FIRST REGULAR SESSION

SENATE BILL NO. 391

101ST GENERAL ASSEMBLY

INTRODUCED BY SENATOR MOON.

0038S.02I

AN ACT

ADRIANE D. CROUSE, Secretary

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, 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-five 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:

Section A. Sections 1.205, 170.015, 188.010, 188.015, 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 6 188.080, 188.100, 188.105, 188.110, 188.115, 188.120, 188.125, 7 188.160, 188.200, 188.205, 188.210, 188.215, 188.220, 188.230, 8 188.250, 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, 9 10 197.150, 197.152, 197.158, 197.160, 197.162, 197.165, 197.200, SB 391 2

- 11 197.205, 197.215, 197.220, 197.225, 197.230, 197.235, 197.240, 12 197.285, 197.287, 197.289, 197.293, 197.295, 197.315, 208.655, 13 334.100, 334.245, 376.805, 376.1199, 556.061, 562.031, 562.071, 563.026, 565.300, 574.200, 595.027, and 595.120, RSMo, are 14 repealed and forty-five new sections enacted in lieu thereof, 15 to be known as sections 1.205, 170.015, 188.010, 188.015, 16 188.020, 188.023, 188.125, 191.211, 191.320, 191.724, 191.831, 17 191.923, 191.975, 192.665, 192.667, 196.1127, 197.150, 197.152, 18 197.158, 197.160, 197.162, 197.165, 197.200, 197.205, 197.215, 19 20 197.220, 197.225, 197.230, 197.235, 197.240, 197.285, 197.287, 197.289, 197.293, 197.295, 197.315, 334.100, 376.1199, 556.061, 21 562.031, 562.071, 563.026, 565.015, 595.027, and 595.120, to 22 read as follows: 23 1.205. 1. The general assembly of this state finds
- 2 that:
- 3 (1)The life of each human being begins at conception;
- 4 (2)Unborn children have protectable interests in
- life, health, and well-being; 5
- 6 The natural parents of unborn children have protectable interests in the life, health, and well-being of 7
- their unborn child. 8
- 9 [Effective January 1, 1988,] The laws of this state
- shall be interpreted and construed to acknowledge on behalf 10
- of the unborn child at every stage of development, all the 11
- rights, privileges, and immunities available to other 12
- persons, citizens, and residents of this state[, subject 13
- only to] in accordance with the Constitution of the United 14
- States[, and decisional interpretations thereof by the 15
- 16 United States Supreme Court and specific provisions to the
- 17 contrary in the statutes and constitution of this state].
- 3. As used in this section, the term "unborn children" 18
- or "unborn child" shall include all unborn child or children 19

or the offspring of human beings from the moment of conception, as defined in section 188.015, until birth at

- 22 every stage of biological development.
- 4. Nothing in this section shall be interpreted as
- 24 creating a cause of action against a woman for indirectly
- 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:
- 4 (1) Present abstinence from sexual activity as the
- 5 preferred choice of behavior in relation to all sexual
- 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
- 10 advise students that teenage sexual activity places them at
- 11 a higher risk of dropping out of school because of the
- 12 consequences of sexually transmitted diseases and unplanned
- 13 pregnancy;
- 14 (2) Stress that sexually transmitted diseases are
- 15 serious, possible, health hazards of sexual activity.
- 16 Pupils shall be provided with the latest medical information
- 17 regarding exposure to human immunodeficiency virus, acquired
- 18 immune deficiency syndrome (AIDS), human papilloma virus,
- 19 hepatitis and other sexually transmitted diseases;
- 20 (3) Present students with the latest medically factual
- 21 information regarding both the possible side effects and
- 22 health benefits of all forms of contraception, including the
- 23 success and failure rates for the prevention of pregnancy
- 24 and sexually transmitted diseases; or shall present students

45

46

47

48 49

50

51

52

53

54

55

56

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 29 psychological consequences of preadolescent and adolescent 30 sexual activity and the consequences of adolescent 31 pregnancy, as well as the advantages of adoption, including 32 the adoption of special needs children, and the processes 33 involved in making an adoption plan;
- 34 Teach skills of conflict management, personal responsibility and positive self-esteem through discussion 35 and role-playing at appropriate grade levels to emphasize 36 37 that the pupil has the power to control personal behavior. Pupils shall be encouraged to base their actions on 38 reasoning, self-discipline, sense of responsibility, self-39 40 control, and ethical considerations, such as respect for one's self and others. Pupils shall be taught not to make 41 unwanted physical and verbal sexual advances or otherwise 42 43 exploit another person. Pupils shall be taught to resist 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;
 - (7) Teach pupils about the dangers of sexual predators, including online predators when using electronic communication methods such as the internet, cell phones, text messages, chat rooms, email, and instant messaging programs. Pupils shall be taught how to behave responsibly and remain safe on the internet and the importance of having open communication with responsible adults and reporting any 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
- 87 local school boards or charter schools, consistent with the
- 88 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.
- 92 4. The board of a school district or charter school 93 shall determine the specific content of the district's or 94 school's instruction in human sexuality, in accordance with 95 subsections 1 to 3 of this section, and shall ensure that 96 all instruction in human sexuality is appropriate to the age 97 of the students receiving such instruction.
- 98 5. A school district or charter school shall notify 99 the parent or legal guardian of each student enrolled in the 100 district or school of:
- 101 (1) The basic content of the district's or school's
 102 human sexuality instruction to be provided to the student;
 103 and
- 104 (2) The parent's right to remove the student from any 105 part of the district's or school's human sexuality 106 instruction.
- 6. A school district or charter school shall make all curriculum materials used in the district's or school's human sexuality instruction available for public inspection pursuant to chapter 610 prior to the use of such materials in actual instruction.
- 112 [7. No school district or charter school, or its
 113 personnel or agents, shall provide abortion services, or
 114 permit a person or entity to offer, sponsor, or furnish in
 115 any manner any course materials or instruction relating to
 116 human sexuality or sexually transmitted diseases to its
 117 students if such person or entity is a provider of abortion
 118 services.
- 119 8. As used in this section, the following terms mean:

- 120 (1)"Abortion", the same meaning as such term is 121 defined in section 188.015; "Abortion services": 122 (2)Performing, inducing, or assisting in the 123 performance or inducing of an abortion which is not 124 125 necessary to save the life of the mother; (b) Encouraging a patient to have an abortion or 126 127 referring a patient for an abortion, which is not necessary to save the life of the mother; or 128 129 (c) Developing or dispensing drugs, chemicals, or 130 devices intended to be used to induce an abortion which is 131 not necessary to save the life of the mother.] 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 are Life", and that Article I, Section 2 of the Constitution 4 5 of Missouri provides that all persons have a natural right to life, it is the intention of the general assembly of the 6 7 state of Missouri to: 8 Defend the right to life of all humans, born and 9 unborn: Declare that the state and all of its political 10 subdivisions are a "sanctuary of life" that protects 11 pregnant women and their unborn children; and 12 [Regulate] Abolish abortion [to the full extent 13 14 permitted by the Constitution of the United States, 15 decisions of the United States Supreme Court, and federal statutes] in this state. 16 188.015. As used in this chapter, the following terms
 - 2 mean:
 - 3 (1) "Abortion":

```
4
              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
    or her mother's womb; or
7
               The intentional termination of the pregnancy of a
8
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
    birth or to remove a dead unborn child;
12
13
          (2)
               ["Abortion facility", a clinic, physician's
    office, or any other place or facility in which abortions
14
    are performed or induced other than a hospital;
15
               "Conception", the fertilization of the ovum of a
16
    female by a sperm of a male;
17
18
                "Department", the department of health and senior
    services;
19
20
               "Down Syndrome", the same meaning as defined in
    section 191.923;
21
               "Gestational age", length of pregnancy as measured
22
23
    from the first day of the woman's last menstrual period;
          (7)] (3) "Medical emergency", a condition which, based
24
    on reasonable medical judgment, so complicates the medical
25
    condition of a pregnant woman as to necessitate the
26
27
    immediate abortion of her pregnancy to avert the death of
    the pregnant woman or for which a delay will create a
28
29
    serious risk of substantial and irreversible physical
    impairment of a major bodily function of the pregnant woman;
30
               "Physician", any person licensed to practice
31
    medicine in this state by the state board of registration
32
    for the healing arts;
33
```

34 (9) "Reasonable medical judgment", a medical judgment 35 that would be made by a reasonably prudent physician,

36 knowledgeable about the case and the treatment possibilities

- 37 with respect to the medical conditions involved;
- 38 (10)] (4) "Unborn child", the offspring of human
- 39 beings from the moment of conception until birth and at
- 40 every stage of its biological development, including the
- 41 human conceptus, zygote, morula, blastocyst, embryo, and
- 42 fetus[;
- 43 (11) "Viability" or "viable", that stage of fetal
- 44 development when the life of the unborn child may be
- 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
- 10 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,
- 16 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
- 32 from enacting, adopting, maintaining, or enforcing any
- 33 order, ordinance, rule, regulation, policy, or other similar
- 34 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.

other person.

53

38 A political subdivision of this state is preempted from enacting, adopting, maintaining, or enforcing any 39 40 order, ordinance, rule, regulation, policy, or other similar measure requiring a real estate broker, real estate 41 42 salesperson, real estate broker-salesperson, appraisal firm, appraiser, as such terms are defined in chapter 339, a 43 44 property owner, or any other person to buy, sell, exchange, 45 purchase, rent, lease, advertise for, or otherwise conduct real estate transactions for, to, or with an abortion 46 47 facility or for, to, or with a person for the purpose of performing or inducing an abortion not necessary to save the 48 life of the mother, if such requirement is contrary to the 49 religious beliefs or moral convictions of such real estate 50 broker, real estate salesperson, real estate broker-51 salesperson, appraisal firm, appraiser, property owner, or 52

- A political subdivision of this state is preempted 54 55 from enacting, adopting, maintaining, or enforcing any 56 order, ordinance, rule, regulation, policy, or other similar measure requiring an employer, employee, health plan 57 provider, health plan sponsor, health care provider, or any 58 59 other person to provide coverage for or to participate in a health plan that includes benefits that are not otherwise 60 61 required by state law.
- 62 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 64 other legal remedies, or both, as well as payment of 65 reasonable attorney's fees, costs, and expenses. 66 and remedies set forth shall not be deemed exclusive and 67 shall be in addition to any other relief or remedies 68 permitted by law. 69

- 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 prohibit a political subdivision from enacting, adopting, 76 77 maintaining, or enforcing any order, ordinance, rule, regulation, policy, or other similar measure to assist 78 79 pregnant women to carry their unborn children to term or to assist women in caring for their dependent children or 80 placing their children for adoption including, but not 81 limited to, by funding or otherwise assisting an 82 alternatives to abortion agency to provide services to such 83 women and children. 84
- 85 [10.] 6. As used in this section, [the following terms 86 mean:
- 87 (1)] "alternatives to abortion agency" shall mean:
- 88 (a) A maternity home as defined in section 135.600;
- (b) A pregnancy resource center as defined in section135.630; or
- 91 (c) An agency or entity that has the primary purpose 92 of providing services or counseling to pregnant women to 93 assist such women in carrying their unborn children to term 94 instead of having abortions and to assist such women in 95 caring for their dependent children or placing their children for adoption, as described in section 188.325, 96 regardless of whether such agency or entity is receiving 97 funding or reimbursement from the state for such purposes[; 98
 - (2) "Participate in abortion":
- 100 (a) To undergo an abortion; or

99

101 (b) To perform or induce, assist in, refer or counsel
102 for, advocate for, promote, procure, reimburse for, or
103 provide health plan coverage for an abortion not necessary

to save the life of the mother]. 104 191.211. State expenditures for new programs and 2 initiatives enacted by sections 103.178, 143.999, [188.230,] 191.231, 191.825 to 191.839, 208.177, 208.178, 208.179 and 3 208.181, 211.490, 285.240, 337.093, 374.126, 376.891 to 4 5 376.894, 431.064, 660.016, 660.017 and 660.018, and the 6 state expenditures for the new initiatives and expansion of programs enacted by revising sections 105.711 and 105.721, 7 191.520, 191.600, 198.090, 208.151, 208.152 and 208.215, as 8 provided by H.B. 564, 1993, shall be funded exclusively by 9 federal funds and the funding sources established in 10 sections 149.011, 149.015, 149.035, 149.061, 149.065, 11 149.160, 149.170, 149.180, 149.190 and 149.192, and no 12 13 future general revenue shall be appropriated to fund such 14 new programs or expansions.

191.320. The department may contract with tertiary genetic centers to provide genetic diagnostic and counseling 2 3 services, to initiate and conduct investigations of the causes, mortality, methods of treatment, prevention and cure 4 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 into regions for this purpose. The boundaries of such 10 regions, to the extent practicable, shall be contiguous with 11 12 relevant boundaries of political subdivisions and health service areas. These centers and clinics may provide 13 genetic diagnostic evaluations, treatment, counseling and 14

- 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
- 22 the mother would be endangered if the fetus were carried to
- 23 term].
 - 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
- 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.

SB 391 15

54

23 4. No governmental entity, public official, or entity acting in a governmental capacity shall discriminate against 24 25 or penalize an employee, self-employed person, employer, health plan provider, health plan sponsor, health care 26 provider, or any other person or entity because of such 27 employee's, self-employed person's, employer's, health plan 28 provider's, health plan sponsor's, health care provider's, 29 30 or other person's or entity's unwillingness, based on religious beliefs or moral convictions, to obtain or provide 31 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 cause to believe that any person or entity or group of 36 persons or entities is being, has been, or is threatened to 37 be denied any of the rights granted by this section or other 38 law that protects the religious beliefs or moral convictions 39 of such persons or entities, and such denial raises an issue 40 41 of general public importance, the attorney general may bring a civil action in any appropriate state or federal court. 42 Such complaint shall set forth the facts and request such 43 appropriate relief, including but not limited to an 44 application for a permanent or temporary injunction, 45 restraining order, mandamus, an order under the federal 46 Administrative Procedure Act, Religious Freedom Restoration 47 48 Act, or other federal law, an order under section 1.302 relating to free exercise of religion, or other order 49 against the governmental entity, public official, or entity 50 51 acting in a governmental capacity responsible for such denial or threatened denial of rights, as the attorney 52 general deems necessary to ensure the full enjoyment of the 53 rights granted by law. Nothing contained herein shall

```
55
    preclude a private cause of action against a governmental
    entity, public official, or entity acting in a governmental
56
57
    capacity by any person or entity or group of persons or
    entities aggrieved by a violation of this section or other
58
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
64
         6. For purposes of this section, "sterilization" shall
    mean any elective medical procedure for which the sole
65
    purpose is to make an individual incapable of reproduction.
66
         191.831.
                    1.
                        There is hereby established in the state
2
    treasury a "Health Initiatives Fund", to which shall be
3
    deposited all revenues designated for the fund under
    subsection 8 of section 149.015, and subsection 3 of section
4
5
    149.160, and section 167.609, and all other funds donated to
    the fund or otherwise deposited pursuant to law.
6
                                                       The state
7
    treasurer shall administer the fund. Money in the fund
    shall be appropriated to provide funding for implementing
8
9
    the new programs and initiatives established by sections
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
12
    191.520 and 191.600, sections 208.151 and 208.152, and
    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
    208.178, 208.179 and 208.181, 211.490, 285.240, 337.093,
15
    374.126, 376.891 to 376.894, 431.064, 660.016, 660.017 and
16
    660.018; in addition, not less than fifteen percent of the
17
    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
```

- 21 rehabilitation program of the department of mental health,
- 22 or its successor program, and a C-STAR pilot project
- 23 developed by the director of the division of alcohol and
- 24 drug abuse and the director of the department of corrections
- 25 as an alternative to incarceration, as provided in
- 26 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
- 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.
- 38 2. The director of the division of alcohol and drug
- 39 abuse and the director of the department of corrections
- 40 shall develop and administer a pilot project to provide a
- 41 comprehensive substance abuse treatment and rehabilitation
- 42 program as an alternative to incarceration, hereinafter
- 43 referred to as "Alt-care". Alt-care shall be funded using
- 44 money provided under subsection 1 of this section through
- 45 the Missouri Medicaid program, the C-STAR program of the
- 46 department of mental health, and the division of alcohol and
- 47 drug abuse's purchase-of-service system. Alt-care shall
- 48 offer a flexible combination of clinical services and living
- 49 arrangements individually adapted to each client and her
- 50 children. Alt-care shall consist of the following
- 51 components:
- 52 (1) Assessment and treatment planning;

55

64

65

66

67

68

69

70

71

72

7374

75 76

77

78

79

80

81

53 (2) Community support to provide continuity,
54 monitoring of progress and access to services and resources;

- (3) Counseling from individual to family therapy;
- 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 61 living skills; and
- (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 parent of a child or children under the age of twelve years, and who has pleaded guilty to or found guilty of violating the provisions of chapter 195, and whose controlled substance abuse was a precipitating or contributing factor in the commission of the offense, and who is placed on probation may be required, as a condition of probation, to participate in Alt-care, if space is available in the pilot project area. Determinations of eligibility for the program, placement, and continued participation shall be made by the division of alcohol and drug abuse, in consultation with the department of corrections.
 - 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

- 4 timely and informative counseling about the conditions being
- 5 tested for, the accuracy of such tests, and resources for
- 6 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
- 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
- 26 health or development.
- 27 3. When a prenatally diagnosed condition, including
- 28 but not limited to Down Syndrome, becomes known as a result
- 29 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
- 38 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 special needs adoption tax credits;
- 20 (d) Options for birth parents in choosing adoptive
- 21 parents;

24

46

47

48

49

(e) Protection for and rights of birth parents and adoptive parents prior to and following the adoption;

- (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
- (h) Referrals to appropriate counseling services,
 including but not be limited to counseling services for
 parents who are considering retaining custody of their
 children, placing their children for adoption, or becoming
 foster or adoptive parents[; but excluding any referrals for
 abortion or to abortion facilities];
- (3) Making such educational materials available 35 through state and local public health clinics, public 36 37 hospitals, family planning clinics, [abortion facilities as 38 defined in section 188.015,] maternity homes as defined in section 135.600, child-placing agencies licensed pursuant to 39 sections 210.481 to 210.536, attorneys whose practice 40 involves private adoptions, in vitro fertilization clinics 41 and private physicians for distribution to their patients 42 who request such educational materials. Such materials 43 shall also be available to the public through the department 44 45 of social services' internet website;
 - (4) Establishing a toll-free telephone number for information on adoption and foster care, and to answer questions and assist persons inquiring about becoming adoptive or foster parents.
- 3. In addition, the department may establish and implement an ongoing advertising campaign for the recruitment of adoptive and foster care families, with a 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
- 19 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 22 infections within hospitals, ambulatory surgical centers, abortion facilities, and other facilities; 23 24 "Nosocomial infection incidence rate", a risk-25 adjusted measurement of new cases of nosocomial infections by procedure or device within a population over a given 26 27 period of time, with such measurements defined by rule of the department pursuant to subsection 3 of section 192.667 28 29 for use by all hospitals, ambulatory surgical centers, 30 [abortion facilities,] and other facilities in complying with the requirements of the Missouri nosocomial infection 31 control act of 2004; 32 "Other facility", a type of facility determined to 33 be a source of infections and designated by rule of the 34 35 department pursuant to subsection 11 of section 192.667; 36 (9) "Patient abstract data", data submitted by hospitals which includes but is not limited to date of 37 38 birth, sex, race, zip code, county of residence, admission date, discharge date, principal and other diagnoses, 39 including external causes, principal and other procedures, 40 procedure dates, total billed charges, disposition of the 41 patient and expected source of payment with sources 42 43 categorized according to Medicare, Medicaid, other government, workers' compensation, all commercial payors 44 coded with a common code, self-pay, no charge and other. 45 192.667. 1. All health care providers shall at least 2 annually provide to the department charge data as required 3 by the department. All hospitals shall at least annually

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

7 inpatients. Ambulatory surgical centers [and abortion

- 8 facilities] as defined in section 197.200 shall provide
- 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.
- 12 2. The department shall collect data on the incidence
- 13 of health care-associated infections from hospitals,
- 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
- 19 to streamline government and to eliminate duplicative
- 20 reporting requirements, if the Centers for Medicare and
- 21 Medicaid Services, or its successor entity, requires
- 22 hospitals to submit health care-associated infection data,
- 23 then hospitals and the department shall not be required to
- 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
- 28 by hospitals on the Centers for Medicare and Medicaid
- 29 Services' Hospital Compare website, or its successor.
- 3. The department shall promulgate rules specifying
- 31 the standards and procedures for the collection, analysis,
- 32 risk adjustment, and reporting of the incidence of health
- 33 care-associated infections and the types of infections and
- 34 procedures to be monitored pursuant to subsection 13 of this
- 35 section. In promulgating such rules, the department shall:
- 36 (1) Use methodologies and systems for data collection
- 37 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 45 to the department regarding the Centers for Medicare and Medicaid Services' health care-associated infection data 46 47 collection, analysis, and public reporting requirements for hospitals, ambulatory surgical centers, and other facilities 48 in the federal Centers for Disease Control and Prevention's 49 50 National Healthcare Safety Network, or its successor, in lieu of all or part of the data collection, analysis, and 51 public reporting requirements of this section. The advisory 52 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 56 the National Healthcare Safety Network for risk adjustment and analysis of hospital submitted data; and the use of the 57 Centers for Medicare and Medicaid Services' Hospital Compare 58 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
- (1) Whether the public is afforded the same or greater access to facility-specific infection control indicators and 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 the department shall implement guidelines from the federal 83 84 Centers for Disease Control and Prevention's National 85 Healthcare Safety Network, or its successor. It shall be a 86 condition of licensure for hospitals that meet the minimum 87 public reporting requirements of the National Healthcare Safety Network and the Centers for Medicare and Medicaid 88 Services to participate in the National Healthcare Safety 89 Network, or its successor. Such hospitals shall permit the 90 91 National Healthcare Safety Network, or its successor, to 92 disclose facility-specific infection data to the department 93 as required under this section, and as necessary to provide 94 the public reports required by the department. It shall be a condition of licensure for any ambulatory surgical center 95 [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

101

102

103

104

105

106

107

108

109

110

111

99 department as required under this section, and as necessary 100 to provide the public reports required by the department.

- of data which has been submitted to the department of health and senior services or the department of social services under any other provision of law. The department of health and senior services shall accept data submitted by associations or related organizations on behalf of health care providers by entering into binding agreements negotiated with such associations or related organizations to obtain data required pursuant to section 192.665 and this section. A health care provider shall submit the required information to the department of health and senior services:
- 112 (1) If the provider does not submit the required data 113 through such associations or related organizations;
- 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.
- 120 Information obtained by the department under the provisions of section 192.665 and this section shall not be 121 122 public information. Reports and studies prepared by the 123 department based upon such information shall be public information and may identify individual health care 124 providers. The department of health and senior services may 125 authorize the use of the data by other research 126 127 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
- which would enable any person to determine any health care

- 131 provider's negotiated discounts with specific preferred
- 132 provider organizations or other managed care organizations.
- 133 The department shall not release data in a form which could
- 134 be used to identify a patient. Any violation of this
- 135 subsection is a class A misdemeanor.
- 136 8. The department shall undertake a reasonable number
- of studies and publish information, including at least an
- 138 annual consumer guide, in collaboration with health care
- 139 providers, business coalitions and consumers based upon the
- information obtained pursuant to the provisions of section
- 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
- 144 any publication to review and comment on the publication
- 145 prior to its publication or release for general use. The
- 146 publication shall be made available to the public for a
- 147 reasonable charge.
- 148 9. Any health care provider which continually and
- 149 substantially, as these terms are defined by rule, fails to
- 150 comply with the provisions of this section shall not be
- 151 allowed to participate in any program administered by the
- 152 state or to receive any moneys from the state.
- 153 10. A hospital, as defined in section 197.020,
- 154 aggrieved by the department's determination of ineligibility
- for state moneys pursuant to subsection 9 of this section
- may appeal as provided in section 197.071. An ambulatory
- 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.
- 161 11. The department of health may promulgate rules
- 162 providing for collection of data and publication of the

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
- 166 from reporting and disclosure of such infections.
- 167 12. By January 1, 2017, the advisory panel shall
- 168 recommend and the department shall adopt in regulation with
- an effective date of no later than January 1, 2018, the
- 170 requirements for the reporting of the following types of
- 171 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;
- 187 (2) Central line-related bloodstream infections;
- 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
- 234 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
- 253 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 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 263 evaluate that hospitalized patients receive, in accordance 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 section shall meet the National Healthcare Safety Network 268 269 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 conditions of participation promulgated by the Centers for 272 273 Medicare and Medicaid Services requiring the electronic reporting of antibiotic use or antibiotic resistance by 274 hospitals become effective. When such antimicrobial usage 275 or resistance reporting takes effect, hospitals shall 276 277 authorize the National Healthcare Safety Network, or its successor, to disclose to the department facility-specific 278 279 information reported to the AUR Module. Facility-specific 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 determines on a case-by-case basis that the release of such 284

health emergency. Nothing in this section shall prohibit a hospital from voluntarily reporting antibiotic use or

information is necessary to protect persons in a public

285

288

antibiotic resistance data through the National Healthcare

289 Safety Network, or its successor, prior to the effective

290 date of the conditions of participation requiring the

- 291 reporting.
- 292 21. The department shall make a report to the general
- 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
 - 3 196.1124 shall be subject to the provisions of this section.
 - 4 2. As used in this section, the following terms shall
 - 5 mean:
 - 6 (1) ["Abortion services" include performing, inducing,
 - 7 or assisting with abortions, as defined in section 188.015,
 - 8 or encouraging patients to have abortions, referring
 - 9 patients for abortions not necessary to save the life of the
 - 10 mother, or development of drugs, chemicals, or devices
- intended to be used to induce an abortion;
- 12 (2)] "Child", a human being recognized as a minor
- 13 pursuant to the laws of this state, including if in vivo, an
- unborn child as defined in section 188.015 and if in vitro,
- 15 a human being at any of the stages of biological development
- 16 of an unborn child from conception or inception onward;
- [(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

26 oocyte 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:

48

49

50

51

52

53

54

55

- 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

pulmonary, and infectious disease.

63

64

65

66

67

68

69

70 71

72

73

74

75

76

77

78

79

80

81

82

83

84

85

86

87

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
knowledge; translational research, including translational
knowledge in a usable form; and clinical research, including
but not limited to health research in human development and
aging, cancer, endocrine, cardiovascular, neurological,

3. Public funds shall not be expended, paid, or granted to or on behalf of an existing or proposed research project that involves [abortion services,] human cloning[,] or prohibited human research. A research project that receives an award of public funds shall not share costs with another research project, person, or entity not eligible to receive public funds pursuant to this subsection; provided that a research project that receives an award of public funds may pay a pro rata share of facilities and administrative costs determined in the award of public funds according to standards that ensure that public funds do not in any way subsidize facilities and administrative costs of other research projects, persons, or entities not eligible to receive public funds pursuant to this subsection. application for an award of public funds shall set forth the proposed rates of pro rata cost reimbursement and shall provide supporting data and rationale for such rates. All applicants for and recipients of awards of public funds shall comply with the cost accounting principles set forth in Part 9905 of Title 48 of the Code of Federal Regulations, or successor regulations, in connection with the application for and administration of the research project. All moneys derived from an award of public funds shall be expended only 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 other person or entity. No moneys derived from an award of 91 public funds shall be passed through to any other research 92 93 project, person, or entity unless included in the original application for the award of public funds or in subsequent 94 amendments or requests to use separate contractors. A 95 96 research project that receives an award of public funds 97 shall maintain financial records that demonstrate strict compliance with this subsection. Any audit conducted 98 pursuant to any grant or contract awarding public funds 99 100 shall also certify whether there is compliance with this 101 subsection and shall note any noncompliance as a material 102 audit finding.

- 103 The provisions of this section shall inure to the 104 benefit of all residents of this state. Any taxpayer of this state or any political subdivision of this state shall 105 106 have standing to bring suit against the state of Missouri or any official, department, division, agency, or political 107 subdivision of this state, and any recipient of public funds 108 109 who or which is in violation of this subsection in any circuit court with jurisdiction to enforce the provisions of 110 111 this section.
- 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

197.285.

13

120 or any appropriation declared by any court to be subject to 121 this section shall be void, invalid, and unenforceable. 197.150. The department shall require that each 2 hospital, ambulatory surgical center, [abortion facility,] and other facility have in place procedures for monitoring 3 4 and enforcing compliance with infection control regulations and standards. Such procedures shall be coordinated with 5 6 administrative staff, personnel staff, and the quality 7 improvement program. Such procedures shall include, at a 8 minimum, requirements for the facility's infection control program to conduct surveillance of personnel with a portion 9 of the surveillance to be done in such manner that employees 10 and medical staff are observed without their knowledge of 11 such observation, provided that this unobserved surveillance 12 requirement shall not be considered to be grounds for 13 14 licensure enforcement action by the department until the 15 department establishes clear and verifiable criteria for determining compliance. Such surveillance also may include 16 monitoring of the rate of use of hand hygiene products. 17 197.152. 1. Infection control officers as defined in federal regulation and other hospital[,] and ambulatory 2 3 surgical center[, and abortion facility] employees shall be 4 protected against retaliation by the hospital[,] or 5 ambulatory surgical center[, or abortion facility] for 6 reporting infection control concerns pursuant to section 197.285 and shall be entitled to the full benefits of that 7 section. Such infection control officers shall report any 8 interference in the performance of their duties by their 9 supervisors to the hospital[,] or ambulatory surgical 10 11 center[, or abortion facility] compliance officer established by and empowered to act pursuant to section 12

```
14
              Infection control officers as defined in federal
    regulation shall also have the authority to order the
15
16
    cessation of a practice that falls outside accepted
    practices as defined by appropriate state and federal
17
    regulatory agencies, accreditation organizations, or the
18
19
    standards adopted by the Centers for Disease Control and
    Prevention or the Association of Professionals in Infection
20
21
    Control and Epidemiology. The hospital[,] or ambulatory
22
    surgical center[, or abortion facility] may require that
23
    such a cessation order of an infection control officer be
24
    endorsed by the hospital[,] or ambulatory surgical center[,
    or abortion facility] chief executive officer or his or her
25
    designee before taking effect. The hospital[,] or
26
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
30
    directive of the infection control officer. The department
    shall promulgate rules governing documentation of such
31
32
    events.
             Members of the medical staff who report in good
33
34
    faith infection control concerns to the hospital[,] or
    ambulatory surgical center[, or abortion facility]
35
    administration or medical staff leadership shall not be
36
37
    subject to retaliation or discrimination for doing so.
    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
```

197.158. Every hospital[,] and ambulatory surgery

center[, and abortion facility] shall, beginning June 1,

2006, provide each patient an opportunity to submit to the

42

bylaws.

- 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,]
- 11 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
- 15 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
- 5 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:
- 4 (1) ["Abortion facility", as such term is defined in
- 5 section 188.015;
- 6 (2)] "Ambulatory surgical center", any public or
- 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
- 11 than twenty-three hours within the establishment, provided,
- 12 however, that nothing in this definition shall be construed
- 13 to include the offices of dentists currently licensed
- 14 pursuant to chapter 332;
- 15 [(3)] (2) "Dentist", any person currently licensed to
- 16 practice dentistry pursuant to chapter 332;
- [(4)] (3) "Department", the department of health and
- 18 senior services:
- 19 [(5)] (4) "Governmental unit", any city, county or
- 20 other political subdivision of this state, or any
- 21 department, division, board or other agency of any political
- 22 subdivision of this state;
- [(6)] (5) "Person", any individual, firm, partnership,
- 24 corporation, company, or association and the legal
- 25 successors thereof;
- 26 [(7)] (6) "Physician", any person currently licensed
- 27 to practice medicine pursuant to chapter 334;
- [(8)] (7) "Podiatrist", any person currently licensed
- 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
    unit shall establish, conduct or maintain an ambulatory
3
    surgical center [or abortion facility] in this state without
4
    a license under sections 197.200 to 197.240 issued by the
5
6
    department of health and senior services.
7
             Nothing in sections 197.200 to 197.240 shall be
    construed to impair or abridge the authority of a
8
9
    governmental unit to license ambulatory surgical centers [or
    abortion facilities], provided that any ordinance of a
10
    governmental unit shall require compliance with all rules,
11
    regulations, and standards adopted by the department to
12
    implement the provisions of sections 197.200 to 197.240.
13
         197.215. 1. Upon receipt of an application for a
2
    license, the department of health and senior services shall
3
    issue a license if the applicant and ambulatory surgical
4
    center facilities [or abortion facilities] meet the
    requirements established under sections 197.200 to 197.240,
5
    and have provided affirmative evidence that:
6
7
             Each member of the surgical staff is a physician,
8
    dentist or podiatrist currently licensed to practice in
9
    Missouri[, and each person authorized to perform or induce
10
    abortions is a physician currently licensed to practice in
11
    Missouril;
12
              Surgical procedures in ambulatory surgical centers
13
    shall be performed only by physicians, dentists or
14
    podiatrists, who at the time are privileged to perform
    surgical procedures in at least one licensed hospital in the
15
    community in which the ambulatory surgical center is
16
17
    located, thus providing assurance to the public that
    patients treated in the center shall receive continuity of
18
```

care should the services of a hospital be required;

19

- 20 alternatively, applicant shall submit a copy of a current
- 21 working agreement with at least one licensed hospital in the
- 22 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:
- 7 (1) The applicant, or if the applicant is a firm,
- 8 partnership or association, any of its members, or if a
- 9 corporation, any of its officers or directors, or the person
- 10 designated to manage or supervise the facility, has been
- 11 finally adjudicated and found guilty, or entered a plea of
- 12 guilty or nolo contendere, in a criminal prosecution under
- 13 the laws of any state or of the United States, for any
- 14 offense reasonably related to the qualifications, functions,
- or duties of an ambulatory surgical center [or of an
- abortion facility], or for any offense an essential element
- 17 of which is fraud, dishonesty, or an act of violence, or for
- 18 any offense involving moral turpitude, whether or not
- 19 sentence is imposed;
- 20 (2) The licensure status or record of the applicant,
- 21 or if the applicant is a firm, partnership or association,
- 22 of any of its members, or if a corporation, of any of its
- 23 officers or directors, or of the person designated to manage
- 24 or supervise the facility, from any other state, federal
- 25 district or land, territory or commonwealth of the United
- 26 States, or of any foreign country where the applicant has
- 27 done business in a similar capacity indicates that granting
- 28 a license to the applicant would be detrimental to the
- 29 interests of the public.
 - 197.225. [1.] The department of health and senior
- 2 services may adopt such reasonable rules, regulations, and
- 3 standards for the types of services provided as are
- 4 necessary to carry out the provisions of sections 197.200 to
- 5 197.240, and to assure quality patient care and patient
- 6 safety, which shall include, but not be limited to:

- 7 (1) Construction of the facility including, but not
- 8 limited to, plumbing, heating, lighting, and ventilation
- 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
- 12 personnel, having responsibility for any part of the care
- 13 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
- 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.
- 24 [2. The department of health and senior services may
- 25 adopt separate rules, regulations, or standards to apply to
- 26 ambulatory surgical centers and to apply to abortion
- 27 facilities.
- 28 3. Abortion facilities shall be required to maintain a
- 29 written protocol for managing medical emergencies and the
- 30 transfer of patients requiring further emergency care to a
- 31 hospital within a reasonable distance from the abortion
- 32 facility.]
 - 197.230. 1. The department of health and senior
- 2 services shall make, or cause to be made, such inspections
- 3 and investigations as it deems necessary. The department
- 4 may delegate its powers and duties to investigate and
- 5 inspect ambulatory surgical centers [or abortion facilities]
- 6 to an official of a political subdivision having a

- 7 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
- 16 department shall make or cause to be made an unannounced on-
- 17 site inspection and investigation at least annually. Such
- 18 on-site inspection and investigation shall include, but not
- 19 be limited to, the following areas:
- 20 (1) Compliance with all statutory and regulatory
- 21 requirements for an abortion facility, including
- 22 requirements that the facility maintain adequate staffing
- 23 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
- 26 that continuous physician services or registered
- 27 professional nursing services be provided whenever a patient
- 28 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
- 3 abortion facility] without a license required by sections
- 4 197.200 to 197.240 is quilty of a class A misdemeanor and,
- 5 upon conviction, shall be subject to a fine of not more than

SB 391 47

6 five hundred dollars. Each day of continuing violation 7 shall constitute a separate offense.

8 The attorney general shall represent the department of health and senior services and shall institute an action 9 10 in the name of the state for injunctive or other relief against any person or governmental unit to restrain or 11 prevent the establishment, conduct, management, or operation 12 13 of an ambulatory surgical center [or abortion facility] without a license issued pursuant to the provisions of 14 15 sections 197.200 to 197.240.

Any person operating, conducting, managing, or 16 establishing an ambulatory surgical center [or abortion 17 facility] who, in the course of advertising, promoting, or 18 otherwise publicizing the activities, business, location, or 19 any other matter concerning the operations of said 20 ambulatory surgical center [or abortion facility], uses or 21 22 employs in any manner the words "State, Missouri, State of Missouri, Department of Health and Senior Services, the 23 initials 'Mo.'," or any emblem of the state of Missouri or 24 the department of health and senior services, for the 25 purpose of conveying or in any manner reasonably calculated 26 27 to convey the false impression that the state of Missouri or any department, agency, bureau, or instrumentality thereof 28 29 is involved in the business of said ambulatory surgical center [or abortion facility], or took part in said 30 advertisement, promotion, publicity, or other statement, 31 shall be subject to a fine of one hundred dollars per day 32 for each day during the period beginning with the day said 33 advertisement, promotion, publication, or statement first 34 appears and ending on the day on which it is withdrawn. 35

197.240. After September 28, 1975, no individual or group health insurance policy of insurance providing

2

SB 391 48

11

```
coverage on an expense incurred basis, nor individual or
3
4
    group service or indemnity type contract issued by a
5
    nonprofit corporation, nor any self-insured group health
    benefit plan or trust, of any kind or description, shall be
6
7
    issued or payment accepted therefor in renewal or
8
    continuation thereof unless coverage for any service
    performed in an ambulatory surgical center [or abortion
9
10
    facility] is provided for therein if such service would have
    been covered under the terms of the policy or contract as an
11
12
    eligible inpatient service, except as provided in section
    376.805. Nothing in this section shall apply to a group
13
    contract, plan or trust which provides health care and
14
15
    surgical care directly to its members and their dependents.
    Nothing in this section shall be construed to mandate
16
    coverage under an individual or group health insurance
17
    policy of insurance providing coverage on an expense-
18
19
    incurred basis, or an individual or group service or
    indemnity type contract issued by a nonprofit corporation,
20
21
    or any self-insured group health benefit plan or trust, of
    any kind or description, to provide health insurance for
22
    services which are usually performed in a physician's office.
23
         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
    ambulatory surgical center[, and abortion facility] relating
4
5
    to the protections for employees who disclose information
    pursuant to subsection 2 of this section. This policy shall
6
    include a time frame for completion of investigations
7
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
    department of health and senior services to verify
```

27

such information;

implementation. At a minimum, such policy shall include the
following provisions:

- (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;
- No supervisor or individual with authority to hire 18 19 or fire in a hospital[,] or ambulatory surgical center[, or 20 abortion facility] shall use or threaten to use his or her 21 supervisory authority to knowingly discriminate against, dismiss, penalize or in any way retaliate against or harass 22 an employee because the employee in good faith reported or 23 disclosed any information pursuant to subsection 2 of this 24 section, or in any way attempt to dissuade, prevent or 25 interfere with an employee who wishes to report or disclose 26
- 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 disclosedor 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 state38 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.
- 54 3. Prior to any disclosure to individuals or agencies
- 55 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

shall not be construed to limit the employee's ability to subpoena from the original source the information reported to the department pursuant to this section.

- 78 report who wish to remain anonymous to do so, and shall
 79 include safeguards to protect the confidentiality of the
 80 employee making the report, the confidentiality of patients
 81 and the integrity of data, information and medical records.
- 7. Each hospital[,] and ambulatory surgical center[,
 and abortion facility] shall, within forty-eight hours of
 the receipt of a report, notify the employee that his or her
 report has been received and is being reviewed.

197.287. [By July 1, 2001,] All hospitals and ambulatory surgical centers[, and by July 1, 2018, all 2 3 abortion facilities] shall provide training programs, with 4 measurable minimal training outcomes relating to quality of 5 patient care and patient safety, to all unlicensed staff providing patient care in their facility within ninety days 6 of the beginning date of employment. Standards for such 7 training shall be established by the department of health 8 9 and senior services by rule. It shall be a requirement of 10 hospital[,] and ambulatory surgical center[, and abortion 11 facility] licensure pursuant to this chapter that all 12 hospitals[,] and ambulatory surgical centers[, and abortion facilities] submit documentation to the department of health 13 and senior services on the training program used. 14

197.289. 1. All hospitals[,] and ambulatory surgical centers[, and abortion facilities] shall develop and implement a methodology which ensures adequate nurse staffing that will meet the needs of patients. At a minimum, there shall be on duty at all times a sufficient number of licensed registered nurses to provide patient care

7 requiring the judgment and skills of a licensed registered
8 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
- 2 sections 197.070 and 197.220, the department of health and
- 3 senior services shall use the following standards for
- 4 enforcing hospital[,] and ambulatory surgical center[, and
- 5 abortion facility] licensure regulations promulgated to
- 6 enforce the provisions of sections 197.010 to 197.120,
- 7 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
- 16 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
- 21 (b) Require the hospital[,] or ambulatory surgical
- 22 center[, or abortion facility] to implement a plan of
- 23 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

ambulatory surgical center[, or abortion facility] has had an opportunity to correct such deficiency, the department

29 may restrict new inpatient admissions or outpatient entrants

- 30 to the service or services affected by such deficiency;
- 31 (4) If there is a continuing deficiency after the
- 32 department restricts new inpatient admissions or outpatient
- 33 entrants to the service or services pursuant to subdivision
- 34 (3) of this subsection and the hospital[,] or ambulatory
- 35 surgical center[, or abortion facility] has had an
- 36 opportunity to correct such deficiency, the department may
- 37 suspend operations in all or part of the service or services
- 38 affected by such deficiency;
- 39 (5) If there is a continuing deficiency after
- 40 suspension of operations pursuant to subdivision (4) of this
- 41 subsection, the department may deny, suspend or revoke the
- 42 hospital's[,] or ambulatory surgical center's[, or abortion
- 43 facility's] license pursuant to section 197.070 or section
- 44 197.220.
- 45 2. Notwithstanding the provisions of subsection 1 of
- 46 this section to the contrary, if a deficiency in meeting
- 47 licensure standards presents an immediate and serious threat
- 48 to the patients' health and safety, the department may,
- 49 based on the scope and severity of the deficiency, restrict
- 50 access to the service or services affected by the deficiency
- 51 until the hospital[,] or ambulatory surgical center[, or
- 52 abortion facility] has developed and implemented an approved
- 53 plan of correction. Decisions as to whether a deficiency
- 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
- 57 department of health and senior services and such decisions
- 58 shall be approved by the bureau of health facility licensing

59 in the department of health and senior services, or its

- 60 successor agency, or by a person authorized by the
- 61 regulations to approve such decisions in the absence of the
- 62 director.
 - 197.295. 1. A hospital[,] or ambulatory surgical
- 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
- 5 subsection 1 of section 197.293 may appeal such decision to
- 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
- 9 restrict new inpatient admissions or outpatient entrants,
- 10 suspend operations or revoke a license shall be heard on an
- 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
- 16 by section 621.035.
- 17 2. If both the department and the hospital[,] or
- 18 ambulatory surgical center[, or abortion facility] agree to
- 19 do so, prior to an appeal to the administrative hearing
- 20 commission pursuant to section 197.071 or section 197.221,
- 21 an official action of the department made pursuant to
- 22 sections 197.010 to 197.120 or sections 197.200 to 197.240
- 23 may be appealed to a departmental hearing officer. The
- 24 department of health and senior services shall promulgate
- 25 rules specifying the qualifications of such a hearing
- 26 officer, establish procedures to ensure impartial decisions
- 27 and provide for comparable appeal remedies when a
- 28 departmental hearing officer is unavailable.

197.315. 1. Any person who proposes to develop or offer a new institutional health service within the state must obtain a certificate of need from the committee prior to the time such services are offered.

- Only those new institutional health services which 5 6 are found by the committee to be needed shall be granted a 7 certificate of need. Only those new institutional health 8 services which are granted certificates of need shall be 9 offered or developed within the state. No expenditures for 10 new institutional health services in excess of the applicable expenditure minimum shall be made by any person 11 unless a certificate of need has been granted. 12
- 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.
- 6. A certificate of need shall be issued only for the premises and persons named in the application and is not transferable except by consent of the committee.

36

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 percent shall not be incurred without consent of the
- 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.
- 48 10. Each application for a certificate of need must be 49 accompanied by an application fee. The time of filing 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 the proposed project, whichever is greater. All application 53 fees shall be deposited in the state treasury. Because of 54 55 the loss of federal funds, the general assembly will 56 appropriate funds to the Missouri health facilities review 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.

66

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.
- [16.] 15. The provisions of this section shall not 78 79 apply to facilities operated by the state, and appropriation of funds to such facilities by the general assembly shall be 80 81 deemed in compliance with this section, and such facilities shall be deemed to have received an appropriate certificate 82 of need without payment of any fee or charge. The 83 provisions of this subsection shall not apply to hospitals 84 operated by the state and licensed under this chapter, 85 except for department of mental health state-operated 86 87 psychiatric hospitals.
- [17.] 16. Notwithstanding other provisions of this section, a certificate of need may be issued after July 1, 1983, for an intermediate care facility operated exclusively 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 clinical trial that has received written approval from a 97 duly constituted institutional review board of an accredited 98 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, 103 a certificate of need must be obtained for continued use in 104 such facility; or
- 105 (2) Equipment that is to be used by an academic health 106 center operated by the state in furtherance of its research 107 or teaching missions.
- The board may refuse to issue or renew 2 any certificate of registration or authority, permit or 3 license required pursuant to this chapter for one or any combination of causes stated in subsection 2 of this 4 5 section. The board shall notify the applicant in writing of the reasons for the refusal and shall advise the applicant 6 of the applicant's right to file a complaint with the 7 8 administrative hearing commission as provided by chapter 9 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 12 probation, restriction or limitation to an applicant for 13 licensure for any one or any combination of causes stated in 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
- 18 that the applicant has thirty days to request in writing a

17

date such action shall become effective, and a statement

19 hearing before the administrative hearing commission. If

- 20 the board issues a probationary, limited or restricted
- 21 license to an applicant for licensure, either party may file
- 22 a written petition with the administrative hearing
- 23 commission within thirty days of the effective date of the
- 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.
- 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 guilty, or entered a plea of guilty 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;

required pursuant to this chapter;

54

- 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 53 or in obtaining permission to take any examination given or
- 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:
- (a) Obtaining or attempting to obtain any fee, charge, tuition or other compensation by fraud, deception or misrepresentation; willfully and continually overcharging or overtreating patients; or charging for visits to the physician's office which did not occur unless the services were contracted for in advance, or for services which were 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;
- (e) Misrepresenting that any disease, ailment or infirmity can be cured by a method, procedure, treatment, 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;

- Final disciplinary action by any professional 84 85 medical or osteopathic association or society or licensed hospital or medical staff of such hospital in this or any 86 other state or territory, whether agreed to voluntarily or 87 88 not, and including, but not limited to, any removal, suspension, limitation, or restriction of the person's 89 90 license or staff or hospital privileges, failure to renew such privileges or license for cause, or other final 91 disciplinary action, if the action was in any way related to 92 93 unprofessional conduct, professional incompetence, malpractice or any other violation of any provision of this 94 95 chapter;
- 96 (h) Signing a blank prescription form; or dispensing, 97 prescribing, administering or otherwise distributing any drug, controlled substance or other treatment without 98 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 experimental or investigative purposes duly authorized by a 102 state or federal agency, or not in the course of 103 104 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; 106
- (i) Exercising influence within a physician-patient relationship for purposes of engaging a patient in sexual activity;
- (j) Being listed on any state or federal sexual
 federal sexual

(k) Terminating the medical care of a patient without
adequate notice or without making other arrangements for the
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;
- (m) Failure of any applicant or licensee to cooperate
 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 settlement agreement with this board or any other licensing agency;
- 128 (q) Failing to inform the board of the physician's 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
 132 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
 which issues or conducts such advertising;
- (s) Any other conduct that is unethical or
 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;
- 151 (6) Violation of, or attempting to violate, directly
- 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;
- 156 (7) Impersonation of any person holding a certificate
- of registration or authority, permit or license or allowing
- 158 any person to use his or her certificate of registration or
- 159 authority, permit, license or diploma from any school;
- 160 (8) Revocation, suspension, restriction, modification,
- 161 limitation, reprimand, warning, censure, probation or other
- 162 final disciplinary action against the holder of or applicant
- 163 for a license or other right to practice any profession
- 164 regulated by this chapter by another state, territory,
- 165 federal agency or country, whether or not voluntarily agreed
- 166 to by the licensee or applicant, including, but not limited
- 167 to, the denial of licensure, surrender of the license,
- 168 allowing the license to expire or lapse, or discontinuing or
- 169 limiting the practice of medicine while subject to an
- 170 investigation or while actually under investigation by any
- 171 licensing authority, medical facility, branch of the Armed
- 172 Forces of the United States of America, insurance company,
- 173 court, agency of the state or federal government, or
- 174 employer;

175 (9) A person is finally adjudged incapacitated or 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,
- 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
- 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

concern, actual or pretended, in such a manner as to
confuse, deceive, or mislead the public as to the need or
necessity for or appropriateness of health care services for
all patients, or the qualifications of an individual person
or persons to diagnose, render, or perform health care
services;

- 213 (17) Using, or permitting the use of, the person's
 214 name under the designation of "Doctor", "Dr.", "M.D.", or
 215 "D.O.", or any similar designation with reference to the
 216 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;
- (19) Failure or refusal to properly guard against 222 223 contagious, infectious or communicable diseases or the spread thereof; maintaining an unsanitary office or 224 performing professional services under unsanitary 225 conditions; or failure to report the existence of an 226 unsanitary condition in the office of a physician or in any 227 health care facility to the board, in writing, within thirty 228 days after the discovery thereof; 229
- 230 Any candidate for licensure or person licensed to 231 practice as a physical therapist, paying or offering to pay 232 a referral fee or, notwithstanding section 334.010 to the 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 235 236 and surgeon pursuant to this chapter, as a dentist pursuant 237 to chapter 332, as a podiatrist pursuant to chapter 330, as an advanced practice registered nurse under chapter 335, or 238

any licensed and registered physician, dentist, podiatrist, or advanced practice registered nurse practicing in another jurisdiction, whose license is in good standing;

- 242 (21) Any candidate for licensure or person licensed to 243 practice as a physical therapist, treating or attempting to 244 treat ailments or other health conditions of human beings 245 other than by professional physical therapy and as 246 authorized by sections 334.500 to 334.620;
- 247 Any person licensed to practice as a physician or (22)248 surgeon, requiring, as a condition of the physician-patient relationship, that the patient receive prescribed drugs, 249 devices or other professional services directly from 250 facilities of that physician's office or other entities 251 252 under that physician's ownership or control. A physician 253 shall provide the patient with a prescription which may be 254 taken to the facility selected by the patient and a 255 physician knowingly failing to disclose to a patient on a form approved by the advisory commission for professional 256 257 physical therapists as established by section 334.625 which is dated and signed by a patient or guardian acknowledging 258 that the patient or guardian has read and understands that 259 the physician has a pecuniary interest in a physical therapy 260 or rehabilitation service providing prescribed treatment and 261 262 that the prescribed treatment is available on a competitive basis. This subdivision shall not apply to a referral by 263 264 one physician to another physician within a group of 265 physicians practicing together;
- 266 (23) A pattern of personal use or consumption of any 267 controlled substance unless it is prescribed, dispensed or 268 administered by another physician who is authorized by law 269 to do so;

289290

291

- 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 279 substance authority, whether agreed to voluntarily or not, 280 or voluntary termination of a controlled substance authority 281 while under investigation;
- 282 (27) For a physician to operate, conduct, manage, or
 283 establish an abortion facility, or for a physician to
 284 perform an abortion in an abortion facility[, if such
 285 facility comes under the definition of an ambulatory
 286 surgical center pursuant to sections 197.200 to 197.240, and
 287 such facility has failed to obtain or renew a license as an
 288 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 conducted in accordance with the provisions of chapter 621. 294 295 Upon a finding by the administrative hearing commission that the grounds, provided in subsection 2 of this section, for 296 disciplinary action are met, the board may, singly or in 297 combination, warn, censure or place the person named in the 298 299 complaint on probation on such terms and conditions as the 300 board deems appropriate for a period not to exceed ten years, or may suspend the person's license, certificate or 301

permit for a period not to exceed three years, or restrict or limit the person's license, certificate or permit for an indefinite period of time, or revoke the person's license, certificate, or permit, or administer a public or private reprimand, or deny the person's application for a license, or permanently withhold issuance of a license or require the person to submit to the care, counseling or treatment of physicians designated by the board at the expense of the individual to be examined, or require the person to attend 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.
 - 7. In any investigation, hearing or other proceeding to determine a licensee's or applicant's fitness to practice, any record relating to any patient of the licensee or applicant shall be discoverable by the board and admissible into evidence, regardless of any statutory or common law privilege which such licensee, applicant, record custodian or patient might otherwise invoke. In addition, no such licensee, applicant, or record custodian may withhold records or testimony bearing upon a licensee's or applicant's fitness to practice on the ground of privilege

between such licensee, applicant or record custodian and a patient.

376.1199. 1. Each health carrier or health benefit 2 plan that offers or issues health benefit plans providing 3 obstetrical/gynecological benefits and pharmaceutical 4 coverage, which are delivered, issued for delivery, 5 continued or renewed in this state on or after January 1, 6 2002, shall: 7 Notwithstanding the provisions of subsection 4 of 8 section 354.618, provide enrollees with direct access to the services of a participating obstetrician, participating 9 gynecologist or participating obstetrician/gynecologist of 10 11 her choice within the provider network for covered The services covered by this subdivision shall be 12 services. limited to those services defined by the published 13 recommendations of the accreditation council for graduate 14 medical education for training an obstetrician, gynecologist 15 or obstetrician/gynecologist, including but not limited to 16 17 diagnosis, treatment and referral for such services. health carrier shall not impose additional co-payments, 18 coinsurance or deductibles upon any enrollee who seeks or 19 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 24 this subsection shall be construed to require a health 25 carrier to perform, induce, pay for, reimburse, guarantee, 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

conflict with section 376.805; and

30

31 Notify enrollees annually of cancer screenings 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 35 current American Cancer Society guidelines of cancer screenings which are covered by the enrollees' health 36 37 benefit plans. The notice shall be delivered by mail unless 38 the enrollee and health carrier have agreed on another method of notification; and 39 40 Include coverage for services related to diagnosis, treatment and appropriate management of 41 osteoporosis when such services are provided by a person 42 43 licensed to practice medicine and surgery in this state, for individuals with a condition or medical history for which 44 bone mass measurement is medically indicated for such 45 individual. In determining whether testing or treatment is 46 47 medically appropriate, due consideration shall be given to peer-reviewed medical literature. A policy, provision, 48 49 contract, plan or agreement may apply to such services the same deductibles, coinsurance and other limitations as apply 50 to other covered services; and 51 52 If the health benefit plan also provides coverage for pharmaceutical benefits, provide coverage for 53 54 contraceptives either at no charge or at the same level of deductible, coinsurance or co-payment as any other covered 55 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
- other than contraceptive or abortion purposes.
- 69 2. For the purposes of this section, "health carrier"
- 70 and "health benefit plan" shall have the same meaning as
- 71 defined in section 376.1350.
- 72 3. The provisions of this section shall not apply to a
- 73 supplemental insurance policy, including a life care
- 74 contract, accident-only policy, specified disease policy,
- 75 hospital policy providing a fixed daily benefit only,
- 76 Medicare supplement policy, long-term care policy, short-
- 77 term major medical policies of six months or less duration,
- 78 or any other supplemental policy as determined by the
- 79 director of the department of commerce and insurance.
- 4. Notwithstanding the provisions of subdivision (4)
- 81 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;
- 88 (2) Upon request of an enrollee who is a member of a
- 89 group health benefit plan and who states that the use or
- 90 provision of contraceptives is contrary to his or her moral,
- 91 ethical or religious beliefs, any health carrier shall issue
- 92 to or on behalf of such enrollee a policy form that excludes
- 93 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;

- (3) Any health carrier which is owned, operated or controlled in substantial part by an entity that is operated pursuant to moral, ethical or religious tenets that are contrary to the use or provision of contraceptives shall be exempt from the provisions of subdivision (4) of subsection 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 providing coverage for contraceptives pursuant to this section, a health carrier shall allow enrollees in a health benefit plan that excludes coverage for contraceptives pursuant to subsection 4 of this section to purchase a health benefit plan that includes coverage for contraceptives.
 - 6. Any health benefit plan issued pursuant to subsection 1 of this section shall provide clear and conspicuous written notice on the enrollment form or any accompanying materials to the enrollment form and the group health benefit plan application and contract:
- 118 (1) Whether coverage for contraceptives is or is not 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

98

99

100101

102

103

104

105

113

114

115

116

117

127

- 125 (3) That an enrollee who is a member of a group health 126 benefit plan without coverage for contraceptives has the
- 128 (4) Whether an optional rider for elective abortions 129 has been purchased by the group contract holder pursuant to 130 section 376.805; and

right to purchase coverage for contraceptives[;

- 131 (5) That an enrollee who is a member of a group health
 132 plan with coverage for elective abortions has the right to
 133 exclude and not pay for coverage for elective abortions if
 134 such coverage is contrary to his or her moral, ethical, or
 135 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 benefit plan or purchased a health benefit plan that 147 148 includes coverage for contraceptives.
- 149 8. The departments of health and senior services and
 150 commerce and insurance may promulgate rules necessary to
 151 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
 155 defined in section 536.010, that is created under the

156 authority delegated in this section shall become effective

- 157 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
- 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
- 165 invalid and void.

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
- 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
- 16 (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
- 54 disks, compact disks, digital video disks, magnetic tape,

55 hard drive, optical disks and digital memory; local area networks, such as two or more computers connected together 56 57 to a central computer server via cable or modem; peripheral input or output devices, such as keyboards, printers, 58 59 scanners, plotters, video display monitors and optical 60 readers; and related communication devices, such as modems, cables and connections, recording equipment, RAM or ROM 61 62 units, acoustic couplers, automatic dialers, speed dialers, programmable telephone dialing or signaling devices and 63 64 electronic tone-generating devices; as well as any devices, mechanisms or parts that can be used to restrict access to 65

(8) "Computer network", two or more interconnected computers or computer systems;

computer hardware, such as physical keys and locks;

- (9) "Computer program", a set of instructions,
 statements, or related data that directs or is intended to
 direct a computer to perform certain functions;
- "Computer software", digital information which 72 73 can be interpreted by a computer and any of its related components to direct the way they work. 74 Software is stored in electronic, magnetic, optical or other digital form. 75 76 term commonly includes programs to run operating systems and applications, such as word processing, graphic, or 77 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":

66

67

68

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
- 99 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
- offense and such mental incapacity is manifest or known to
- 111 the actor; or
- 112 (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
 132 destruction of any part of the computer system or network;
- 132 133 "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 forcible rape if physical injury results, attempted sodomy 136 in the first degree if physical injury results, attempted 137 forcible sodomy if physical injury results, rape in the 138 first degree, forcible rape, sodomy in the first degree, 139 forcible sodomy, assault in the second degree if the victim 140 of such assault is a special victim as defined in 141 142 subdivision (14) of section 565.002, kidnapping in the first 143 degree, kidnapping, murder in the second degree, assault of a law enforcement officer in the first degree, domestic 144 assault in the first degree, elder abuse in the first 145
- degree, robbery in the first degree, armed criminal action, conspiracy to commit an offense when the offense is a dangerous felony, vehicle hijacking when punished as a class
- 149 A felony, statutory rape in the first degree when the victim
- 150 is a child less than twelve years of age at the time of the

180

blackjack or metal knuckles;

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

- 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;
- [(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;
- [(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 295 qualified experts upon the reasonable expectation of 296 probable harm to a reasonable degree of medical or 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

SB 391 84

338

[(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:

20

- (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.

46

47

48

49

50

51

52

53

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.

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.
 - 595.027. 1. Upon request by the department for
- 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-
- 13 7888 or text 233733 (BEFREE) or visit the
- 14 following website:
- 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
- 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.
- 2. Beginning March 1, 2019, the human trafficking
- 35 hotline poster designed by the department of public safety
- 36 shall be displayed in a conspicuous place in or near the
- 37 bathrooms or near the entrance of each of the following
- 38 establishments:
- 39 (1) Hotels, motels, or other establishments that have
- 40 been cited as a public nuisance for prostitution under
- 41 section 567.080;
- 42 (2) Strip clubs or other sexually oriented businesses;

SB 391 91

74

```
43
          (3)
              Private clubs that have a liquor permit for on-
    premises consumption, do not hold themselves out to be food
44
45
    service establishments, and are not affiliated with any
    nonprofit fraternal, athletic, religious, or veteran
46
    organizations;
47
          (4)
48
              Airports;
               Train stations that serve passengers;
49
          (5)
50
              Emergency rooms within general acute care
    hospitals;
51
52
          (7)
              Urgent care centers;
53
               Privately operated job recruitment centers;
              Businesses or establishments that offer massage or
54
          (9)
55
    body work services for compensation by individuals who are
    not licensed under section 324.265;
56
57
               Women's health centers;
          (10)
               [Abortion facilities as defined in section
58
          (11)
59
    188.015;
          (12) ] Family planning clinics;
60
          [(13)] (12) Maternity homes as defined in section
61
    135.600;
62
63
          [(14)] (13) Pregnancy resource centers as defined in
    section 135.630;
64
65
          [(15)] (14) Bus stations;
66
          [(16)] (15) Truck stops. For the purposes of this
    section, "truck stops" shall mean privately owned and
67
    operated facilities that provide food, fuel, shower or other
68
    sanitary facilities, and lawful overnight parking; and
69
70
          [(17)] (16) Roadside rest areas.
             The department of public safety shall make the
71
72
    poster available for print on its public website. To obtain
    a copy of the poster, the owners or operators of an
73
    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.

- 4. Any owner or operator of an establishment required to post the human trafficking hotline notice under subsection 2 of this section who fails to comply with the requirement shall receive a written warning for the first violation and may be guilty of an infraction for any subsequent violation.
 - [188.017. 1. This section shall be known and may be cited as the "Right to Life of the Unborn Child Act".
 - 2. 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.
 - 3. 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;

40

41

42 43

44

45

46

47 48

49

2

4 5

6

7

8

9

10

11

12 13

14

15

16

17

18 19

20

21

2

3

4 5

6

7

8

9 10

11 12

13

14

15

16 17

18 19

20

21

22

23

24 25 (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.]

When RU-486 (mifepristone) [188.021. 1. 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 The physician inducing the abortion, 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.

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, 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 $\left(\frac{1}{2} \right)$ Court, while considering the "preamble" that set forth "findings" in section 1.205, stated: 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 State v. Harrison, 390 S.W.3d 927 or earlier. (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;

SB 391

(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;
- (10)The Supreme Court in Roe discussed "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;
- (12) While the overall risk of miscarriage 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

SB 391

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-guided 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 doubt". Ronan O'Rahilly & Fabiola Müller. The Embryonic Human Brain: An Atlas of Developmental Stages (3d ed. 2005);
- (24) By fourteen or fifteen weeks gestational age or later, the predominant abortion method in Missouri is dilation and evacuation (D&E). The D&E abortion method includes the dismemberment, disarticulation, and exsanguination of the unborn child, causing the unborn child's death;
- (25) The Supreme Court acknowledged in Gonzales v. Carhart, 550 U.S. 124, 160 (2007), that "the standard D&E is in some respects as brutal, if not more, than the intact D&E" partial birth abortion method banned by Congress and upheld as facially constitutional by the Supreme Court, even though the federal ban was

applicable both before and after viability and had no exception for the health of the mother;

Missouri's ban on the partial birth abortion method, section 565.300, is in effect because of Gonzales v. Carhart and the Supreme Court's subsequent decision in Nixon v. Reproductive Health Services of Planned Parenthood of the St. Louis Region, Inc., 550 U.S. 901 (2007), to vacate and remand to the appellate court the prior invalidation of section 565.300. Since section 565.300, like Congress' ban on partial birth abortion, is applicable both before and after viability, there is ample precedent for the general assembly to constitutionally prohibit the brutal D&E abortion method at fourteen weeks gestational age or later, even before the unborn child is viable, with a medical emergency exception;

(27) In Roper v. Simmons, 543 U.S. 551 (2005), the Supreme Court determined that "evolving standards of decency" dictated that a Missouri statute allowing the death penalty for a conviction of murder in the first degree for a person under eighteen years of age when the crime was committed was unconstitutional under the Eighth and Fourteenth Amendments to the United States Constitution because it violated the prohibition against "cruel and unusual punishments";

(28) In Bucklew v. Precythe, 139 S. Ct. 1112, 1123 (2019), the Supreme Court noted that "'[d]isgusting' practices" like disemboweling and quartering "readily qualified as 'cruel and unusual', as a reader at the time of the Eighth Amendment's adoption would have understood those words";

- (29) Evolving standards of decency dictate that Missouri should prohibit the brutal and 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;
- (33) Abortion procedures performed later 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 gestational 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

361

362 363

364

365

366

367

368

369 370

371

372

373

374

375

376 377 378

379

380

381

382

383

384

385

386

387

388

389

390 391 392

393

394

395 396

397

398

399

400

401

402

403

404 405

406

407

408

409 410

411

412

413

414 415

416 417 Missouri each year are at less than eight weeks gestational 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 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.

Article 6, Paragraph 1, U.N.T.S. at 4. 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) Safeguarding 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;
- (6) Ending the incongruities in state law 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;
- The physician who is to perform or induce the abortion or a qualified professional has presented the woman, in person, printed materials provided by the department, which describe the 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.";
- (3) The physician who is to perform or 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

90

91 92

93

94

95

96

97

98

99

100

101

102

103

104

105

106 107

108

109

110

111

112113

114

115

116

117

122

123

124

125

126 127

128

129

130

131

132

133

134

135

136

137

138

139

140

141

142

143

144

145

146

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 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. 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

147

148

149 150

151

152

153

154

155

156

157

158

159

160

161

162

163

164

165

166

167

168

169 170

171

172

173

174

175

176

177

178

179

180

181

182

183

184

185 186

187

188

189

190 191

192

193

194

195

196

197

198

199

200

201

202 203 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, organizations, or affiliates of organizations that perform or induce, or assist in the performing or inducing of, abortions or that refer for abortions;
- Explain the Missouri alternatives to (b) 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.";
- 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 Such materials shall include abortion. 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.

318

319

320 321 322

323

324 325

326

327

328

329

330

331

332

333

334

335

336

337

338

339

340

341

342

343

344 345

346

347 348

349

350 351

352

353 354

355

356

357

358

359

360

361 362

363

364

365

366

367

368 369

370 371

372

373

374

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.
- The term "qualified professional" as 9. 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. 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.
- 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. The department shall maintain a toll-free, twenty-

four-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. No 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 guardian, and the consenting parent or guardian 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 guardian. 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 guilty 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 guilty 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 guardianship 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 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, guardian, or, if the minor's parents are deceased and no guardian has been appointed, any other person standing in loco parentis of the minor; that the minor has been fully informed of the risks and consequences of the abortion; that the minor is of sound mind and has sufficient intellectual capacity to consent to the abortion; that, if the court does not grant the minor majority rights for the purpose of consent to the abortion, the court should find that the

 abortion is in the best interest of the minor and give judicial consent to the abortion; that the court should appoint a guardian ad litem of the child; and if the minor does not have private counsel, that the court should appoint counsel. The petition shall be signed by the minor or the next friend;

- (2) A hearing on the merits of the petition, to be held on the record, shall be held as soon as possible within five days of the filing of the petition. If any party is unable to afford counsel, the court shall appoint counsel at least twenty-four hours before the time of the hearing. At the hearing, the court shall hear evidence relating to the emotional development, maturity, intellect and understanding of the minor; the nature, possible consequences, and alternatives to the abortion; and any other evidence that the court may find useful in determining whether the minor should be granted majority rights for the purpose of consenting to the abortion or whether the abortion is in the best interests of the minor;
- (3) In the decree, the court shall for good cause:
- (a) Grant the petition for majority rights for the purpose of consenting to the abortion;
- (b) Find the abortion to be in the best interests of the minor and give judicial consent to the abortion, setting forth the grounds for so finding; or
- (c) Deny the petition, setting forth the grounds on which the petition is denied;
- (4) If the petition is allowed, the informed consent of the minor, pursuant to a court grant of majority rights, or the judicial consent, shall bar an action by the parents or guardian of the minor on the grounds of battery of the minor by those performing or inducing the abortion. The immunity granted shall only extend to the performance or 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 guardian of the minor. The notice of intent to appeal shall be given within twenty-four hours from the date of issuance of the order. The record on appeal shall be completed and the appeal shall be perfected within five days from the filing of notice to appeal. Because time may be of the essence regarding the performance or induction of the abortion, the supreme court of this state shall,

142

143 144

145

146

147

148

149

150 151

152

153

154

2

4 5

7

8

9 10

11 12

13

14

15

16 17

18

19

20

21

22

23

24

25

26

27

28

29

30

31

32

33

34

35

36

37

38

39

40

41

42

43

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:
- Prior to performing or inducing an (1)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 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. 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

101

102

103

104 105

106

107

108 109

110

111 112

113

114

115

116

117 118

119

120

121

122

123

124 125

126

127

128

129

130 131

132

133

134

135

136

137 138

139

140

141

142

143

144

145

146

147

148

149

150

151 152

153

154 155

156 157

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 of the pregnant woman. This second physician 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 guilty of a class D felony, and, upon a finding of guilt or plea of guilty, 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 guilty 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

215

216

2

5

7

2

3

5

6

7

8

9

10 11

12

13

14

15

16

17

18

19

20

21

22

23

24

25

2

2

3

5

7

8

9

10

11

12

13

14

15

16

17

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.1

[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 188.085.1
- [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.
- 6. As used in this section, the term "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. Such 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 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 examination. The pathologist shall file a copy 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. 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.

- 3. Beginning January 1, 2018, the 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.
- 6. 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;
- (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.
- 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.1

[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.]

[188.057. 1. Notwithstanding any other 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 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 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 section188.056, 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

40

41 42 43

44

45

46

47

48

2

5

6

78

9

10

11 12

13 14

15

16

17

18

19

20 21

22

23

24

25

26

27 28

29

30

31

32

33

34

35

36

37

38

39

40

41 42 43

44 45

46

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 guilty 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.
- 3. 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 guilty 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;

- (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 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.1

[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.

2. The purpose of the alternatives to abortion public awareness program is to help pregnant women at risk for having abortions to

10

11 12

13

14

15

16 17

18

19

20 21

22

23

24

25

26

27

28

29

30

31

32 33

34

35

36

37

38 39

40

41

42

43

44

45

46

47

48

49

50

51

52

53 54

55

56

57

58

59

60

61 62

63

64

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

65

66

2

3

5

7 8

9

10

11

12

13

14

15

16

17

18

19 20

21

22 23

24

25

26

27 28

29

30

31

32

33

34

35 36

37

38

39

40

41

42

43

44

45

46

47

48 49

50

51

52

53 54 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 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 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 guilty 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

65 66

67 68

69

70

71

2

3

4

5

6

7

8

10

11

12 13

14

15

16

17

18

19

20

21

22

23

24

25

26

27

28

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. Notwithstanding the provisions of section

- 2 1.140 to the contrary, the provisions of section A of this
- 3 act shall be nonseverable, and if any provision is for any
- 4 reason held to be invalid, such decision shall invalidate
- 5 all of the remaining provisions of this act.

Section C. Any federal act, law, treaty, decision,

- 2 order, rule, or regulation that purports to supersede, stay,
- 3 or overrule section A of this act is in violation of the
- 4 Constitution of the state of Missouri and the Constitution
- 5 of the United States and is therefore void. The state of
- 6 Missouri and its political subdivisions, and agents thereof,

7 are not required to enter an appearance, special or

8 otherwise, in any federal suit challenging this act.

Section D. Because immediate action is necessary to

- 2 protect the unborn children in the state of Missouri,
- 3 section A of this act is deemed necessary for the immediate
- 4 preservation of the public health, welfare, peace, and
- 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.

√