health 84 benefit plan that excludes coverage for contraceptives if 85 the use or provision of such contraceptives is contrary to 86 the moral, ethical or religious beliefs or tenets of such 87 person or entity;
  - (2) Upon request of an enrollee who is a member of a group health benefit plan and who states that the use or provision of contraceptives is contrary to his or her moral, ethical or religious beliefs, any health carrier shall issue to or on behalf of such enrollee a policy form that excludes coverage for contraceptives. Any administrative costs to a group health benefit plan associated with such exclusion of coverage not offset by the decreased costs of providing coverage shall be borne by the group policyholder or group plan holder;
- 98 (3) Any health carrier which is owned, operated or 99 controlled in substantial part by an entity that is operated 100 pursuant to moral, ethical or religious tenets that are

101 contrary to the use or provision of contraceptives shall be
102 exempt from the provisions of subdivision (4) of subsection
103 1 of this section. For purposes of this subsection, if new

- premiums are charged for a contract, plan or policy, it
- shall be determined to be a new contract, plan or policy.
- 5. Except for a health carrier that is exempted from
- 107 providing coverage for contraceptives pursuant to this
- 108 section, a health carrier shall allow enrollees in a health
- 109 benefit plan that excludes coverage for contraceptives
- 110 pursuant to subsection 4 of this section to purchase a
- 111 health benefit plan that includes coverage for
- 112 contraceptives.

- 113 6. Any health benefit plan issued pursuant to
- 114 subsection 1 of this section shall provide clear and
- 115 conspicuous written notice on the enrollment form or any
- 116 accompanying materials to the enrollment form and the group
- 117 health benefit plan application and contract:
- 118 (1) Whether coverage for contraceptives is or is not
- 119 included;
- 120 (2) That an enrollee who is a member of a group health
- 121 benefit plan with coverage for contraceptives has the right
- 122 to exclude coverage for contraceptives if such coverage is
- 123 contrary to his or her moral, ethical or religious beliefs;
- 124 and
- 125 (3) That an enrollee who is a member of a group health
- 126 benefit plan without coverage for contraceptives has the
- right to purchase coverage for contraceptives[;
- 128 (4) Whether an optional rider for elective abortions
- has been purchased by the group contract holder pursuant to
- 130 section 376.805; and
- 131 (5) That an enrollee who is a member of a group health
- plan with coverage for elective abortions has the right to

- exclude and not pay for coverage for elective abortions if
- such coverage is contrary to his or her moral, ethical, or
- religious beliefs].
- 136 For purposes of this subsection, if new premiums are charged
- 137 for a contract, plan, or policy, it shall be determined to
- 138 be a new contract, plan, or policy.
- 139 7. Health carriers shall not disclose to the person or
- 140 entity who purchased the health benefit plan the names of
- 141 enrollees who exclude coverage for contraceptives in the
- 142 health benefit plan or who purchase a health benefit plan
- 143 that includes coverage for contraceptives. Health carriers
- 144 and the person or entity who purchased the health benefit
- 145 plan shall not discriminate against an enrollee because the
- 146 enrollee excluded coverage for contraceptives in the health
- 147 benefit plan or purchased a health benefit plan that
- 148 includes coverage for contraceptives.
- 149 8. The departments of health and senior services and
- 150 commerce and insurance may promulgate rules necessary to
- implement the provisions of this section. No rule or
- 152 portion of a rule promulgated pursuant to this section shall
- 153 become effective unless it has been promulgated pursuant to
- 154 chapter 536. Any rule or portion of a rule, as that term is
- defined in section 536.010, that is created under the
- 156 authority delegated in this section shall become effective
- only if it complies with and is subject to all of the
- 158 provisions of chapter 536 and, if applicable, section
- 159 536.028. This section and chapter 536 are nonseverable and
- 160 if any of the powers vested with the general assembly
- 161 pursuant to chapter 536 to review, to delay the effective
- date or to disapprove and annul a rule are subsequently held
- 163 unconstitutional, then the grant of rulemaking authority and

any rule proposed or adopted after August 28, 2001, shall be invalid and void.

491.060. The following persons shall be incompetent to testify:

- 3 (1) A person who is mentally incapacitated at the time 4 of his or her production for examination;
- 5 (2) A child under ten years of age, who appears
- 6 incapable of receiving just impressions of the facts
- 7 respecting which the child is examined, or of relating them
- 8 truly; provided, however, that except as provided in
- 9 subdivision (1) of this section, a child under the age of
- 10 ten who is alleged to be a victim of an offense pursuant to
- 11 chapter 565, 566 or 568 shall be considered a competent
- 12 witness and shall be allowed to testify without
- 13 qualification in any judicial proceeding involving such
- 14 alleged offense. The trier of fact shall be permitted to
- 15 determine the weight and credibility to be given to the
- 16 testimony;
- 17 (3) An attorney, concerning any communication made to
- 18 the attorney by such attorney's client in that relation, or
- 19 such attorney's advice thereon, without the consent of such
- 20 client;
- 21 (4) Any person practicing as a minister of the gospel,
- 22 priest, rabbi or other person serving in a similar capacity
- 23 for any organized religion, concerning a communication made
- 24 to him or her in his or her professional capacity as a
- 25 spiritual advisor, confessor, counselor or comforter;
- 26 (5) A physician licensed pursuant to chapter 334, a
- 27 chiropractor licensed pursuant to chapter 331, a licensed
- 28 psychologist or a dentist licensed pursuant to chapter 332,
- 29 concerning any information which he or she may have acquired
- 30 from any patient while attending the patient in a

31 professional character, and which information was necessary

- 32 to enable him or her to prescribe and provide treatment for
- 33 such patient as a physician, chiropractor, psychologist or
- 34 dentist;
- 35 (6) Any employee of an alternatives to abortion
- 36 agency, as defined in section 188.125, concerning a
- 37 communication made to him or her in his or her professional
- 38 capacity by an individual who presents themselves to the
- 39 agency for the purpose of seeking an alternative to an
- 40 abortion, unless such individual consents to the disclosure
- 41 of the communication.
  - 556.061. In this code, unless the context requires a
- 2 different definition, the following terms shall mean:
- 3 (1) "Access", to instruct, communicate with, store
- 4 data in, retrieve or extract data from, or otherwise make
- 5 any use of any resources of, a computer, computer system, or
- 6 computer network;
- 7 (2) "Affirmative defense":
- 8 (a) The defense referred to is not submitted to the
- 9 trier of fact unless supported by evidence; and
- 10 (b) If the defense is submitted to the trier of fact
- 11 the defendant has the burden of persuasion that the defense
- 12 is more probably true than not;
- 13 (3) "Burden of injecting the issue":
- 14 (a) The issue referred to is not submitted to the
- 15 trier of fact unless supported by evidence; and
- (b) If the issue is submitted to the trier of fact any
- 17 reasonable doubt on the issue requires a finding for the
- 18 defendant on that issue;
- 19 (4) "Commercial film and photographic print
- 20 processor", any person who develops exposed photographic
- 21 film into negatives, slides or prints, or who makes prints

22 from negatives or slides, for compensation. The term

- 23 commercial film and photographic print processor shall
- 24 include all employees of such persons but shall not include
- 25 a person who develops film or makes prints for a public
- 26 agency;
- 27 (5) "Computer", the box that houses the central
- 28 processing unit (CPU), along with any internal storage
- 29 devices, such as internal hard drives, and internal
- 30 communication devices, such as internal modems capable of
- 31 sending or receiving electronic mail or fax cards, along
- 32 with any other hardware stored or housed internally. Thus,
- 33 computer refers to hardware, software and data contained in
- 34 the main unit. Printers, external modems attached by cable
- 35 to the main unit, monitors, and other external attachments
- 36 will be referred to collectively as peripherals and
- 37 discussed individually when appropriate. When the computer
- 38 and all peripherals are referred to as a package, the term
- 39 "computer system" is used. Information refers to all the
- 40 information on a computer system including both software
- 41 applications and data;
- 42 (6) "Computer equipment", computers, terminals, data
- 43 storage devices, and all other computer hardware associated
- 44 with a computer system or network;
- 45 (7) "Computer hardware", all equipment which can
- 46 collect, analyze, create, display, convert, store, conceal
- 47 or transmit electronic, magnetic, optical or similar
- 48 computer impulses or data. Hardware includes, but is not
- 49 limited to, any data processing devices, such as central
- 50 processing units, memory typewriters and self-contained
- 51 laptop or notebook computers; internal and peripheral
- 52 storage devices, transistor-like binary devices and other
- 53 memory storage devices, such as floppy disks, removable

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54 disks, compact disks, digital video disks, magnetic tape,

55 hard drive, optical disks and digital memory; local area

56 networks, such as two or more computers connected together

57 to a central computer server via cable or modem; peripheral

58 input or output devices, such as keyboards, printers,

59 scanners, plotters, video display monitors and optical

60 readers; and related communication devices, such as modems,

61 cables and connections, recording equipment, RAM or ROM

62 units, acoustic couplers, automatic dialers, speed dialers,

63 programmable telephone dialing or signaling devices and

64 electronic tone-generating devices; as well as any devices,

65 mechanisms or parts that can be used to restrict access to

computer hardware, such as physical keys and locks;

- (8) "Computer network", two or more interconnected computers or computer systems;
- (9) "Computer program", a set of instructions,
  statements, or related data that directs or is intended to
  direct a computer to perform certain functions;
- (10) "Computer software", digital information which
  can be interpreted by a computer and any of its related
  components to direct the way they work. Software is stored
  in electronic, magnetic, optical or other digital form. The
  term commonly includes programs to run operating systems and
  applications, such as word processing, graphic, or
- 78 spreadsheet programs, utilities, compilers, interpreters and
  79 communications programs;
- 80 (11) "Computer-related documentation", written, 81 recorded, printed or electronically stored material which 82 explains or illustrates how to configure or use computer 83 hardware, software or other related items;
- 84 (12) "Computer system", a set of related, connected or 85 unconnected, computer equipment, data, or software;

- 86 (13) "Confinement":
- 87 (a) A person is in confinement when such person is
- 88 held in a place of confinement pursuant to arrest or order
- 89 of a court, and remains in confinement until:
- 90 a. A court orders the person's release; or
- 91 b. The person is released on bail, bond, or
- 92 recognizance, personal or otherwise; or
- 93 c. A public servant having the legal power and duty to
- 94 confine the person authorizes his release without guard and
- 95 without condition that he return to confinement;
- 96 (b) A person is not in confinement if:
- 97 a. The person is on probation or parole, temporary or
- 98 otherwise; or
- b. The person is under sentence to serve a term of
- 100 confinement which is not continuous, or is serving a
- 101 sentence under a work-release program, and in either such
- 102 case is not being held in a place of confinement or is not
- 103 being held under guard by a person having the legal power
- 104 and duty to transport the person to or from a place of
- 105 confinement;
- 106 (14) "Consent": consent or lack of consent may be
- 107 expressed or implied. Assent does not constitute consent if:
- 108 (a) It is given by a person who lacks the mental
- 109 capacity to authorize the conduct charged to constitute the
- 110 offense and such mental incapacity is manifest or known to
- 111 the actor; or
- (b) It is given by a person who by reason of youth,
- 113 mental disease or defect, intoxication, a drug-induced
- 114 state, or any other reason is manifestly unable or known by
- the actor to be unable to make a reasonable judgment as to
- 116 the nature or harmfulness of the conduct charged to
- 117 constitute the offense; or

118 (c) It is induced by force, duress or deception;

- 119 (15) "Controlled substance", a drug, substance, or
- 120 immediate precursor in schedules I through V as defined in
- 121 chapter 195;
- 122 (16) "Criminal negligence", failure to be aware of a
- 123 substantial and unjustifiable risk that circumstances exist
- 124 or a result will follow, and such failure constitutes a
- 125 gross deviation from the standard of care which a reasonable
- 126 person would exercise in the situation;
- 127 (17) "Custody", a person is in custody when he or she
- 128 has been arrested but has not been delivered to a place of
- 129 confinement;
- 130 (18) "Damage", when used in relation to a computer
- 131 system or network, means any alteration, deletion, or
- destruction of any part of the computer system or network;
- 133 (19) "Dangerous felony", the felonies of arson in the
- 134 first degree, assault in the first degree, attempted rape in
- 135 the first degree if physical injury results, attempted
- 136 forcible rape if physical injury results, attempted sodomy
- in the first degree if physical injury results, attempted
- 138 forcible sodomy if physical injury results, rape in the
- 139 first degree, forcible rape, sodomy in the first degree,
- 140 forcible sodomy, assault in the second degree if the victim
- 141 of such assault is a special victim as defined in
- 142 subdivision (14) of section 565.002, kidnapping in the first
- 143 degree, kidnapping, murder in the second degree, assault of
- 144 a law enforcement officer in the first degree, domestic
- 145 assault in the first degree, elder abuse in the first
- 146 degree, robbery in the first degree, armed criminal action,
- 147 conspiracy to commit an offense when the offense is a
- 148 dangerous felony, vehicle hijacking when punished as a class
- 149 A felony, statutory rape in the first degree when the victim

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150 is a child less than twelve years of age at the time of the 151 commission of the act giving rise to the offense, statutory 152 sodomy in the first degree when the victim is a child less 153 than twelve years of age at the time of the commission of the act giving rise to the offense, child molestation in the 154 155 first or second degree, abuse of a child if the child dies as a result of injuries sustained from conduct chargeable 156 157 under section 568.060, child kidnapping, parental kidnapping committed by detaining or concealing the whereabouts of the 158 159 child for not less than one hundred twenty days under section 565.153, and an "intoxication-related traffic 160 offense" or "intoxication-related boating offense" if the 161 person is found to be a "habitual offender" or "habitual 162 163 boating offender" as such terms are defined in section 164 577.001; 165 "Dangerous instrument", any instrument, article or substance, which, under the circumstances in which it is 166 used, is readily capable of causing death or other serious 167 168 physical injury; "Data", a representation of information, facts, 169 170 knowledge, concepts, or instructions prepared in a formalized or other manner and intended for use in a 171 computer or computer network. Data may be in any form 172 173 including, but not limited to, printouts, microfiche, 174 magnetic storage media, punched cards and as may be stored 175 in the memory of a computer; "Deadly weapon", any firearm, loaded or unloaded, 176 (22)or any weapon from which a shot, readily capable of 177 producing death or serious physical injury, may be 178 179 discharged, or a switchblade knife, dagger, billy club, blackjack or metal knuckles;

- 181 (23) "Digital camera", a camera that records images in 182 a format which enables the images to be downloaded into a 183 computer;
- 184 (24) "Disability", a mental, physical, or
- 185 developmental impairment that substantially limits one or
- 186 more major life activities or the ability to provide
- 187 adequately for one's care or protection, whether the
- 188 impairment is congenital or acquired by accident, injury or
- 189 disease, where such impairment is verified by medical
- 190 findings;
- 191 (25) "Elderly person", a person sixty years of age or
- 192 older;
- 193 (26) "Felony", an offense so designated or an offense
- 194 for which persons found guilty thereof may be sentenced to
- 195 death or imprisonment for a term of more than one year;
- 196 (27) "Forcible compulsion" either:
- 197 (a) Physical force that overcomes reasonable
- 198 resistance; or
- 199 (b) A threat, express or implied, that places a person
- 200 in reasonable fear of death, serious physical injury or
- 201 kidnapping of such person or another person;
- 202 (28) "Incapacitated", a temporary or permanent
- 203 physical or mental condition in which a person is
- 204 unconscious, unable to appraise the nature of his or her
- 205 conduct, or unable to communicate unwillingness to an act;
- 206 (29) "Infraction", a violation defined by this code or
- 207 by any other statute of this state if it is so designated or
- 208 if no sentence other than a fine, or fine and forfeiture or
- 209 other civil penalty, is authorized upon conviction;
- 210 (30) "Inhabitable structure", a vehicle, vessel or
- 211 structure:

212 (a) Where any person lives or carries on business or

- 213 other calling; or
- 214 (b) Where people assemble for purposes of business,
- 215 government, education, religion, entertainment, or public
- 216 transportation; or
- 217 (c) Which is used for overnight accommodation of
- 218 persons.
- 219 Any such vehicle, vessel, or structure is inhabitable
- 220 regardless of whether a person is actually present. If a
- 221 building or structure is divided into separately occupied
- units, any unit not occupied by the actor is an inhabitable
- 223 structure of another;
- 224 (31) "Knowingly", when used with respect to:
- 225 (a) Conduct or attendant circumstances, means a person
- 226 is aware of the nature of his or her conduct or that those
- 227 circumstances exist; or
- (b) A result of conduct, means a person is aware that
- 229 his or her conduct is practically certain to cause that
- 230 result;
- 231 (32) "Law enforcement officer", any public servant
- 232 having both the power and duty to make arrests for
- violations of the laws of this state, and federal law
- 234 enforcement officers authorized to carry firearms and to
- 235 make arrests for violations of the laws of the United States;
- 236 (33) "Misdemeanor", an offense so designated or an
- 237 offense for which persons found quilty thereof may be
- 238 sentenced to imprisonment for a term of which the maximum is
- 239 one year or less;
- 240 (34) "Of another", property that any entity, including
- 241 but not limited to any natural person, corporation, limited
- 242 liability company, partnership, association, governmental

243 subdivision or instrumentality, other than the actor, has a

- 244 possessory or proprietary interest therein, except that
- 245 property shall not be deemed property of another who has
- 246 only a security interest therein, even if legal title is in
- 247 the creditor pursuant to a conditional sales contract or
- 248 other security arrangement;
- 249 (35) "Offense", any felony or misdemeanor;
- 250 (36) "Person", includes a human being from the moment
- of conception as defined in section 188.015;
- 252 (37) "Physical injury", slight impairment of any
- 253 function of the body or temporary loss of use of any part of
- 254 the body;
- 255 [(37)] (38) "Place of confinement", any building or
- 256 facility and the grounds thereof wherein a court is legally
- 257 authorized to order that a person charged with or convicted
- 258 of a crime be held;
- 259 [(38)] (39) "Possess" or "possessed", having actual or
- 260 constructive possession of an object with knowledge of its
- 261 presence. A person has actual possession if such person has
- the object on his or her person or within easy reach and
- 263 convenient control. A person has constructive possession if
- 264 such person has the power and the intention at a given time
- 265 to exercise dominion or control over the object either
- 266 directly or through another person or persons. Possession
- 267 may also be sole or joint. If one person alone has
- 268 possession of an object, possession is sole. If two or more
- 269 persons share possession of an object, possession is joint;
- 270 [(39)] (40) "Property", anything of value, whether
- 271 real or personal, tangible or intangible, in possession or
- 272 in action;
- [(40)] (41) "Public servant", any person employed in
- 274 any way by a government of this state who is compensated by

275 the government by reason of such person's employment, any 276 person appointed to a position with any government of this 277 state, or any person elected to a position with any government of this state. It includes, but is not limited 278 279 to, legislators, jurors, members of the judiciary and law 280 enforcement officers. It does not include witnesses; [(41)] (42) "Purposely", when used with respect to a 281 282 person's conduct or to a result thereof, means when it is 283 his or her conscious object to engage in that conduct or to 284 cause that result; [(42)] (43) "Recklessly", consciously disregarding a 285 substantial and unjustifiable risk that circumstances exist 286 or that a result will follow, and such disregard constitutes 287 288 a gross deviation from the standard of care which a 289 reasonable person would exercise in the situation; 290 [(43)] (44) "Serious emotional injury", an injury that 291 creates a substantial risk of temporary or permanent medical or psychological damage, manifested by impairment of a 292 293 behavioral, cognitive or physical condition. 294 emotional injury shall be established by testimony of qualified experts upon the reasonable expectation of 295 probable harm to a reasonable degree of medical or 296 297 psychological certainty; 298 [(44)] (45) "Serious physical injury", physical injury 299 that creates a substantial risk of death or that causes 300 serious disfigurement or protracted loss or impairment of 301 the function of any part of the body; 302 [(45)] (46) "Services", when used in relation to a 303 computer system or network, means use of a computer, 304 computer system, or computer network and includes, but is 305 not limited to, computer time, data processing, and storage or retrieval functions; 306

[(46)] (47) "Sexual orientation", male or female 307 308 heterosexuality, homosexuality or bisexuality by 309 inclination, practice, identity or expression, or having a self-image or identity not traditionally associated with 310 one's gender; 311 312 [(47)] (48) "Vehicle", a self-propelled mechanical device designed to carry a person or persons, excluding 313 314 vessels or aircraft; 315 [(48)] (49) "Vessel", any boat or craft propelled by a 316 motor or by machinery, whether or not such motor or machinery is a principal source of propulsion used or 317 capable of being used as a means of transportation on water, 318 or any boat or craft more than twelve feet in length which 319 320 is powered by sail alone or by a combination of sail and 321 machinery, and used or capable of being used as a means of 322 transportation on water, but not any boat or craft having, 323 as the only means of propulsion, a paddle or oars; [(49)] **(50)** "Voluntary act": 324 325 A bodily movement performed while conscious as a result of effort or determination. Possession is a 326 voluntary act if the possessor knowingly procures or 327 receives the thing possessed, or having acquired control of 328 329 it was aware of his or her control for a sufficient time to 330 have enabled him or her to dispose of it or terminate his or 331 her control: or 332 (b) An omission to perform an act of which the actor 333 is physically capable. A person is not guilty of an offense based solely upon an omission to perform an act unless the 334 law defining the offense expressly so provides, or a duty to 335 336 perform the omitted act is otherwise imposed by law; 337 [(50)] (51) "Vulnerable person", any person in the

custody, care, or control of the department of mental health

339 who is receiving services from an operated, funded,

- 340 licensed, or certified program.
  - 562.031. 1. A person is not relieved of criminal
  - 2 liability for conduct because he or she engages in such
  - 3 conduct under a mistaken belief of fact or law unless such
  - 4 mistake negatives the existence of the mental state required
  - 5 by the offense.
  - 6 2. A person is not relieved of criminal liability for
  - 7 conduct because he or she believes his or her conduct does
  - 8 not constitute an offense unless his or her belief is
  - 9 reasonable and:
- 10 (1) The offense is defined by an administrative
- 11 regulation or order which is not known to him or her and has
- 12 not been published or otherwise made reasonably available to
- 13 him or her, and he or she could not have acquired such
- 14 knowledge by the exercise of due diligence pursuant to facts
- 15 known to him or her; or
- 16 (2) He or she acts in reasonable reliance upon an
- 17 official statement of the law, afterward determined to be
- 18 invalid or erroneous, contained in:
- 19 (a) A statute:

- (b) An opinion or order of an appellate court; or
- 21 (c) An official interpretation of the statute,
- 22 regulation or order defining the offense made by a public
- 23 official or agency legally authorized to interpret such
- 24 statute, regulation or order.
- 25 3. The burden of injecting the issue of reasonable
- 26 belief that conduct does not constitute an offense under
- 27 subdivisions (1) and (2) of subsection 2 of this section is
- 28 on the defendant.
- 4. For purposes of this section, reliance is
- 30 unreasonable if based upon an official statement permitting

- the unjustified homicide of an unborn child as defined in section 1.205.
- 562.071. 1. It is an affirmative defense that the
- 2 defendant engaged in the conduct charged to constitute an
- 3 offense because he or she was coerced to do so, by the use
- 4 of, or threatened imminent use of, unlawful physical force
- 5 upon him or her or a third person, which force or threatened
- 6 force a person of reasonable firmness in his situation would
- 7 have been unable to resist.
- 8 2. The defense of "duress" as defined in subsection 1
- 9 of this section is not available:
- 10 (1) As to the crime of murder, except murder by
- 11 abortion as defined in section 188.015;
- 12 (2) As to any offense when the defendant recklessly
- 13 places himself or herself in a situation in which it is
- 14 probable that he or she will be subjected to the force or
- 15 threatened force described in subsection 1 of this section.
  - 563.026. 1. Unless inconsistent with other provisions
- 2 of this chapter defining justifiable use of physical force,
- 3 or with some other provision of law, conduct which would
- 4 otherwise constitute any offense [other than a class A
- 5 felony or murder] is justifiable and not criminal when it is
- 6 necessary as an emergency measure to avoid an imminent
- 7 public or private injury which is about to occur by reason
- 8 of a situation occasioned or developed through no fault of
- 9 the actor, and which is of such gravity that, according to
- 10 ordinary standards of intelligence and morality, the
- 11 desirability of avoiding the injury outweighs the
- 12 desirability of avoiding the injury sought to be prevented
- 13 by the statute defining the offense charged.
- 14 2. The necessity and justifiability of conduct under
- 15 subsection 1 of this section may not rest upon

- 16 considerations pertaining only to the morality and
- 17 advisability of the statute, either in its general
- 18 application or with respect to its application to a
- 19 particular class of cases arising thereunder. Whenever
- 20 evidence relating to the defense of justification under this
- 21 section is offered, the court shall rule as a matter of law
- 22 whether the claimed facts and circumstances would, if
- 23 established, constitute a justification.
- 3. The defense of justification under this section is
- 25 an affirmative defense.
  - 565.015. 1. This section shall be known and may be
- cited as the "Abolition of Abortion in Missouri Act".
- 3 2. It is the intent of the general assembly to provide
- 4 to unborn children the equal protection of the laws of this
- 5 state; to establish that a living human child, from the
- 6 moment of conception, is entitled to the same rights,
- 7 powers, privileges, justice, and protections as are secured
- 8 or granted by the laws of this state to any other human
- 9 person; and to treat as void and of no effect any and all
- 10 federal acts, laws, treaties, decisions, orders, rules, or
- 11 regulations that would deprive an unborn child of the right
- 12 to life or prohibit the protection of such right.
- 13 3. The attorney general and prosecuting and circuit
- 14 attorneys shall ensure the enforcement of this chapter in
- 15 relation to abortion regardless of any contrary or
- 16 conflicting federal acts, laws, treaties, decisions, orders,
- 17 rules, or regulations. The attorney general shall have
- 18 concurrent original jurisdiction throughout the state, along
- 19 with each prosecuting and circuit attorney within their
- 20 respective jurisdictions, to commence actions to ensure the
- 21 enforcement of this chapter in relation to abortion.

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22 This chapter shall be enforced in relation to 23 abortion regardless of any contrary or conflicting federal 24 acts, laws, treaties, decisions, orders, rules, or 25 regulations. Any court decision purporting to enjoin this 26 state from protecting innocent human life from the moment of 27 conception shall be treated as nonauthoritative, void, and of no force. No government agency or official of this 28 29 state, including any sheriff, deputy sheriff, or other law 30 enforcement officer, shall give force or effect to any court 31 order that conflicts with this section. Cooperative 32 agreements with federal agencies notwithstanding, no law enforcement agency or law enforcement officer in this state 33 34 shall assist or cooperate in any way with the arrest or imprisonment of any government official or individual who 35 36 complies with this section and refuses to comply with any contrary court order. Such contrary orders shall include, 37 but not be limited to, any order to levy upon property, 38 seize bank accounts, arrest the person, or serve process for 39 40 the purpose of causing any person to violate this section, 41 or for the purpose of punishing any person for the failure 42 to comply with an order contrary to this section. A federal officer or agent who arrests any Missouri government 43 44 official for compliance with this section shall be subject 45 to arrest by Missouri law enforcement. 46

5. In any investigation or proceeding brought to enforce the provisions of this chapter relating to abortion, as in all other criminal cases, a court on motion of the prosecuting or circuit attorney may order that a witness shall not be excused from giving testimony or producing any papers, documents, or things, on the grounds that such testimony may tend to incriminate or subject the witness to a penalty or forfeiture; but such witness shall not be

- 54 prosecuted or subjected to criminal penalty or forfeiture
- 55 for or on account of any transaction, matter, or thing
- 56 concerning which the witness has been ordered to testify.
- 57 The prosecuting or circuit attorney shall also have
- authority to grant such immunity to a witness who
- 59 voluntarily agrees to give testimony or produce any papers,
- 60 documents, or things. The witness may nevertheless be
- 61 prosecuted for failing to comply with the order to answer,
- 62 perjury, or the giving of false evidence.
- 6. A woman upon whom an abortion is performed or
- 64 induced or attempted or intended to be performed or induced
- 65 shall not be held criminally responsible for the death or
- 66 attempted death of her child if the woman has been coerced,
- 67 through physical or other means, to undergo the abortion or
- 68 if, as a result of mental disease or defect, she was
- 69 incapable of knowing and appreciating the nature, quality,
- 70 or wrongfulness of her conduct, as described in section
- 71 562.086.
  - 595.027. 1. Upon request by the department for
- 2 verification of injuries of victims, medical providers shall
- 3 submit the information requested by the department within
- 4 twenty working days of the request at no cost to the fund.
- 5 2. For purposes of this section, "medical providers"
- 6 means physicians, dentists, clinical psychologists,
- 7 optometrists, podiatrists, registered nurses, physician's
- 8 assistants, chiropractors, physical therapists, hospitals,
- 9 ambulatory surgical centers, [abortion facilities,] and
- 10 nursing homes.
- 11 3. Failure to submit the information as required by
- 12 this section shall be an infraction.
  - 595.120. 1. Prior to January 1, 2019, the department
- 2 of public safety shall create a poster that provides

- 3 information regarding the national human trafficking
- 4 resource center hotline. The poster shall be no smaller
- 5 than eight and one-half inches by eleven inches in size and
- 6 shall include a statement in substantially the following
- 7 form:
- 8 "If you or someone you know is being forced to
- 9 engage in any activity and cannot leave whether
- it is commercial sex, housework, farm work, or any
- other activity call the National Human
- 12 Trafficking Resource Center Hotline at 1-888-373-
- 7888 or text 233733 (BEFREE) or visit the
- 14 following website:
- 15 www.traffickingresourcecenter.org to access help
- and services. Victims of human trafficking are
- 17 protected under U.S. and Missouri law.
- 18 The toll-free hotline is:
- Available 24 hours a day, 7 days a week
- Operated by a nonprofit, nongovernmental
- 21 organization
- 22 Anonymous and confidential
- Accessible in 170 languages
- 24 Able to provide help, referral to services,
- training, and general information.".
- 26 The statement shall appear on each poster in English,
- 27 Spanish, and, for each county, any other language required
- 28 for voting materials in that county under Section 1973 of
- 29 the Voting Rights Act of 1965, 42 U.S.C. Section 1973, as
- 30 amended. In addition to the national human trafficking
- 31 resource center hotline, the statement may contain any
- 32 additional hotlines regarding human trafficking for access
- 33 to help and services.

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Beginning March 1, 2019, the human trafficking
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    hotline poster designed by the department of public safety
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    shall be displayed in a conspicuous place in or near the
    bathrooms or near the entrance of each of the following
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    establishments:
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          (1) Hotels, motels, or other establishments that have
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    been cited as a public nuisance for prostitution under
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    section 567.080;
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               Strip clubs or other sexually oriented businesses;
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               Private clubs that have a liquor permit for on-
    premises consumption, do not hold themselves out to be food
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    service establishments, and are not affiliated with any
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    nonprofit fraternal, athletic, religious, or veteran
    organizations;
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               Airports;
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          (4)
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               Train stations that serve passengers;
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               Emergency rooms within general acute care
    hospitals;
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          (7)
               Urgent care centers;
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          (8)
               Privately operated job recruitment centers;
               Businesses or establishments that offer massage or
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          (9)
    body work services for compensation by individuals who are
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    not licensed under section 324.265;
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          (10) Women's health centers;
                [Abortion facilities as defined in section
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          (11)
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    188.015;
                 Family planning clinics;
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          (12)]
          [(13)] (12) Maternity homes as defined in section
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    135.600;
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          [(14)] (13) Pregnancy resource centers as defined in
    section 135.630;
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          [(15)] (14) Bus stations;
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66 [(16)] (15) Truck stops. For the purposes of this section, "truck stops" shall mean privately owned and 67 68 operated facilities that provide food, fuel, shower or other sanitary facilities, and lawful overnight parking; and 69 [(17)] **(16)** Roadside rest areas. 70

- The department of public safety shall make the poster available for print on its public website. To obtain a copy of the poster, the owners or operators of an establishment required to post the human trafficking hotline notice under subsection 2 of this section may print the online poster using the online link or request that the poster be mailed for the cost of printing and first class postage.
- Any owner or operator of an establishment required 4. to post the human trafficking hotline notice under 80 subsection 2 of this section who fails to comply with the 81 requirement shall receive a written warning for the first 82 violation and may be guilty of an infraction for any 83 84 subsequent violation.

[188.017. 1. This section shall be known and may be cited as the "Right to Life of the Unborn Child Act".

- Notwithstanding any other provision of law to the contrary, no abortion shall be performed or induced upon a woman, except in cases of medical emergency. Any person who knowingly performs or induces an abortion of an unborn child in violation of this subsection shall be guilty of a class B felony, as well as subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of this subsection shall not be prosecuted for a conspiracy to violate the provisions of this subsection.
- It shall be an affirmative defense for any person alleged to have violated the provisions of subsection 2 of this section that the person performed or induced an abortion because of a medical emergency. The defendant

shall have the burden of persuasion that the defense is more probably true than not.

- 4. The enactment of this section shall only become effective upon notification to the revisor of statutes by an opinion by the attorney general of Missouri, a proclamation by the governor of Missouri, or the adoption of a concurrent resolution by the Missouri general assembly that:
- (1) The United States Supreme Court has overruled, in whole or in part, Roe v. Wade, 410 U.S. 113 (1973), restoring or granting to the state of Missouri the authority to regulate abortion to the extent set forth in this section, and that as a result, it is reasonably probable that this section would be upheld by the court as constitutional;
- (2) An amendment to the Constitution of the United States has been adopted that has the effect of restoring or granting to the state of Missouri the authority to regulate abortion to the extent set forth in this section; or
- (3) The United States Congress has enacted a law that has the effect of restoring or granting to the state of Missouri the authority to regulate abortion to the extent set forth in this section.]

[188.018. If any one or more provisions, sections, subsections, sentences, clauses, phrases, or words of this chapter or the application thereof to any person, circumstance, or period of gestational age is found to be unenforceable, unconstitutional, or invalid by a court of competent jurisdiction, the same is hereby declared to be severable and the balance of this chapter shall remain effective notwithstanding such unenforceability, unconstitutionality, or invalidity. The general assembly hereby declares that it would have passed each provision, section, subsection, sentence, clause, phrase, or word thereof, irrespective of the fact that any one or more provisions, sections, subsections, sentences, clauses, phrases, or words of this chapter, or the application of this chapter to any person, circumstance, or period of gestational age, would be declared unenforceable, unconstitutional, or invalid.]

[188.021. 1. When RU-486 (mifepristone) or any drug or chemical is used for the purpose of inducing an abortion, the initial dose of the drug or chemical shall be administered in the same room and in the physical presence of the physician who prescribed, dispensed, or otherwise provided the drug or chemical to the patient. The physician inducing the abortion,

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or a person acting on such physician's behalf, shall make all reasonable efforts to ensure that the patient returns after the administration or use of RU-486 or any drug or chemical for a follow-up visit unless such termination of the pregnancy has already been confirmed and the patient's medical condition has been assessed by a licensed physician prior to discharge.

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- 2. When the Food and Drug Administration label of any drug or chemical used for the purpose of inducing an abortion includes any clinical study in which more than one percent of those administered the drug or chemical required surgical intervention after its administration, no physician may prescribe or administer such drug or chemical to any patient without first obtaining approval from the department of health and senior services of a complication plan from the physician for administration of the drug or chemical to any patient. The complication plan shall include any information deemed necessary by the department to ensure the safety of any patient suffering complications as a result of the administration of the drug or chemical in question. No complication plan shall be required where the patient is administered the drug in a medical emergency at a hospital and is then treated as an inpatient at a hospital under medical monitoring by the hospital until the abortion is completed.
- The department may adopt rules, 3. regulations, and standards governing complication plans to ensure that patients undergoing abortions induced by drugs or chemicals have access to safe and reliable care. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after October 24, 2017, shall be invalid and void.]

[188.025. Every abortion performed at sixteen weeks gestational age or later shall be performed in a hospital.]

[188.026. 1. This section and sections 188.056, 188.057, and 188.058 shall be known and

may be cited as the "Missouri Stands for the Unborn Act".

- 2. In Roe v. Wade, 410 U.S. 113 (1973), certain information about the development of the unborn child, human pregnancy, and the effects of abortion was either not part of the record or was not available at the time. Since 1973, advances in medical and scientific technology have greatly expanded our knowledge of prenatal life and the effects of abortion on women. The general assembly of this state finds:
- (1) At conception, a new genetically distinct human being is formed;
- (2) The fact that the life of an individual human being begins at conception has long been recognized in Missouri law: "[T]he child is, in truth, alive from the moment of conception". State v. Emerich, 13 Mo. App. 492, 495 (1883), affirmed, 87 Mo. 110 (1885). Under section 1.205, the general assembly has recognized that the life of each human being begins at conception and that unborn children have protectable interests in life, health, and well-being;
- (3) The first prohibition of abortion in Missouri was enacted in 1825. Since then, the repeal and reenactment of prohibitions of abortion have made distinctions with respect to penalties for performing or inducing abortion on the basis of "quickening"; however, the unborn child was still protected from conception onward;
- (4) In ruling that Missouri's prohibition on abortion was constitutional in 1972, the Missouri supreme court accepted as a stipulation of the parties that "'[i]nfant Doe, Intervenor Defendant in this case, and all other unborn children have all the qualities and attributes of adult human persons differing only in age or maturity. Medically, human life is a continuum from conception to death.'" Rodgers v. Danforth, 486 S.W.2d 258, 259 (1972);
- (5) In Webster v. Reproductive Health Services, 492 U.S. 490 (1989), the Supreme Court, while considering the "preamble" that set forth "findings" in section 1.205, stated: "We think the extent to which the preamble's language might be used to interpret other state statutes or regulations is something that only the courts of Missouri can definitively decide. State law has offered protections to unborn children in tort and probate law". Id. at 506. Since Webster, Missouri courts have construed section 1.205 and have consistently found that an unborn child is a person for purposes of Missouri's homicide and assault laws when the unborn child's mother was killed or assaulted by another person. Section 1.205 has even been

found applicable to the manslaughter of an unborn child who was eight weeks gestational age or earlier. State v. Harrison, 390 S.W.3d 927 (Mo. Ct. App. 2013);

- (6) In medicine, a special emphasis is placed on the heartbeat. The heartbeat is a discernible sign of life at every stage of human existence. During the fifth week of gestational age, an unborn child's heart begins to beat and blood flow begins during the sixth week;
- (7) Depending on the ultrasound equipment being used, the unborn child's heartbeat can be visually detected as early as six to eight weeks gestational age. By about twelve weeks gestational age, the unborn child's heartbeat can consistently be made audible through the use of a handheld Doppler fetal heart rate device;
- (8) Confirmation of a pregnancy can be indicated through the detection of the unborn child's heartbeat, while the absence of a heartbeat can be an indicator of the death of the unborn child if the child has reached the point of development when a heartbeat should be detectable;
- (9) Heart rate monitoring during pregnancy and labor is utilized to measure the heart rate and rhythm of the unborn child, at an average rate between one hundred ten and one hundred sixty beats per minute, and helps determine the health of the unborn child;
- The Supreme Court in Roe discussed (10)"the difficult question of when life begins" and wrote: "[p]hysicians and their scientific colleagues have regarded [quickening] with less interest and have tended to focus either upon conception, upon live birth, or upon the interim point at which the fetus becomes 'viable', that is, potentially able to live outside the mother's womb, albeit with artificial aid". Roe, 410 U.S. at 160. Today, however, physicians' and scientists' interests on life in the womb also focus on other markers of development in the unborn child, including, but not limited to, presence of a heartbeat, brain development, a viable pregnancy or viable intrauterine pregnancy during the first trimester of pregnancy, and the ability to experience pain;
- (11) In Planned Parenthood of Central Missouri v. Danforth, 428 U.S. 52 (1976), the Supreme Court noted that "we recognized in Roe that viability was a matter of medical judgment, skill, and technical ability, and we preserved the flexibility of the term". Id. at 64. Due to advances in medical technology and diagnoses, present-day physicians and scientists now describe the viability of an unborn child in an

additional manner, by determining whether there is a viable pregnancy or viable intrauterine pregnancy during the first trimester of pregnancy;

- While the overall risk of miscarriage (12)after clinical recognition of pregnancy is twelve to fifteen percent, the incidence decreases significantly if cardiac activity in the unborn child has been confirmed. The detection of a heartbeat in an unborn child is a reliable indicator of a viable pregnancy and that the unborn child will likely survive to birth, especially if presenting for a prenatal visit at eight weeks gestational age or later. For asymptomatic women attending a first prenatal visit between six and eleven weeks gestational age where a heartbeat was confirmed through an ultrasound, the subsequent risk of miscarriage is one and six-tenths percent. Although the risk is higher at six weeks gestational age at nine and four-tenths percent, it declines rapidly to one and five-tenths percent at eight weeks gestational age, and less than one percent at nine weeks gestational age or later;
- (13) The presence of a heartbeat in an unborn child represents a more definable point of ascertaining survivability than the ambiguous concept of viability that has been adopted by the Supreme Court, especially since if a heartbeat is detected at eight weeks gestational age or later in a normal pregnancy, there is likely to be a viable pregnancy and there is a high probability that the unborn child will survive to birth;
- (14) The placenta begins developing during the early first trimester of pregnancy and performs a respiratory function by making oxygen supply to and carbon dioxide removal from the unborn child possible later in the first trimester and throughout the second and third trimesters of pregnancy;
- (15) By the fifth week of gestation, the development of the brain of the unborn child is underway. Brain waves have been measured and recorded as early as the eighth week of gestational age in children who were removed during an ectopic pregnancy or hysterectomy. Fetal magnetic resonance imaging (MRI) of an unborn child's brain is used during the second and third trimesters of pregnancy and brain activity has been observed using MRI;
- (16) Missouri law identifies the presence of circulation, respiration, and brain function as indicia of life under section 194.005, as the presence of circulation, respiration, and brain

function indicates that such person is not legally dead, but is legally alive;

- (17) Unborn children at eight weeks gestational age show spontaneous movements, such as a twitching of the trunk and developing limbs. It has been reported that unborn children at this stage show reflex responses to touch. The perioral area is the first part of the unborn child's body to respond to touch at about eight weeks gestational age and by fourteen weeks gestational age most of the unborn child's body is responsive to touch;
- (18) Peripheral cutaneous sensory receptors, the receptors that feel pain, develop early in the unborn child. They appear in the perioral cutaneous area at around seven to eight weeks gestational age, in the palmar regions at ten to ten and a half weeks gestational age, the abdominal wall at fifteen weeks gestational age, and over all of the unborn child's body at sixteen weeks gestational age;
- (19) Substance P, a peptide that functions as a neurotransmitter, especially in the transmission of pain, is present in the dorsal horn of the spinal cord of the unborn child at eight to ten weeks gestational age. Enkephalins, peptides that play a role in neurotransmission and pain modulation, are present in the dorsal horn at twelve to fourteen weeks gestational age;
- (20) When intrauterine needling is performed on an unborn child at sixteen weeks gestational age or later, the reaction to this invasive stimulus is blood flow redistribution to the brain. Increased blood flow to the brain is the same type of stress response seen in a born child and an adult;
- (21) By sixteen weeks gestational age, pain transmission from a peripheral receptor to the cortex is possible in the unborn child;
- (22) Physicians provide anesthesia during in utero treatment of unborn children as early as sixteen weeks gestational age for certain procedures, including those to correct fetal urinary tract obstruction. Anesthesia is administered by ultrasound-quided injection into the arm or leg of the unborn child;
- (23) A leading textbook on prenatal development of the human brain states, "It may be concluded that, although nociperception (the actual perception of pain) awaits the appearance of consciousness, nociception (the experience of pain) is present some time before birth. In the absence of disproof, it is merely prudent to assume that pain can be experienced even early in prenatal life (Dr. J. Wisser, Zürich): the fetus should be given the benefit of the

230 doubt". Ronan O'Rahilly & Fabiola Müller. 231 Embryonic Human Brain: An Atlas of Developmental Stages (3d ed. 2005); 232 233 (24) By fourteen or fifteen weeks 234 gestational age or later, the predominant 235 abortion method in Missouri is dilation and 236 evacuation (D&E). The D&E abortion method 237 includes the dismemberment, disarticulation, and 238 exsanguination of the unborn child, causing the 239 unborn child's death; 240 (25) The Supreme Court acknowledged in 241 Gonzales v. Carhart, 550 U.S. 124, 160 (2007), 242 that "the standard D&E is in some respects as 243 brutal, if not more, than the intact D&E" partial birth abortion method banned by Congress 244 and upheld as facially constitutional by the 245 Supreme Court, even though the federal ban was 246 247 applicable both before and after viability and 248 had no exception for the health of the mother; 249 (26) Missouri's ban on the partial birth 250 abortion method, section 565.300, is in effect 251 because of Gonzales v. Carhart and the Supreme 252 Court's subsequent decision in Nixon v. 253 Reproductive Health Services of Planned Parenthood of the St. Louis Region, Inc., 550 254 255 U.S. 901 (2007), to vacate and remand to the 256 appellate court the prior invalidation of 257 section 565.300. Since section 565.300, like Congress' ban on partial birth abortion, is 258 259 applicable both before and after viability, there is ample precedent for the general 260 assembly to constitutionally prohibit the brutal 261 262 D&E abortion method at fourteen weeks 263 gestational age or later, even before the unborn 264 child is viable, with a medical emergency 265 exception; In Roper v. Simmons, 543 U.S. 551 266 (27)267 (2005), the Supreme Court determined that "evolving standards of decency" dictated that a 268 269 Missouri statute allowing the death penalty for 270 a conviction of murder in the first degree for a 271 person under eighteen years of age when the 272 crime was committed was unconstitutional under 273 the Eighth and Fourteenth Amendments to the 274 United States Constitution because it violated 275 the prohibition against "cruel and unusual 276 punishments"; 277 (28)In Bucklew v. Precythe, 139 S. Ct. 278 1112, 1123 (2019), the Supreme Court noted that "'[d]isqusting' practices" like disemboweling and quartering "readily qualified as 'cruel and 279 280 281 unusual', as a reader at the time of the Eighth 282 Amendment's adoption would have understood those words"; 283 284 (29) Evolving standards of decency dictate that Missouri should prohibit the brutal and 285

painful D&E abortion method at fourteen weeks

gestational age or later, with a medical emergency exception, because if a comparable method of killing was used on:

- (a) A person convicted of murder in the first degree, it would be cruel and unusual punishment; or
- (b) An animal, it would be unlawful under state law because it would not be a humane method, humane euthanasia, or humane killing of certain animals under chapters 273 and 578;
- (30) In Roper, the Supreme Court also found that "[i]t is proper that we acknowledge the overwhelming weight of international opinion against the juvenile death penalty.... The opinion of the world community, while not controlling our outcome, does provide respected and significant confirmation for our own conclusions". Roper, 543 U.S. at 578. In its opinion, the Supreme Court was instructed by "international covenants prohibiting the juvenile death penalty", such as the International Covenant on Civil and Political Rights, 999 U.N.T.S. 171. Id. at 577;
- (31) The opinion of the world community, reflected in the laws of the United Nation's 193-member states and six other entities, is that in most countries, most abortions are prohibited after twelve weeks gestational age or later;
- (32) The opinion of the world community is also shared by most Americans, who believe that most abortions in the second and third trimesters of pregnancy should be illegal, based on polling that has remained consistent since 1996;
- in pregnancy have a higher medical risk for women. Compared to an abortion at eight weeks gestational age or earlier, the relative risk increases exponentially at later gestational ages. The relative risk of death for a pregnant woman who had an abortion performed or induced upon her at:
- (a) Eleven to twelve weeks gestational age is between three and four times higher than an abortion at eight weeks gestational age or earlier;
- (b) Thirteen to fifteen weeks gestational age is almost fifteen times higher than an abortion at eight weeks gestational age or earlier;
- (c) Sixteen to twenty weeks gestational age is almost thirty times higher than an abortion at eight weeks gestational age or earlier; and
- (d) Twenty-one weeks gestational age or later is more than seventy-five times higher

than an abortion at eight weeks gestational age or earlier;

- (34) In addition to the short-term risks of an abortion, studies have found that the long-term physical and psychological consequences of abortion for women include, but are not limited to, an increased risk of preterm birth, low birthweight babies, and placenta previa in subsequent pregnancies, as well as serious behavioral health issues. These risks increase as abortions are performed or induced at later qestational ages. These consequences of an abortion have a detrimental effect not only on women, their children, and their families, but also on an already burdened health care system, taxpayers, and the workforce;
- (35) A large percentage of women who have an abortion performed or induced upon them in Missouri each year are at less than eight weeks qestational age, a large majority are at less than fourteen weeks gestational age, a larger majority are at less than eighteen weeks gestational age, and an even larger majority are at less than twenty weeks gestational age. A prohibition on performing or inducing an abortion at eight weeks gestational age or later, with a medical emergency exception, does not amount to a substantial obstacle to a large fraction of women for whom the prohibition is relevant, which is pregnant women in Missouri who are seeking an abortion while not experiencing a medical emergency. The burden that a prohibition on performing or inducing an abortion at eight, fourteen, eighteen, or twenty weeks gestational age or later, with a medical emergency exception, might impose on abortion access, is outweighed by the benefits conferred upon the following:
- (a) Women more advanced in pregnancy who are at greater risk of harm from abortion;
- (b) Unborn children at later stages of development;
- (c) The medical profession, by preserving its integrity and fulfilling its commitment to do no harm; and
- (d) Society, by fostering respect for human life, born and unborn, at all stages of development, and by lessening societal tolerance of violence against innocent human life;
- (36) In Webster, the Supreme Court noted, in upholding a Missouri statute, "that there may be a 4-week error in estimating gestational age". Webster, 492 U.S. at 516. Thus, an unborn child thought to be eight weeks gestational age might in fact be twelve weeks gestational age, when an abortion poses a greater risk to the woman and the unborn child

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is considerably more developed. An unborn child at fourteen weeks gestational age might be eighteen weeks gestational age and an unborn child at eighteen weeks gestational age might be twenty-two weeks gestational age, when an abortion poses a greater risk to the woman, the unborn child is considerably more developed, the abortion method likely to be employed is more brutal, and the risk of pain experienced by the unborn child is greater. An unborn child at twenty weeks gestational age might be twentyfour weeks gestational age, when an abortion poses a greater risk to the woman, the unborn child is considerably more developed, the abortion method likely to be employed is more brutal, the risk of pain experienced by the unborn child is greater, and the unborn child may be viable.

- 3. The state of Missouri is bound by Article VI, Clause 2 of the Constitution of the United States that "all treaties made, or which shall be made, under the authority of the United States, shall be the supreme law of the land". One such treaty is the International Covenant on Civil and Political Rights, entered into force on March 23, 1976, and adopted by the United States on September 8, 1992. In ratifying the Covenant, the United States declared that while the provisions of Articles 1 through 27 of the Covenant are not self-executing, the United States' understanding is that state governments share responsibility with the federal government in implementing the Covenant.
- 4. Article 6, Paragraph 1, U.N.T.S. at 174, of the International Covenant on Civil and Political Rights states, "Every human being has the inherent right to life. This right shall be protected by law. No one shall be arbitrarily deprived of his life". The state of Missouri takes seriously its obligation to comply with the Covenant and to implement this paragraph as it relates to the inherent right to life of unborn human beings, protecting the rights of unborn human beings by law, and ensuring that such unborn human beings are not arbitrarily deprived of life. The state of Missouri hereby implements Article 6, Paragraph 1 of the Covenant by the regulation of abortion in this state.
- 5. The state of Missouri has interests that include, but are not limited to:
- (1) Protecting unborn children throughout pregnancy and preserving and promoting their lives from conception to birth;
  - (2) Encouraging childbirth over abortion;
- (3) Ensuring respect for all human life from conception to natural death;

(4) Safequarding an unborn child from the serious harm of pain by an abortion method that would cause the unborn child to experience pain while she or he is being killed;

- (5) Preserving the integrity of the medical profession and regulating and restricting practices that might cause the medical profession or society as a whole to become insensitive, even disdainful, to life. This includes regulating and restricting abortion methods that are not only brutal and painful, but if allowed to continue, will further coarsen society to the humanity of not only unborn children, but all vulnerable and innocent human life, making it increasingly difficult to protect such life;
- Ending the incongruities in state law (6) by permitting some unborn children to be killed by abortion, while requiring that unborn children be protected in nonabortion circumstances through, including, but not limited to, homicide, assault, self-defense, and defense of another statutes; laws guaranteeing prenatal health care, emergency care, and testing; state-sponsored health insurance for unborn children; the prohibition of restraints in correctional institutions to protect pregnant offenders and their unborn children; and protecting the interests of unborn children by the appointment of conservators, guardians, and representatives;
- (7) Reducing the risks of harm to pregnant women who obtain abortions later in pregnancy; and
- (8) Avoiding burdens on the health care system, taxpayers, and the workforce because of increased preterm births, low birthweight babies, compromised pregnancies, extended postpartum recoveries, and behavioral health problems caused by the long-term effects of abortions performed or induced later in the pregnancy.]
- [188.027. 1. Except in cases 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, a qualified professional, or the referring physician 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;
- induce the abortion or a qualified professional has presented the woman, in person, printed materials provided by the department, which describe the probable anatomical and physiological characteristics of the unborn child at two-week gestational increments from conception to full term, including color photographs or images of the developing unborn child at two-week gestational increments. Such descriptions shall include information about brain and heart functions, the presence of

external members and internal organs during the applicable stages of development and information on when the unborn child is viable. The printed materials shall prominently display the following statement: "The life of each human being begins at conception. Abortion will terminate the life of a separate, unique, living human being.";

- induce the abortion, a qualified professional, or the referring physician has presented the woman, in person, printed materials provided by the department, which describe the various surgical and drug-induced methods of abortion relevant to the stage of pregnancy, as well as the immediate and long-term medical risks commonly associated with each 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 the possible adverse psychological effects associated with an abortion;
- The physician who is to perform or (4) induce the abortion or a qualified professional shall provide the woman with the opportunity to view at least seventy-two hours prior to the abortion an active ultrasound of the unborn child and hear the heartbeat of the unborn child if the heartbeat is audible. The woman shall be provided with a geographically indexed list maintained by the department of health care providers, facilities, and clinics that perform ultrasounds, including those that offer ultrasound services free of charge. Such materials shall provide contact information for each provider, facility, or clinic including telephone numbers and, if available, website addresses. Should the woman decide to obtain an ultrasound from a provider, facility, or clinic other than the abortion facility, the woman shall be offered a reasonable time to obtain the ultrasound examination before the date and time set for performing or inducing an abortion. person conducting the ultrasound shall ensure that the active ultrasound image is of a quality consistent with standard medical practice in the community, contains the dimensions of the unborn child, and accurately portrays the presence of external members and internal organs, if present or viewable, of the unborn child. The auscultation of fetal heart tone must also be of a quality consistent with standard medical practice in the community. If the woman chooses to view the ultrasound or hear the heartbeat or both at the abortion facility, the viewing or hearing or both shall be provided to her at the

abortion facility at least seventy-two hours prior to the abortion being performed or induced;

- (5) The printed materials provided by the department shall include information on the possibility of an abortion causing pain in the unborn child. This information shall include, but need not be limited to, the following:
- (a) Unborn children as early as eight weeks gestational age start to show spontaneous movements and unborn children at this stage in pregnancy show reflex responses to touch;
- (b) In the unborn child, the area around his or her mouth and lips is the first part of the unborn child's body to respond to touch and by fourteen weeks gestational age most of the unborn child's body is responsive to touch;
- (c) Pain receptors on the unborn child's skin develop around his or her mouth at around seven to eight weeks gestational age, around the palms of his or her hands at ten to ten and a half weeks, on the abdominal wall at fifteen weeks, and over all of his or her body at sixteen weeks gestational age;
- (d) Beginning at sixteen weeks gestational age and later, it is possible for pain to be transmitted from receptors to the cortex of the unborn child's brain, where thinking and perceiving occur;
- (e) When a physician performs a life-saving surgery, he or she provides anesthesia to unborn children as young as sixteen weeks gestational age in order to alleviate the unborn child's pain; and
- (f) A description of the actual steps in the abortion procedure to be performed or induced and at which steps the abortion procedure could be painful to the unborn child;
- (6) 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 explaining to the woman alternatives to abortion she may wish to consider. Such materials shall:
- (a) Identify on a geographical basis public and private agencies available to assist a woman in carrying her unborn child to term, and to assist her in caring for her dependent child or placing her child for adoption, including agencies commonly known and generally referred to as pregnancy resource centers, crisis pregnancy centers, maternity homes, and adoption agencies. Such materials shall provide a comprehensive list by geographical area of the agencies, a description of the services they offer, and the telephone numbers and addresses of the agencies; provided that such materials shall not include any programs, services,

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organizations, or affiliates of organizations that perform or induce, or assist in the performing or inducing of, abortions or that refer for abortions;

- (b) Explain the Missouri alternatives to abortion services program under section 188.325, and any other programs and services available to pregnant women and mothers of newborn children offered by public or private agencies which assist a woman in carrying her unborn child to term and assist her in caring for her dependent child or placing her child for adoption, including but not limited to prenatal care; maternal health care; newborn or infant care; mental health services; professional counseling services; housing programs; utility assistance; transportation services; food, clothing, and supplies related to pregnancy; parenting skills; educational programs; job training and placement services; drug and alcohol testing and treatment; and adoption assistance;
- (c) Identify the state website for the Missouri alternatives to abortion services program under section 188.325, and any toll-free number established by the state operated in conjunction with the program;
- "There are public and private agencies willing and able to help you carry your child to term, and to assist you and your child after your child is born, whether you choose to keep your child or place him or her for adoption. The state of Missouri encourages you to contact those agencies before making a final decision about abortion. State law requires that your physician or a qualified professional give you the opportunity to call agencies like these before you undergo an abortion.";
- (7) 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 explaining that the father of the unborn child is liable to assist in the support of the child, even in instances where he has offered to pay for the abortion. Such materials shall include information on the legal duties and support obligations of the father of a child, including, but not limited to, child support payments, and the fact that paternity may be established by the father's name on a birth certificate or statement of paternity, or by court action. Such printed materials shall also state that more information concerning paternity establishment and child support services and enforcement may be obtained by calling the

family support division within the Missouri department of social services; and

- (8) The physician who is to perform or induce the abortion or a qualified professional shall inform the woman that she is free to withhold or withdraw her consent to the abortion at any time without affecting her right to future care or treatment and without the loss of any state or federally funded benefits to which she might otherwise be entitled.
- 2. All information required to be provided to a woman considering abortion by subsection 1 of this section shall be presented to the woman individually, in the physical presence of the woman and in a private room, to protect her privacy, to maintain the confidentiality of her decision, to ensure that the information focuses on her individual circumstances, to ensure she has an adequate opportunity to ask questions, and to ensure that she is not a victim of coerced abortion. Should a woman be unable to read materials provided to her, they shall be read to her. Should a woman need an interpreter to understand the information presented in the written materials, an interpreter shall be provided to her. Should a woman ask questions concerning any of the information or materials, answers shall be provided in a language she can understand.
- 3. No abortion shall be performed or induced unless and until the woman upon whom the abortion is to be performed or induced certifies in writing on a checklist form provided by the department that she has been presented all the information required in subsection 1 of this section, that she has been provided the opportunity to view an active ultrasound image of the unborn child and hear the heartbeat of the unborn child if it is audible, and that she further certifies that she gives her voluntary and informed consent, freely and without coercion, to the abortion procedure.
- 4. No physician shall perform or induce an abortion unless and until the physician has obtained from the woman her voluntary and informed consent given freely and without coercion. If the physician has reason to believe that the woman is being coerced into having an abortion, the physician or qualified professional shall inform the woman that services are available for her and shall provide her with private access to a telephone and information about such services, including but not limited to the following:
- (1) Rape crisis centers, as defined in section 455.003;

(2) Shelters for victims of domestic violence, as defined in section 455.200; and

(3) Orders of protection, pursuant to chapter 455.

- 5. The physician who is to perform or induce the abortion shall, at least seventy-two hours prior to such procedure, inform the woman orally and in person of:
- (1) 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
- (2) 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 conditions.
- 6. No physician shall perform or induce an abortion unless and until the physician has received and signed a copy of the form prescribed in subsection 3 of this section. The physician shall retain a copy of the form in the patient's medical record.
- 7. In the event of a medical emergency, the physician who performed or induced the abortion shall clearly certify in writing the nature and circumstances of the medical emergency. This certification shall be signed by the physician who performed or induced the abortion, and shall be maintained under section 188.060.
- 8. No person or entity shall require, obtain, or accept payment for an abortion from or on behalf of a patient until at least seventy-two hours have passed since the time that the information required by subsection 1 of this section has been provided to the patient. Nothing in this subsection shall prohibit a person or entity from notifying the patient that payment for the abortion will be required after the seventy-two-hour period has expired if she voluntarily chooses to have the abortion.
- 9. The term "qualified professional" as used in this section shall refer to a physician, physician assistant, registered nurse, licensed practical nurse, psychologist, licensed professional counselor, or licensed social worker, licensed or registered under chapter 334, 335, or 337, acting under the supervision of the physician performing or inducing the abortion, and acting within the course and scope of his or her authority provided by law. The provisions of this section shall not be

construed to in any way expand the authority otherwise provided by law relating to the licensure, registration, or scope of practice of any such qualified professional.

10. By November 30, 2010, the department shall produce the written materials and forms described in this section. Any written materials produced shall be printed in a typeface large enough to be clearly legible. All information shall be presented in an objective, unbiased manner designed to convey only accurate scientific and medical information. The department shall furnish the written materials and forms at no cost and in sufficient quantity to any person who performs or induces abortions, or to any hospital or facility that provides abortions. department shall make all information required by subsection 1 of this section available to the public through its department website. department shall maintain a toll-free, twentyfour-hour hotline telephone number where a caller can obtain information on a regional basis concerning the agencies and services described in subsection 1 of this section. identifying information regarding persons who use the website shall be collected or maintained. The department shall monitor the website on a regular basis to prevent tampering and correct any operational deficiencies.

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

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

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

(1) The attending physician has secured the informed written consent of the minor and

one parent or quardian, and the consenting parent or quardian of the minor has notified any other custodial parent in writing prior to the securing of the informed written consent of the minor and one parent or quardian. For purposes of this subdivision, "custodial parent" shall only mean a parent of a minor who has been awarded joint legal custody or joint physical custody of such minor by a court of competent jurisdiction. Notice shall not be required for any parent:

- (a) Who has been found quilty of any offense in violation of chapter 565, relating to offenses against the person; chapter 566, relating to sexual offenses; chapter 567, relating to prostitution; chapter 568, relating to offenses against the family; or chapter 573, related to pornography and related offenses, if a child was a victim;
- (b) Who has been found quilty of any offense in any other state or foreign country, or under federal, tribal, or military jurisdiction if a child was a victim, which would be a violation of chapters 565, 566, 567, 568, or 573 if committed in this state;
- (c) Who is listed on the sexual offender registry under sections 589.400 to 589.425;
- (d) Against whom an order of protection has been issued, including a foreign order of protection given full faith and credit in this state under section 455.067;
- (e) Whose custodial, parental, or quardianship rights have been terminated by a court of competent jurisdiction; or
- (f) Whose whereabouts are unknown after reasonable inquiry, who is a fugitive from justice, who is habitually in an intoxicated or drugged condition, or who has been declared mentally incompetent or incapacitated by a court of competent jurisdiction;
- (2) The minor is emancipated and the attending physician has received the informed written consent of the minor;
- (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

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subdivision (4) of subsection 1 of this section may be granted by a court pursuant to the following procedures:

- The minor or next friend shall make an (1)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, quardian, or, if the minor's parents are deceased and no quardian 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 quardian ad litem of the child; and if the minor does not have private counsel, that the court should appoint The petition shall be signed by the counsel. 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;
- (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 quardian 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 induction 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 quardian 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 induction of the abortion, the supreme court of this state shall, by court rule, provide for expedited appellate review of cases appealed under this section.
- 3. If a minor desires an abortion, then she shall be orally informed of and, if possible, sign the written consent required under this chapter in the same manner as an adult person. No abortion shall be performed or induced on any minor against her will, except that an abortion may be performed or induced against the will of a minor pursuant to a court order described in subdivision (4) of subsection 1 of this section that the abortion is necessary to preserve the life of the minor.]
- [188.030. 1. Except in the case of a medical emergency, no abortion of a viable unborn child shall be performed or induced unless the abortion is necessary to preserve the life of the pregnant woman whose life is endangered by a physical disorder, physical illness, or physical injury, including a lifeendangering physical condition caused by or arising from the pregnancy itself, or when continuation of the pregnancy will create a serious risk of substantial and irreversible physical impairment of a major bodily function of the pregnant woman. For purposes of this section, "major bodily function" includes, but is not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.
- 2. Except in the case of a medical emergency:

abortion upon a woman, the physician shall determine the gestational age of the unborn child in a manner consistent with accepted obstetrical and neonatal practices and standards. In making such determination, the physician shall make such inquiries of the pregnant woman and perform or cause to be performed such medical examinations, imaging studies, and tests as a reasonably prudent physician, knowledgeable about the medical facts and conditions of both the woman and the unborn child involved, would consider necessary to perform and consider in making an accurate diagnosis with respect to gestational age;

- (2) If the physician determines that the gestational age of the unborn child is twenty weeks or more, prior to performing or inducing an abortion upon the woman, the physician shall determine if the unborn child is viable by using and exercising that degree of care, skill, and proficiency commonly exercised by a skillful, careful, and prudent physician. In making this determination of viability, the physician shall perform or cause to be performed such medical examinations and tests as are necessary to make a finding of the gestational age, weight, and lung maturity of the unborn child and shall enter such findings and determination of viability in the medical record of the woman;
- (3) If the physician determines that the gestational age of the unborn child is twenty weeks or more, and further determines that the unborn child is not viable and performs or induces an abortion upon the woman, the physician shall report such findings and determinations and the reasons for such determinations to the health care facility in which the abortion is performed and to the state board of registration for the healing arts, and shall enter such findings and determinations in the medical records of the woman and in the individual abortion report submitted to the department under section 188.052;
- (4) (a) If the physician determines that the unborn child is viable, the physician shall not perform or induce an abortion upon the woman unless the abortion is necessary to preserve the life of the pregnant woman or that a continuation of the pregnancy will create a serious risk of substantial and irreversible physical impairment of a major bodily function of the woman.
- (b) Before a physician may proceed with performing or inducing an abortion upon a woman when it has been determined that the unborn child is viable, the physician shall first

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certify in writing the medical threat posed to the life of the pregnant woman, or the medical reasons that continuation of the pregnancy would cause a serious risk of substantial and irreversible physical impairment of a major bodily function of the pregnant woman. Upon completion of the abortion, the physician shall report the reasons and determinations for the abortion of a viable unborn child to the health care facility in which the abortion is performed and to the state board of registration for the healing arts, and shall enter such findings and determinations in the medical record of the woman and in the individual abortion report submitted to the department under section 188.052.

- (C) Before a physician may proceed with performing or inducing an abortion upon a woman when it has been determined that the unborn child is viable, the physician who is to perform the abortion shall obtain the agreement of a second physician with knowledge of accepted obstetrical and neonatal practices and standards who shall concur that the abortion is necessary to preserve the life of the pregnant woman, or that continuation of the pregnancy would cause a serious risk of substantial and irreversible physical impairment of a major bodily function This second physician of the pregnant woman. shall also report such reasons and determinations to the health care facility in which the abortion is to be performed and to the state board of registration for the healing arts, and shall enter such findings and determinations in the medical record of the woman and the individual abortion report submitted to the department under section 188.052. The second physician shall not have any legal or financial affiliation or relationship with the physician performing or inducing the abortion, except that such prohibition shall not apply to physicians whose legal or financial affiliation or relationship is a result of being employed by or having staff privileges at the same hospital as the term "hospital" is defined in section 197.020.
- (d) Any physician who performs or induces an abortion upon a woman when it has been determined that the unborn child is viable shall utilize the available method or technique of abortion most likely to preserve the life or health of the unborn child. In cases where the method or technique of abortion most likely to preserve the life or health of the unborn child would present a greater risk to the life or health of the woman than another legally permitted and available method or technique, the

physician may utilize such other method or technique. In all cases where the physician performs an abortion upon a viable unborn child, the physician shall certify in writing the available method or techniques considered and the reasons for choosing the method or technique employed.

- No physician shall perform or induce (e) an abortion upon a woman when it has been determined that the unborn child is viable unless there is in attendance a physician other than the physician performing or inducing the abortion who shall take control of and provide immediate medical care for a child born as a result of the abortion. During the performance of the abortion, the physician performing it, and subsequent to the abortion, the physician required to be in attendance, shall take all reasonable steps in keeping with good medical practice, consistent with the procedure used, to preserve the life or health of the viable unborn child; provided that it does not pose an increased risk to the life of the woman or does not pose an increased risk of substantial and irreversible physical impairment of a major bodily function of the woman.
- 3. Any person who knowingly performs or induces an abortion of an unborn child in violation of the provisions of this section is quilty of a class D felony, and, upon a finding of quilt or plea of quilty, shall be imprisoned for a term of not less than one year, and, notwithstanding the provisions of section 558.002, shall be fined not less than ten thousand nor more than fifty thousand dollars.
- 4. Any physician who pleads quilty to or is found guilty of performing or inducing an abortion of an unborn child in violation of this section shall be subject to suspension or revocation of his or her license to practice medicine in the state of Missouri by the state board of registration for the healing arts under the provisions of sections 334.100 and 334.103.
- 5. Any hospital licensed in the state of Missouri that knowingly allows an abortion of an unborn child to be performed or induced in violation of this section may be subject to suspension or revocation of its license under the provisions of section 197.070.
- 6. Any abortion facility licensed in the state of Missouri that knowingly allows an abortion of an unborn child to be performed or induced in violation of this section may be subject to suspension or revocation of its license under the provisions of section 197.220.
- 7. A woman upon whom an abortion is performed or induced in violation of this

 section shall not be prosecuted for a conspiracy to violate the provisions of this section.

- 8. Nothing in this section shall be construed as creating or recognizing a right to abortion, nor is it the intention of this section to make lawful any abortion that is currently unlawful.
- 9. It is the intent of the legislature that this section be severable as noted in section 1.140. In the event that any section, subsection, subdivision, paragraph, sentence, or clause of this section be declared invalid under the Constitution of the United States or the Constitution of the State of Missouri, it is the intent of the legislature that the remaining provisions of this section remain in force and effect as far as capable of being carried into execution as intended by the legislature.
- 10. The general assembly may, by concurrent resolution, appoint one or more of its members who sponsored or co-sponsored this act in his or her official capacity to intervene as a matter of right in any case in which the constitutionality of this law is challenged.]

[188.031. For purposes of section 188.028, the term "next friend" shall not include another minor child, or any entity or person in an individual or representative capacity that has a financial interest or potential gain from the proposed abortion, or any employee of or volunteer for such entity or person.]

[188.033. Whenever an abortion facility or a family planning agency located in this state, or any of its agents or employees acting within the scope of his or her authority or employment, provides to a woman considering an abortion the name, address, telephone number, or website of an abortion provider that is located outside of the state, such abortion facility or family planning agency or its agents or employees shall also provide to such woman the printed materials produced by the department under section 188.027. If the name, address, telephone number, or website of such abortion provider is not provided to such woman in person, such printed materials shall be offered to her, and if she chooses, sent to such woman at no cost to her the same day or as soon as possible either electronically or by U.S. mail overnight delivery service or by other overnight or sameday delivery service to an address of such woman's choosing. The department shall furnish such printed materials at no cost and in sufficient quantities to abortion facilities and family planning agencies located within the state.]

[188.035. Whoever, with intent to do so, shall take the life of a child aborted alive, shall be guilty of murder of the second degree.]

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

- 2. No person shall utilize the fetal organs or tissue resulting from an abortion for medical transplantation, if the person knows that the abortion was procured for the purpose of utilizing those organs or tissue for such use.
- 3. No person shall offer any inducement, monetary or otherwise, to a woman or a prospective father of an unborn child for the purpose of conceiving an unborn child for the medical, scientific, experimental or therapeutic use of the fetal organs or tissue.
- 4. No person shall offer any inducement, monetary or otherwise, to the mother or father of an unborn child for the purpose of procuring an abortion for the medical, scientific, experimental or therapeutic use of the fetal organs or tissue.
- 5. No person shall knowingly offer or receive any valuable consideration for the fetal organs or tissue resulting from an abortion, provided that nothing in this subsection shall prohibit payment for burial or other final disposition of the fetal remains, or payment for a pathological examination, autopsy or postmortem examination of the fetal remains.
- 6. If any provision in this section or the application thereof to any person, circumstance or period of gestation is held invalid, such invalidity shall not affect the provisions or applications which can be given effect without the invalid provision or application, and to this end the provisions of this section are declared severable.]

[188.038. 1. The general assembly of this state finds that:

- (1) Removing vestiges of any past bias or discrimination against pregnant women, their partners, and their family members, including their unborn children, is an important task for those in the legal, medical, social services, and human services professions;
- (2) Ending any current bias or discrimination against pregnant women, their partners, and their family members, including

their unborn children, is a legitimate purpose of government in order to guarantee that those who "are endowed by their Creator with certain unalienable Rights" can enjoy "Life, Liberty and the pursuit of Happiness";

- (3) The historical relationship of bias or discrimination by some family planning programs and policies towards poor and minority populations, including, but not limited to, the nonconsensual sterilization of mentally ill, poor, minority, and immigrant women and other coercive family planning programs and policies, must be rejected;
- (4) Among Missouri residents, the rate of black or African-American women who undergo abortions is significantly higher, about three and one-half times higher, than the rate of white women who undergo abortions. Among Missouri residents, the rate of black or African-American women who undergo repeat abortions is significantly higher, about one and one-half times higher, than the rate of white women who undergo repeat abortions;
- (5) Performing or inducing an abortion because of the sex of the unborn child is repugnant to the values of equality of females and males and the same opportunities for girls and boys, and furthers a false mindset of female inferiority;
- (6) Government has a legitimate interest in preventing the abortion of unborn children with Down Syndrome because it is a form of bias or disability discrimination and victimizes the disabled unborn child at his or her most vulnerable stage. Eliminating unborn children with Down Syndrome raises grave concerns for the lives of those who do live with disabilities. It sends a message of dwindling support for their unique challenges, fosters a false sense that disability is something that could have been avoidable, and is likely to increase the stigma associated with disability.
- 2. No person shall perform or induce an abortion on a woman if the person knows that the woman is seeking the abortion solely because of a prenatal diagnosis, test, or screening indicating Down Syndrome or the potential of Down Syndrome in an unborn child.
- 3. No person shall perform or induce an abortion on a woman if the person knows that the woman is seeking the abortion solely because of the sex or race of the unborn child.
- 4. Any physician or other person who performs or induces or attempts to perform or induce an abortion prohibited by this section shall be subject to all applicable civil

penalties under this chapter including, but not limited to, sections 188.065 and 188.085.]

[188.039. 1. For purposes of this section, "medical emergency" means a condition which, on the basis of the physician's good faith clinical judgment, so complicates the medical condition of a pregnant woman as to necessitate the immediate abortion of her pregnancy to avert her death or for which a delay will create a serious risk of substantial and irreversible impairment of a major bodily function.

- 2. Except in the case of medical emergency, no person shall perform or induce an abortion unless at least seventy-two hours prior thereto the physician who is to perform or induce the abortion, a qualified professional, or the referring physician has conferred with the patient and discussed with her the indicators and contraindicators, and risk factors including any physical, psychological, or situational factors for the proposed procedure and the use of medications, including but not limited to mifepristone, in light of her medical history and medical condition. For an abortion performed or an abortion induced by a drug or drugs, such conference shall take place at least seventy-two hours prior to the writing or communication of the first prescription for such drug or drugs in connection with inducing an abortion. Only one such conference shall be required for each abortion.
- 3. The patient shall be evaluated by the physician who is to perform or induce the abortion, a qualified professional, or the referring physician during the conference for indicators and contraindicators, risk factors including any physical, psychological, or situational factors which would predispose the patient to or increase the risk of experiencing one or more adverse physical, emotional, or other health reactions to the proposed procedure or drug or drugs in either the short or long term as compared with women who do not possess such risk factors.
- 4. At the end of the conference, and if the woman chooses to proceed with the abortion, the physician who is to perform or induce the abortion, a qualified professional, or the referring physician shall sign and shall cause the patient to sign a written statement that the woman gave her informed consent freely and without coercion after the physician or qualified professional had discussed with her the indicators and contraindicators, and risk factors, including any physical, psychological,

or situational factors. All such executed statements shall be maintained as part of the patient's medical file, subject to the confidentiality laws and rules of this state.

- 5. The director of the department of health and senior services shall disseminate a model form that physicians or qualified professionals may use as the written statement required by this section, but any lack or unavailability of such a model form shall not affect the duties of the physician or qualified professional set forth in subsections 2 to 4 of this section.
- "qualified professional" shall refer to a physician, physician assistant, registered nurse, licensed practical nurse, psychologist, licensed professional counselor, or licensed social worker, licensed or registered under chapter 334, 335, or 337, acting under the supervision of the physician performing or inducing the abortion, and acting within the course and scope of his or her authority provided by law. The provisions of this section shall not be construed to in any way expand the authority otherwise provided by law relating to the licensure, registration, or scope of practice of any such qualified professional.
- 7. If the provisions in subsection 2 of this section requiring a seventy-two-hour waiting period for an abortion are ever temporarily or permanently restrained or enjoined by judicial order, then the waiting period for an abortion shall be twenty-four hours; provided, however, that if such temporary or permanent restraining order or injunction is stayed or dissolved, or otherwise ceases to have effect, the waiting period for an abortion shall be seventy-two hours.]
- [188.043. 1. No person shall perform or induce an abortion on another unless such person has medical malpractice insurance with coverage amounts of at least one million dollars per occurrence and three million dollars in the annual aggregate.
- 2. For the purpose of this section, "medical malpractice insurance" means insurance coverage against the legal liability of the insured and against loss, damage, or expense incident to a claim arising out of the death or injury of any person as a result of the negligence or malpractice in rendering professional service by any health care provider.
- 3. No abortion facility or hospital shall employ or engage the services of a person to perform or induce an abortion on another if the

person does not have medical malpractice insurance pursuant to this section, except that the abortion facility or hospital may provide medical malpractice insurance for the services of persons employed or engaged by such facility or hospital which is no less than the coverage amounts set forth in this section.

- 4. Notwithstanding the provisions of section 334.100, failure of a person to maintain the medical malpractice insurance required by this section shall be an additional ground for sanctioning of a person's license, certificate, or permit.]
- [188.044. 1. When a drug or chemical, or combination thereof, used by a person to induce an abortion carries a warning from its manufacturer or distributor, a peer-reviewed medical journal article, or a Food and Drug Administration label that its use may cause birth defects, disability, or other injury in a child who survives the abortion, then in addition to the requirements of section 188.043, such person shall also carry tail insurance with coverage amounts of at least one million dollars per occurrence and three million dollars in the annual aggregate for personal injury to or death of a child who survives such abortion. policy shall be maintained in force or be in effect for a period of twenty-one years after the person used the drug or chemical, or combination thereof, to induce the abortion.
- 2. For the purpose of this section, "tail insurance" means insurance which covers the legal liability of the insured once a medical malpractice insurance policy is cancelled, not renewed, or terminated, and covers claims made after such cancellation or termination for acts occurring during the period the prior medical malpractice insurance was in effect.
- 3. No abortion facility or hospital shall employ or engage the services of a person to induce an abortion on another using any drug or chemical, or combination thereof, which may cause birth defects, disability, or other injury in a child who survives the abortion if the person does not have tail insurance pursuant to this section, except that the abortion facility or hospital may provide tail insurance for the services of persons employed or engaged by such facility or hospital which is no less than the coverage amounts and duration set forth in this section.
- 4. Notwithstanding the provisions of section 334.100 to the contrary, failure of a person to maintain the tail insurance required by this section shall be an additional ground

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53 54 for sanctioning of a person's license, certificate, or permit.]

[188.047. 1. All tissue, except that tissue needed for purposes described in subsection 5 of this section, removed at the time of abortion shall be submitted within five days to a board-eligible or certified pathologist for gross and histopathological The pathologist shall file a copy examination. of the tissue report with the state department of health and senior services, and shall provide within seventy-two hours a copy of the report to the abortion facility or hospital in which the abortion was performed or induced. The pathologist's report shall be made a part of the patient's permanent record. If the pathological examination fails to identify evidence of a completed abortion, the pathologist shall notify the abortion facility or hospital within twentyfour hours.

- 2. The department shall reconcile each notice of abortion with its corresponding tissue report. If the department does not receive the notice of abortion or the tissue report, the department shall make an inquiry of the abortion facility or hospital. After such inquiry, if the hospital or abortion facility has not satisfactorily responded to said inquiry and the department finds that the abortion facility or hospital where the abortion was performed or induced was not in compliance with the provisions of this section, the department shall consider such noncompliance a deficiency requiring an unscheduled inspection of the facility to ensure the deficiency is remedied, subject to the provisions of chapter 197 regarding license suspensions, reviews, and appeals.
- Beginning January 1, 2018, the 3. department shall make an annual report to the general assembly. The report shall include the number of any deficiencies and inquiries by the department of each abortion facility in the calendar year and whether any deficiencies were remedied and, for each abortion facility, aggregated de-identified data about the total number of abortions performed at the facility, the termination procedures used, the number and type of complications reported for each type of termination procedure, whether the department received the tissue report for each abortion, and the existence and nature, if any, of any inconsistencies or concerns between the abortion reports submitted under section 188.052 and the tissue report submitted under this section. report shall not contain any personal patient

information the disclosure of which is prohibited by state or federal law.

- 4. All reports provided by the department to the general assembly under this section shall maintain confidentiality of all personal information of patients, facility personnel, and facility physicians.
- 5. Nothing in this section shall prohibit the utilization of fetal organs or tissue resulting from an abortion for medical or scientific purposes to determine the cause or causes of any anomaly, illness, death, or genetic condition of the fetus, the paternity of the fetus, or for law enforcement purposes.
- The department may adopt rules, regulations, and standards governing the reports required under this section. In doing so, the department shall ensure that these reports contain all information necessary to ensure compliance with all applicable laws and regulations. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after October 24, 2017, shall be invalid and void.]
- [188.052. 1. An individual abortion report for each abortion performed or induced upon a woman shall be completed by the physician who performed or induced the abortion. Abortion reports shall include, but not be limited to, a certification that the physician does not have any knowledge that the woman sought the abortion solely because of a prenatal diagnosis, test, or screening indicating Down Syndrome or the potential of Down Syndrome in the unborn child and 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.
- 2. An individual complication report for any post-abortion care performed upon a woman shall be completed by the physician providing such post-abortion care. This report shall include:
  - (1) The date of the abortion;

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

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

- 3. All abortion reports shall be signed by the attending physician who performed or induced the abortion and submitted to the department within forty-five days from the date of the abortion. All complication reports shall be signed by the physician providing the postabortion care and submitted to the department within forty-five days from the date of the postabortion care.
- 4. A copy of the abortion report shall be made a part of the medical record of the patient of the abortion facility or hospital in which the abortion was performed or induced.
- 5. The department shall be responsible for collecting all abortion reports and complication reports and collating and evaluating all data gathered therefrom and shall annually publish a statistical report based on such data from abortions performed or induced in the previous calendar year.]
- [188.055. 1. Every abortion facility, hospital, and physician shall be supplied with forms by the department of health and senior services for use in regards to the consents and reports required by sections 188.010 to 188.085. A purpose and function of such consents and reports shall be the preservation of maternal health and life by adding to the sum of medical knowledge through the compilation of relevant maternal health and life data and to monitor all abortions performed to assure that they are done only under and in accordance with the provisions of the law.
- 2. All information obtained by physician, hospital, or abortion facility from a patient for the purpose of preparing reports to the department of health and senior services under sections 188.010 to 188.085 or reports received by the division of health shall be confidential and shall be used only for statistical purposes. Such records, however, may be inspected and health data acquired by local, state, or national public health officers.]
- [188.056. 1. Notwithstanding any other provision of law to the contrary, no abortion shall be performed or induced upon a woman at eight weeks gestational age or later, except in cases of medical emergency. Any person who knowingly performs or induces an abortion of an unborn child in violation of this subsection shall be guilty of a class B felony, as well as

subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of this subsection shall not be prosecuted for a conspiracy to violate the provisions of this section.

- 2. It shall be an affirmative defense for any person alleged to have violated the provisions of subsection 1 of this section that the person performed or induced an abortion because of a medical emergency. The defendant shall have the burden of persuasion that the defense is more probably true than not.
- 3. Prosecution under this section shall bar prosecution under section\* 188.057, 188.058, or 188.375 if prosecution under such sections would violate the provisions of Amendment V to the Constitution of the United States or Article I, Section 19 of the Constitution of Missouri.
- 4. If any one or more provisions, subsections, sentences, clauses, phrases, or words of this section or the application thereof to any person, circumstance, or period of gestational age is found to be unenforceable, unconstitutional, or invalid by a court of competent jurisdiction, the same is hereby declared to be severable and the balance of the section shall remain effective notwithstanding such unenforceability, unconstitutionality, or invalidity. The general assembly hereby declares that it would have passed this section, and each provision, subsection, sentence, clause, phrase, or word thereof, irrespective of the fact that any one or more provisions, subsections, sentences, clauses, phrases, or words of the section, or the application of the section to any person, circumstance, or period of gestational age, would be declared unenforceable, unconstitutional, or invalid.]

Notwithstanding any other [188.057. 1. provision of law to the contrary, no abortion shall be performed or induced upon a woman at fourteen weeks gestational age or later, except in cases of medical emergency. Any person who knowingly performs or induces an abortion of an unborn child in violation of this subsection shall be quilty of a class B felony, as well as subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of this subsection shall not be prosecuted for a conspiracy to violate the provisions of this section.

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2. It shall be an affirmative defense for any person alleged to have violated the provisions of subsection 1 of this section that the person performed or induced an abortion because of a medical emergency. The defendant shall have the burden of persuasion that the defense is more probably true than not.

- 3. Prosecution under this section shall bar prosecution under section 188.056, 188.058, or 188.375 if prosecution under such sections would violate the provisions of Amendment V to the Constitution of the United States or Article I, Section 19 of the Constitution of Missouri.
- 4. If any one or more provisions, subsections, sentences, clauses, phrases, or words of this section or the application thereof to any person, circumstance, or period of gestational age is found to be unenforceable, unconstitutional, or invalid by a court of competent jurisdiction, the same is hereby declared to be severable and the balance of the section shall remain effective notwithstanding such unenforceability, unconstitutionality, or invalidity. The general assembly hereby declares that it would have passed this section, and each provision, subsection, sentence, clause, phrase, or word thereof, irrespective of the fact that any one or more provisions, subsections, sentences, clauses, phrases, or words of the section, or the application of the section to any person, circumstance, or period of gestational age, would be declared unenforceable, unconstitutional, or invalid.]
- [188.058. 1. Notwithstanding any other provision of law to the contrary, no abortion shall be performed or induced upon a woman at eighteen weeks gestational age or later, except in cases of medical emergency. Any person who knowingly performs or induces an abortion of an unborn child in violation of this subsection shall be quilty of a class B felony, as well as subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of this section shall not be prosecuted for a conspiracy to violate the provisions of this section.
- 2. It shall be an affirmative defense for any person alleged to have violated the provisions of subsection 1 of this section that the person performed or induced an abortion because of a medical emergency. The defendant shall have the burden of persuasion that the defense is more probably true than not.

3. Prosecution under this section shall bar prosecution under section188.056, 188.057, or 188.375 if prosecution under such sections would violate the provisions of Amendment V to the Constitution of the United States or Article I, Section 19 of the Constitution of Missouri.

If any one or more provisions, subsections, sentences, clauses, phrases, or words of this section or the application thereof to any person, circumstance, or period of gestational age is found to be unenforceable, unconstitutional, or invalid by a court of competent jurisdiction, the same is hereby declared to be severable and the balance of the section shall remain effective notwithstanding such unenforceability, unconstitutionality, or invalidity. The general assembly hereby declares that it would have passed this section, and each provision, subsection, sentence, clause, phrase, or word thereof, irrespective of the fact that any one or more provisions, subsections, sentences, clauses, phrases, or words of the section, or the application of the section to any person, circumstance, or period of gestational age, would be declared unenforceable, unconstitutional, or invalid.]

[188.060. All medical records, reports, and other documents required to be kept under sections 188.010 to 188.085 shall be maintained in the permanent files of the abortion facility or hospital in which the abortion was performed for a period of seven years.]

[188.065. Any practitioner of medicine, surgery, or nursing, or other health personnel who shall willfully and knowingly do or assist any action made unlawful by sections 188.010 to 188.085 shall be subject to having his license, application for license, or authority to practice his profession as a physician, surgeon, or nurse in the state of Missouri rejected or revoked by the appropriate state licensing board.]

[188.070. Any physician or other person who fails to maintain the confidentiality of any records or reports required under sections 188.010 to 188.085 is guilty of a misdemeanor and, upon conviction, shall be punished as provided by law.]

[188.075. 1. Any person who contrary to the provisions of sections 188.010 to 188.085 knowingly performs, induces, or aids in the performance or inducing of any abortion or knowingly fails to perform any action required by sections 188.010 to 188.085 shall be quilty of a class A misdemeanor, unless a different

 penalty is provided for in state law, and, upon conviction, shall be punished as provided by law.

- 2. It shall be an affirmative defense for any person alleged to have violated any provision of this chapter that the person performed an action or did not perform an action because of a medical emergency. This affirmative defense shall be available in criminal, civil, and administrative actions or proceedings. The defendant shall have the burden of persuasion that the defense is more probably true than not.
- The attorney general shall have concurrent original jurisdiction throughout the state, along with each prosecuting attorney and circuit attorney within their respective jurisdictions, to commence actions for a violation of any provision of this chapter, for a violation of any state law on the use of public funds for an abortion, or for a violation of any state law which regulates an abortion facility or a person who performs or induces an abortion. The attorney general, or prosecuting attorney or circuit attorney within their respective jurisdictions, may seek injunctive or other relief against any person who, or entity which, is in violation of any provision of this chapter, misuses public funds for an abortion, or violates any state law which regulates an abortion facility or a person who performs or induces an abortion.]

[188.080. Any person who is not a physician who performs or induces or attempts to perform or induce an abortion on another is quilty of a class B felony, and, upon conviction, shall be punished as provided by law. Any physician performing or inducing an abortion who does not have clinical privileges at a hospital which offers obstetrical or gynecological care located within thirty miles of the location at which the abortion is performed or induced shall be guilty of a class A misdemeanor, and, upon conviction shall be punished as provided by law.]

[188.100. Unless the language or context clearly indicates a different meaning is intended, the following words or phrases for the purposes of sections 188.100 to 188.120 shall mean:

- (1) "Employer", the state, or any political or civil subdivision thereof, or any person employing two or more persons within the state, and any person acting as an agent of the employer;
- (2) "Participate in abortion", to perform, assist in, refer for, promote, procure, or

counsel a woman to have an abortion not necessary to save the life of the mother; or to undergo an abortion;

(3) "Person" includes one or more individuals, partnerships, associations, organizations, corporations, legal representatives, trustees, trustees in bankruptcy, receivers, or other organized groups of persons.]

[188.105. 1. It shall be unlawful:

(1) For an employer:

- (a) To fail or refuse to hire or to discharge any individual, or otherwise to discriminate against any individual with respect to his or her compensation, terms, conditions, or privileges of employment, because of such individual's refusal to participate in abortion;
- (b) To limit, segregate, or classify his, her, or its employees or applicants for employment in any way which would deprive or tend to deprive any individual of employment opportunities or otherwise adversely affect his or her status as an employee, because of such individual's refusal to participate in abortion;
- (c) To discharge, expel, or otherwise discriminate against any person because he or she has opposed any practices forbidden under sections 188.100 to 188.120 or because he or she has filed a complaint, testified, or assisted in any legal proceeding under sections 188.100 to 188.120;
- (2) For any person, whether an employer or employee, or not, to aid, abet, incite, compel, or coerce the doing of any of the acts forbidden under sections 188.100 to 188.120, or to attempt to do so.
- 2. Notwithstanding any other provision of sections 188.100 to 188.120, the acts proscribed in subsection 1 of this section shall not be unlawful if there can be demonstrated an inability to reasonably accommodate an individual's refusal to participate in abortion without undue hardship on the conduct of that particular business or enterprise, or in those certain instances where participation in abortion is a bona fide occupational qualification reasonably necessary to the normal operation of that particular business or enterprise.
- 3. Nothing contained in sections 188.100 to 188.120 shall be interpreted to require any employer to grant preferential treatment to any individual because of such individual's refusal to participate in abortion.]

[188.110. 1. No public or private college, university or hospital shall

discriminate against any person for refusal to participate in abortion.

2. No applicant, student, teacher, or employee of any school shall be required to pay any fees that would in whole or in part fund an abortion for any other applicant, student, teacher, or employee of that school, if the individual required to pay the fee gives written notice to the proper school authorities that it would be in violation of his or her conscience or beliefs to pay for or fund abortions. The school may require the individual to pay that part of the fees not funding abortions, if the school makes reasonable precautions and gives reasonable assurance that the fees that are paid are segregated from any fund for the payment of abortions.]

[188.115. If any provision of sections 188.100 to 188.120 is found by a court of competent jurisdiction to be invalid or unconstitutional as applied to a specific person or class of persons, the provisions of sections 188.100 to 188.120 shall remain in full force and effect as to every other person or class of persons who is otherwise covered under these sections.]

[188.120. Any individual injured by any person, association, corporation, or entity by reason of any action prohibited by sections 188.100 to 188.120, as now or hereafter amended, may commence a civil cause of action against the person, association, corporation, or entity who caused the injury, and shall recover treble damages, including pain and suffering, sustained by such individual, the costs of the suit and reasonable attorney's fees.]

[188.160. 1. Every hospital, abortion facility, pathology lab, medical research entity, and any other facility involved in abortion shall establish and implement a written policy relating to the protections for employees who disclose information concerning actual, potential, or alleged violations of applicable federal or state laws or administrative rules, regulations, or standards.

2. The department of health and senior services is authorized to adopt rules, regulations, and standards regarding the establishment and implementation of policies created under this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if

applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after October 24, 2017, shall be invalid and void.]

[188.200. As used in sections 188.200 to 188.220, the following terms mean:

- (1) "Public employee", any person employed by this state or any agency or political subdivision thereof;
- (2) "Public facility", any public institution, public facility, public equipment, or any physical asset owned, leased, or controlled by this state or any agency or political subdivisions thereof;
- (3) "Public funds", any funds received or controlled by this state or any agency or political subdivision thereof, including, but not limited to, funds derived from federal, state or local taxes, gifts or grants from any source, public or private, federal grants or payments, or intergovernmental transfers.]

[188.205. It shall be unlawful for any public funds to be expended for the purpose of performing or assisting an abortion, not necessary to save the life of the mother, or for the purpose of encouraging or counseling a woman to have an abortion not necessary to save her life.]

[188.210. It shall be unlawful for any public employee within the scope of his employment to perform or assist an abortion, not necessary to save the life of the mother. It shall be unlawful for a doctor, nurse or other health care personnel, a social worker, a counselor or persons of similar occupation who is a public employee within the scope of his public employment to encourage or counsel a woman to have an abortion not necessary to save her life.]

[188.215. It shall be unlawful for any public facility to be used for the purpose of performing or assisting an abortion not necessary to save the life of the mother or for the purpose of encouraging or counseling a woman to have an abortion not necessary to save her life.]

[188.220. Any taxpayer of this state or its political subdivisions shall have standing to bring suit in a circuit court of proper venue

 to enforce the provisions of sections 188.200 to 188.215.]

[188.230. Nothing in this act is intended to authorize anyone other than a physician to perform an abortion.]

- [188.250. 1. No person shall intentionally cause, aid, or assist a minor to obtain an abortion without the consent or consents required by section 188.028.
- 2. A person who violates subsection 1 of this section shall be civilly liable to the minor and to the person or persons required to give the consent or consents under section 188.028. A court may award damages to the person or persons adversely affected by a violation of subsection 1 of this section, including compensation for emotional injury without the need for personal presence at the act or event, and the court may further award attorneys' fees, litigation costs, and punitive damages. Any adult who engages in or consents to another person engaging in a sex act with a minor in violation of the provisions of chapter 566, 567, 568, or 573 which results in the minor's pregnancy shall not be awarded damages under this section.
- 3. It shall not be a defense to a claim brought under this section that the abortion was performed or induced pursuant to consent to the abortion given in a manner that is otherwise lawful in the state or place where the abortion was performed or induced.
- 4. An unemancipated minor does not have capacity to consent to any action in violation of this section or section 188.028.
- 5. A court may enjoin conduct that would be in violation of this section upon petition by the attorney general, a prosecuting or circuit attorney, or any person adversely affected or who reasonably may be adversely affected by such conduct, upon a showing that such conduct:
- (1) Is reasonably anticipated to occur in the future; or
- (2) Has occurred in the past, whether with the same minor or others, and that it is not unreasonable to expect that such conduct will be repeated.]
- [188.325. 1. There is hereby established the "Missouri Alternatives to Abortion Services Program" which shall be administered by a state agency or agencies, as designated by appropriations to such or each agency. The alternatives to abortion services program shall consist of services or counseling to pregnant women and continuing for one year after birth to

assist women in carrying their unborn children to term instead of having abortions, and to assist women in caring for their dependent children or placing their children for adoption.

- 2. Services provided under the alternatives to abortion program shall include but not be limited to the following:
  - (1) Prenatal care;
  - (2) Medical and mental health care;
  - (3) Parenting skills;
  - (4) Drug and alcohol testing and treatment;
  - (5) Child care, and newborn and infant

care;

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- (6) Housing and utilities;
- (7) Educational services;
- (8) Food, clothing, and supplies relating to pregnancy, newborn care, and parenting;
  - (9) Adoption assistance;
  - (10) Job training and placement;
  - (11) Establishing and promoting

responsible paternity;

- (12) Ultrasound services;
- (13) Case management;
- (14) Domestic abuse protection; and
- (15) Transportation.
- 3. Actual provision and delivery of services and counseling shall be dependent on client needs and not otherwise prioritized by the agency or agencies administering the program. Services and counseling shall be available only during pregnancy and continuing for one year after birth, and shall exclude any family planning services. The agency or agencies administering the program may contract with other public or private agencies or entities to provide the services or counseling on behalf of the agency or agencies administering the program. Such other public or private agencies or entities may provide additional services or counseling, or services or counseling for more than one year after birth, that are not funded under the alternatives to abortion services program, as long as such services or counseling are not inconsistent with the provisions of this section. Contractors for the alternatives to abortion services program may also be contractors for the alternatives to abortion public awareness program established in section 188.335.
- 4. The agency or agencies administering the program shall to the greatest extent possible supplement and match moneys appropriated for the alternatives to abortion services program with federal and other public moneys and with private moneys. The agency or agencies administering the program shall

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prioritize such additional federal, other public, and private moneys so that they are used preferentially for the alternatives to abortion services program and the alternatives to abortion public awareness program.

- 5. The alternatives to abortion services program and the moneys expended under this section shall not be used to perform or induce, assist in the performing or inducing of or refer for abortions. Moneys expended under this section shall not be granted to organizations or affiliates of organizations that perform or induce, assist in the performing or inducing of or refer for abortions.]
- [188.335. 1. There is hereby established the "Missouri Alternatives to Abortion Public Awareness Program" which shall be administered by a state agency or agencies, as designated by appropriations to such or each agency.
- The purpose of the alternatives to abortion public awareness program is to help pregnant women at risk for having abortions to be made aware of the alternatives to abortion agencies located and alternatives to abortion services available to them in their local communities. The alternatives to abortion public awareness program shall include the development and promotion of a website which provides a geographically indexed list of alternatives to abortion agencies as well as contractors for the alternatives to abortion services program established in section 188.325. As used in this section, "alternatives to abortion agencies" means agencies exempt from income taxation pursuant to the United States Internal Revenue Code that offer alternatives to abortion services as defined within section 188.325, including but not limited to maternity homes, pregnancy resource centers, and agencies commonly known and referred to as crisis pregnancy centers. The alternatives to abortion public awareness program may also include but need not be limited to the use of television, radio, outdoor advertising, newspapers, magazines, and other print media, and the internet to provide information on these alternatives to abortion agencies and services. The state agency or agencies administering the alternatives to abortion public awareness program are encouraged to give first preference to contracting with private agencies or entities, which are exempt from income taxation pursuant to the United States Internal Revenue Code, to conduct the alternatives to abortion public awareness program. Contractors for the alternatives to abortion public awareness

program may also be contractors for the alternatives to abortion services program established in section 188.325.

3. The agency or agencies administering the program shall to the greatest extent possible supplement and match moneys appropriated for the alternatives to abortion public awareness program with federal and other public moneys and with private moneys. The agency or agencies administering the program shall prioritize such additional federal, other public, and private moneys so that they are used preferentially for the alternatives to abortion public awareness program and the alternatives to abortion services program.

- 4. The alternatives to abortion public awareness program and the moneys expended under this section shall not be used to perform or induce, assist in the performing or inducing of or refer for abortions. Moneys expended under this section shall not be granted to organizations or affiliates of organizations that perform or induce, assist in the performing or inducing of or refer for abortions.]
- [188.375. 1. This section shall be known and may be cited as the "Late-Term Pain-Capable Unborn Child Protection Act".
- 2. As used in this section, the phrase "late-term pain-capable unborn child" shall mean an unborn child at twenty weeks gestational age or later.
- 3. Notwithstanding any other provision of law to the contrary, no abortion shall be performed or induced upon a woman carrying a late-term pain-capable unborn child, except in cases of medical emergency. Any person who knowingly performs or induces an abortion of a late-term pain-capable unborn child in violation of this subsection shall be guilty of a class B felony, as well as subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of this subsection shall not be prosecuted for a conspiracy to violate the provisions of this subsection.
- 4. It shall be an affirmative defense for any person alleged to have violated the provisions of subsection 3 of this section that the person performed or induced an abortion because of a medical emergency. The defendant shall have the burden of persuasion that the defense is more probably true than not.
- 5. Prosecution under subsection 3 of this section shall bar prosecution under section188.056, 188.057, or 188.058 if

prosecution under such sections would violate the provisions of Amendment V to the Constitution of the United States or Article I, Section 19 of the Constitution of Missouri.

- When in cases of medical emergency a physician performs or induces an abortion upon a woman in her third trimester carrying a lateterm pain-capable unborn child, the physician shall utilize the available method or technique of abortion most likely to preserve the life or health of the unborn child. In cases where the method or technique of abortion most likely to preserve the life or health of the unborn child would present a greater risk to the life or health of the woman than another legally permitted and available method or technique, the physician may utilize such other method or technique. In all cases where the physician performs or induces an abortion upon a woman during her third trimester carrying a late-term pain-capable unborn child, the physician shall certify in writing the available method or techniques considered and the reasons for choosing the method or technique employed.
- 7. When in cases of medical emergency a physician performs or induces an abortion upon a woman during her third trimester carrying a lateterm pain-capable unborn child, there shall be in attendance a physician other than the physician performing or inducing the abortion who shall take control of and provide immediate medical care for a child born as a result of the abortion.
- 8. Any physician who knowingly violates any of the provisions of subsection 6 or 7 of this section shall be quilty of a class D felony, as well as subject to suspension or revocation of his or her professional license by his or her professional licensing board. A woman upon whom an abortion is performed or induced in violation of subsection 6 or 7 of this section shall not be prosecuted for a conspiracy to violate the provisions of those subsections.
- 9. If any one or more provisions, subsections, sentences, clauses, phrases, or words of this section or the application thereof to any person, circumstance, or period of gestational age is found to be unenforceable, unconstitutional, or invalid by a court of competent jurisdiction, the same is hereby declared to be severable and the balance of the section shall remain effective notwithstanding such unenforceability, unconstitutionality, or invalidity. The general assembly hereby declares that it would have passed this section, and each provision, subsection, sentence,

clause, phrase, or word thereof, irrespective of the fact that any one or more provisions, subsections, sentences, clauses, phrases, or words of the section, or the application of the section to any person, circumstance, or period of gestational age, would be declared unenforceable, unconstitutional, or invalid.]

[194.390. Nothing in sections 194.375 to 194.390 shall be construed to prohibit a woman's ability to obtain a legal abortion.]

[208.655. No funds used to pay for insurance or for services pursuant to sections 208.631 to 208.657 may be expended to encourage, counsel or refer for abortion unless the abortion is done to save the life of the mother or if the unborn child is the result of rape or incest. No funds may be paid pursuant to sections 208.631 to 208.657 to any person or organization that performs abortions or counsels or refers for abortion unless the abortion is done to save the life of the mother or if the unborn child is the result of rape or incest.]

- [334.245. 1. Notwithstanding any other provision of law to the contrary that may allow a person to provide services relating to pregnancy, including prenatal, delivery, and postpartum services, no person other than a licensed physician is authorized to perform or induce an abortion.
- 2. Any person who violates the provisions of this section is guilty of a class B felony.]
- [376.805. 1. No health insurance contracts, plans, or policies delivered or issued for delivery in the state shall provide coverage for elective abortions except by an optional rider for which there must be paid an additional premium. For purposes of this section, an "elective abortion" means an abortion for any reason other than a spontaneous abortion or to prevent the death of the female upon whom the abortion is performed.
- 2. Subsection 1 of this section shall be applicable to all contracts, plans or policies of:
- (1) All health insurers subject to this chapter; and
- (2) All nonprofit hospital, medical, surgical, dental, and health service corporations subject to chapter 354; and
  - (3) All health maintenance organizations.
- 3. No health insurance exchange established within this state or any health insurance exchange administered by the federal government or its agencies within this state shall offer health insurance contracts, plans,

or policies that provide coverage for elective abortions, nor shall any health insurance exchange operating within this state offer coverage for elective abortions through the purchase of an optional rider.

- 4. This section shall be applicable only to contracts, plans or policies written, issued, renewed or revised after September 28, 1983. For the purposes of this subsection, if new premiums are charged for a contract, plan or policy, it shall be determined to be a new contract, plan or policy.]
- [565.300. 1. This section shall be known and may be cited as the "Infant's Protection Act".
- 2. As used in this section, and only in this section, the following terms shall mean:
- (1) "Born", complete separation of an intact child from the mother regardless of whether the umbilical cord is cut or the placenta detached;
- (2) "Living infant", a human child, born or partially born, who is alive, as determined in accordance with the usual and customary standards of medical practice and is not dead as determined pursuant to section 194.005, relating to the determination of the occurrence of death, and has not attained the age of thirty days post birth;
- (3) "Partially born", partial separation of a child from the mother with the child's head intact with the torso. If vaginally delivered, a child is partially separated from the mother when the head in a cephalic presentation, or any part of the torso above the navel in a breech presentation, is outside the mother's external cervical os. If delivered abdominally, a child is partially separated from the mother when the child's head in a cephalic presentation, or any part of the torso above the navel in a breech presentation, is outside the mother's external abdominal wall.
- 3. A person commits the offense of infanticide if he or she causes the death of a living infant with the purpose to cause said death by an overt act performed when the infant is partially born or born.
- 4. The offense of infanticide is a class A felony.
- 5. A physician using procedures consistent with the usual and customary standards of medical practice to save the life of the mother during pregnancy or birth or to save the life of any unborn or partially born child of the same pregnancy shall not be criminally responsible under this section. In no event shall the

mother be criminally responsible pursuant to this section for the acts of the physician if the physician is not held criminally responsible pursuant to this section.

- 6. This section shall not apply to any person who performs or attempts to perform a legal abortion if the act that causes the death is performed prior to the child being partially born, even though the death of the child occurs as a result of the abortion after the child is partially born.
- 7. Only that person who performs the overt act required under subsection 3 of this section shall be culpable under this section, unless a person, with the purpose of committing infanticide, does any act which is a substantial step towards the commission of the offense which results in the death of the living infant. A "substantial step" is conduct which is strongly corroborative of the firmness of the actor's purpose to complete the commission of the offense.
- 8. Nothing in this section shall be interpreted to exclude the defenses otherwise available to any person under the law including defenses provided pursuant to chapters 562 and 563.]
- [574.200. 1. A person commits the offense of interference with medical assistance if he or she, while serving in his or her capacity as an employee of an abortion facility:
- (1) Knowingly orders or requests medical personnel to deviate from any applicable standard of care or ordinary practice while providing medical assistance to a patient for reasons unrelated to the patient's health or welfare; or
- (2) Knowingly attempts to prevent medical personnel from providing medical assistance to a patient in accordance with all applicable standards of care or ordinary practice for reasons unrelated to the patient's health or welfare.
- 2. The offense of interference with medical assistance is a class A misdemeanor.
- 3. For purposes of this section, the term "medical personnel" shall include, but not be limited to, the following:
- (1) Physicians and surgeons licensed under chapter 334;
  - (2) Nurses licensed under chapter 335;
- (3) Emergency medical services personnel as defined in section 190.600; or
- (4) Any person operating under the supervision of such medical personnel.]

Section B. Any federal act, law, treaty, decision, 2 order, rule, or regulation that purports to supersede, stay, or overrule section A of this act is in violation of the 3 Constitution of the state of Missouri and the Constitution 4 of the United States and is therefore void. The state of 5 6 Missouri and its political subdivisions, and agents thereof, are not required to enter an appearance, special or 7 8 otherwise, in any federal suit challenging this act. Section C. Because immediate action is necessary to 2 protect the unborn children in the state of Missouri, section A of this act is deemed necessary for the immediate 3 preservation of the public health, welfare, peace, and 4 5 safety, and is hereby declared to be an emergency act within 6 the meaning of the constitution, and section A of this act 7 shall be in full force and effect upon its passage and 8 approval.

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