

COMMITTEE ON LEGISLATIVE RESEARCH  
OVERSIGHT DIVISION

**FISCAL NOTE**

L.R. No.: 1576-06  
Bill No.: SCS for SB Nos. 279, 139 & 345  
Subject: Abortion; Health Care Professionals; Health and Senior Services Department;  
 Medical Procedures and Personnel; Physicians  
Type: Original  
Date: March 21, 2019

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Bill Summary:           Modifies provisions relating to abortion.

**FISCAL SUMMARY**

| <b>ESTIMATED NET EFFECT ON GENERAL REVENUE FUND</b>          |                              |                          |                           |
|--|------------------------------|--------------------------|---------------------------|
| FUND AFFECTED  | FY 2020                      | FY 2021                  | FY 2022                   |
| General Revenue  | (\$6,480 to \$66,667)        | \$0 or (\$80,800)        | \$0 for (\$81,608)        |
| <b>Total Estimated<br/>Net Effect on<br/>General Revenue</b> | <b>(\$6,480 to \$66,667)</b> | <b>\$0 or (\$80,800)</b> | <b>\$0 for (\$81,608)</b> |

| <b>ESTIMATED NET EFFECT ON OTHER STATE FUNDS</b>                      |            |            |            |
|---|------------|------------|------------|
| FUND AFFECTED   | FY 2020    | FY 2021    | FY 2022    |
|   |            |            |            |
|   |            |            |            |
| <b>Total Estimated<br/>Net Effect on <u>Other</u><br/>State Funds</b> | <b>\$0</b> | <b>\$0</b> | <b>\$0</b> |

Numbers within parentheses: ( ) indicate costs or losses.

This fiscal note contains 13 pages.

| <b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>                  |                         |                         |                         |
|---|-------------------------|-------------------------|-------------------------|
| <b>FUND AFFECTED</b>  | <b>FY 2020</b>          | <b>FY 2021</b>          | <b>FY 2022</b>          |
| Federal Funds   | \$0 to (Unknown)        | \$0 to (Unknown)        | \$0 to (Unknown)        |
|   |                         |                         |                         |
| <b>Total Estimated Net Effect on <u>All</u> Federal Funds</b> | <b>\$0 to (Unknown)</b> | <b>\$0 to (Unknown)</b> | <b>\$0 to (Unknown)</b> |

| <b>ESTIMATED NET EFFECT ON FULL TIME EQUIVALENT (FTE)</b> |                   |                   |                   |
|---|-------------------|-------------------|-------------------|
| <b>FUND AFFECTED</b>                                      | <b>FY 2020</b>    | <b>FY 2021</b>    | <b>FY 2022</b>    |
| General Revenue   | 0 or 1 FTE        | 0 or 1 FTE        | 0 or 1 FTE        |
|   |                   |                   |                   |
| <b>Total Estimated Net Effect on FTE</b>                  | <b>0 or 1 FTE</b> | <b>0 or 1 FTE</b> | <b>0 or 1 FTE</b> |

Estimated Net Effect (expenditures or reduced revenues) expected to exceed \$100,000 in any of the three fiscal years after implementation of the act.

| <b>ESTIMATED NET EFFECT ON LOCAL FUNDS</b> |                |                |                |
|--|----------------|----------------|----------------|
| <b>FUND AFFECTED</b>                       | <b>FY 2020</b> | <b>FY 2021</b> | <b>FY 2022</b> |
| <b>Local Government</b>                    | <b>\$0</b>     | <b>\$0</b>     | <b>\$0</b>     |

## FISCAL ANALYSIS

### ASSUMPTION

#### §§188.010, 188.017 and Section B - Right to Life of the Unborn Child Act      **SB 345**

Officials from the **Office of Attorney General (AGO)** assume any additional litigation costs arising from this proposal can be absorbed with existing personnel and resources. However, the AGO may seek additional appropriations if there is a significant increase in litigation.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the AGO will be able to perform any additional duties required by this proposal with current staff and resources and will reflect no fiscal impact to the AGO for fiscal note purposes.

Officials from the **Department of Insurance, Financial Institutions and Professional Registration (DIFP)** state this bill is anticipated to have no fiscal impact to the department. However, should the extent of the work be more than anticipated, the DIFP would request additional appropriation and/or FTE through the budget process.

**Oversight** does not have any information to the contrary. Oversight assumes the DIFP will be able to perform the additional duties required by this proposal with existing personnel and resources. Oversight will reflect a zero fiscal impact for the DIFP for fiscal note purposes.

**Oversight** notes that the **Missouri Office of Prosecution Services** has stated the proposal would not have a measurable fiscal impact on their organization. However, the creation of a new crime creates additional responsibilities for county prosecutors which may in turn result in additional costs which are difficult to determine. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for this organization.

Officials from the **Department of Corrections (DOC)** assume the proposal will have no fiscal impact on their organization. According to the Department of Health and Senior Services, Missouri currently has one licensed abortion facility (located in St. Louis). Women seeking abortions in Missouri will either go to another state or to the St. Louis facility. If SB 345 is enacted, the St. Louis facility closes. However, women will only have to drive a few more miles to Illinois, where abortions are legal.

Currently, there are three laws concerning abortion that contain penalties for violation (§188.080.001 - Class A misdemeanor; §188.080.002 - Class B felony; and §188.075.001 - Class A misdemeanor). No convictions of these statutes occurred in FY 2016 - 2018, even with the paucity of abortion facilities in the state. For these reasons, it is expected that enactment of HB 345 will have no fiscal impact on the DOC.

ASSUMPTION (continued)

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes there will be no fiscal impact to the DOC for fiscal note purposes.

Officials from the **Department of Social Services (DSS)** state this proposal will have no fiscal impact on their organization.

**Oversight** notes that in response to similar provisions (SB 345), the DSS stated the “proposed language may be subject to legal challenge on the grounds that it may conflict with current federal law governing the Medicaid program to the extent that it would prohibit the Missouri Medicaid program from paying for abortions in cases of pregnancies arising from rape or incest, or in cases where the abortion is necessary to save the life of the mother. Under current federal law, state Medicaid programs are not required to pay for abortions except in cases of rape, incest and when necessary to save the life of the mother. This is known as the Hyde Amendment. The current version of the Hyde amendment is included in the federal appropriation bill for the Medicaid program (Pub. L. No. 115-245, §§506-07, 132 Stat. 2981(2018)).

In 1994, the U.S. District Court entered an injunction against Missouri directing Missouri to comply with the requirements of the Hyde Amendment (Stangler v. Shalala, 1994 WL 764104 (W.D. MO 1994)). Failure to comply with the requirements of current federal law could subject Missouri to the risk of litigation and sanction, including the possibility of deferral or disallowance of federal financial participation in Missouri’s Medicaid program. The extent of the deferral or disallowance is unknown.”

**Oversight** also notes that in response to HB 126, the DSS stated the legislation could result in the loss of all federal Medicaid funds. In FY 2019, there is over \$7.2 billion federal funds budgeted for MO HealthNet services across the Department of Social Services, Department of Mental Health, and Department of Health and Senior Services.

**Oversight** notes DSS officials provided the MO HealthNet Division paid for 2 abortions during FY 2018 to save the life of the mother; no abortions were paid for during FY 2017 and 2 abortions were paid for in FY 2016 that resulted from rape and incest.

**Oversight** assumes federal funding could only be in jeopardy if, as a result of rape and incest, the DSS did not authorize funding for abortions for MO HealthNet recipients and the DSS actually had cases that met those conditions. Oversight contacted the DSS and requested a letter be obtained from the Centers for Medicare and Medicaid (CMS) services stating whether the provisions of 188.026.3 would result in the loss of federal funding. DSS believes it is unlikely CMS will provide such a letter. Since it is unknown whether DSS would lose some or all federal funding, Oversight will range the potential loss of federal funding from \$0 to (Unknown).

ASSUMPTION (continued)

**Oversight** notes that the **Department of Health and Senior Services**, the **Department of Public Safety**, **Missouri State Highway Patrol**, the **Office of State Courts Administrator**, the **Office of State Public Defender** and **Legislative Research** have stated the proposal would not have a direct fiscal impact on their organizations. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for these organizations.

This proposal contains a provisional enactment clause requiring 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 the U.S. Supreme Court has overruled, in whole or in part, Roe v. Wade or a U.S. Constitutional Amendment is adopted that has the effect of restoring or granting Missouri the authority to regulation abortions.

§§188.026, 188.027, and 188.052 - Fetal heartbeat detection

***SB 139***

Officials from the **Department of Social Services (DSS)** state this proposal will have no fiscal impact on their organization.

**Oversight** notes that in response to similar provisions (SB 139), officials from the DSS noted under this legislation, no physician shall perform or induce an abortion on a pregnant woman without first performing a fetal heartbeat detection test except in cases of medical emergency. The abortion should be performed or induced within 96 hours of the fetal heartbeat detection test. If more than 96 hours has passed since the fetal heartbeat detection test, the physician shall perform a new test prior to an abortion.

The physician shall record the estimated gestational age of the unborn child as well as the time, date, method, and results of the fetal heartbeat detection test in the woman's medical record and in the abortion report submitted to the Department of Health and Senior Services.

Any physician who fails to perform a fetal heartbeat detection test prior to the performance or inducement of an abortion shall be subject to having his or her medical license rejected, revoked, or suspended for 6 months and shall pay a \$1,000 fine.

DSS officials also stated “the proposed language may be subject to legal challenge on the grounds that it may conflict with current federal law governing the Medicaid program to the extent that it would prohibit the Missouri Medicaid program from paying for abortions in cases of pregnancies arising from rape or incest, or in cases where the abortion is necessary to save the life of the mother. Under current federal law, state Medicaid programs are not required to pay for abortions except in cases of rape, incest and when necessary to save the life of the mother. This

ASSUMPTION (continued)

is known as the Hyde Amendment. The current version of the Hyde amendment is included in the federal appropriation bill for the Medicaid program. (See PL 114-113, 114-223 and PL 114-254.) In 1994 the United States District Court entered an injunction against Missouri directing Missouri to comply with the requirements of the Hyde Amendment. (Stangler vs. Shalala, 1994 WL 764104 (W.D.Mo 1994)). Failure to comply with the requirements of current federal law could subject Missouri to the risk of litigation and sanctions, including the possibility of deferral or disallowance of federal financial participation in Missouri's Medicaid program. The extent of the deferral or disallowance is unknown.

This legislation could result in the loss of all federal Medicaid funds. In FY 2019, there is over \$7.2 billion federal funds budgeted for MO HealthNet services across the Department of Social Services, Department of Mental Health, and Department of Health and Senior Services.”

**Oversight** notes DSS officials provided the MO HealthNet Division paid for 2 abortions during FY 2018 to save the life of the mother; no abortions were paid for during FY 2017 and 2 abortion were paid for in FY 2016 that resulted from rape and incest.

**Oversight** assumes federal funding could only be in jeopardy if, as a result of rape and incest, the DSS did not authorize funding for abortions for MO HealthNet recipients and the DSS actually had cases that met those conditions. Oversight contacted the DSS and requested a letter be obtained from the Centers for Medicare and Medicaid (CMS) services stating whether the provisions of 188.026.3 would result in the loss of federal funding. DSS believes it is unlikely CMS will provide such a letter. Since it is unknown whether DSS would lose some or all federal funding, Oversight will range the potential loss of federal funding from \$0 to (Unknown).

Officials from the **Department of Health and Senior Services (DHSS)** state §188.026.2 of the proposed legislation requires a physician performing an abortion to conduct a fetal heartbeat determination exam and a record of the results of the fetal heartbeat determination exam to be included in the woman's medical record. The DHSS, Division of Regulation and Licensure, Section for Health Standards and Licensure (HSL) is responsible for regulating abortion facilities. This will require two additional steps to be added to the survey process to ensure the physician performing the abortion conducts a fetal heartbeat determination exam and the medical record includes documentation of the fetal heartbeat determination. It is assumed that these new questions will require less than 30 additional minutes per survey, at the three abortion facilities in Missouri, for a total of one and one-half hours of additional work a year. These surveys are conducted by a Health Facilities Nursing Consultant. The average hourly rate for this position is \$26.05, so the additional cost of these additional questions is \$39.08 annually (1.5 hours x 26.05).

ASSUMPTION (continued)

The department anticipates being able to absorb these costs. However, until the FY20 budget is final, the department cannot identify specific funding sources.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the DHSS will be able to perform the additional duties prescribed in this bill with current staff and resources and will present no fiscal impact to the DHSS for fiscal note purposes.

Officials from the **Office of Attorney General (AGO)** assume any additional litigation costs arising from this proposal can be absorbed with existing personnel and resources. However, the AGO may seek additional appropriations if there is a significant increase in litigation.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the AGO will be able to perform any additional duties required by this proposal with current staff and resources and will reflect no fiscal impact to the AGO for fiscal note purposes.

Officials from the **Department of Insurance, Financial Institutions and Professional Registration (DIFP)** state this bill is anticipated to have no fiscal impact on the DIFP. However, should the extent of the work be more than anticipated, the DIFP would request additional appropriation and/or FTE through the budget process.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the DIFP can perform the additional duties required by this proposal with existing personnel and resources.

**Oversight** notes the provisions of §188.026.4 provide that if a physician fails to conduct a fetal heartbeat detection test prior to the performance or inducement of an abortion, he/she will be subject to having his/her license application rejected, revoked, or suspended by the state board of registration for the healing arts for a period of six months and shall be subject to a fine of one thousand dollars.

Per DHSS's 2016 Annual Report (most current available), 4,562 abortions were performed in Missouri. Per [www.steadyhealth.com](http://www.steadyhealth.com), fetal heartbeats can usually be detected around 6-7 weeks, although it can take up to 10 weeks for the heartbeat to be heard. Other online information indicated a doctor can usually detect the baby's heartbeat at 9-10 weeks, although sometimes it takes 12 weeks for it to be easily detected. For purposes of this fiscal note, Oversight assumed a fetal heartbeat would be detected after 9-10 weeks. According to DHSS's report, 1,323 abortions (29%) were performed after the 9-10 week period of time.

ASSUMPTION (continued)

**Oversight** notes, per DHSS's response, there are three facilities in Missouri which perform abortions. With the limited number of facilities providing abortion services, Oversight assumes there would be a limited number of physicians required to comply with the provisions of this the proposal. Therefore, for fiscal note purposes, Oversight is not presenting potential fine revenue; however, any fine revenue collected would be deposited in the State School Moneys Fund (0616).

**Oversight** notes that the **Office of State Courts Administrator (OSCA)** has stated the proposal would not have a direct fiscal impact on their organization. Oversight does not have any information to the contrary. Therefore, Oversight will reflect a zero impact in the fiscal note for OSCA.

§188.375 - Pain Capable Unborn Child Protection Act

*SB 279*

Officials from the **Department of Health and Senior Services (DHSS)** state §188.375.8 of the proposed legislation would require physicians performing abortions to report certain specified information to DHSS in accordance with forms set forth by the director of DHSS before December thirty-first of each year. The current electronic versions of the abortion reporting form, file layout, and the mainframe database will have to be modified to capture and store new information.

The proposed legislation also requires DHSS to issue a public report by June 30th of each year providing statistics compiled from all reports covering the previous year which were submitted in accordance with §188.375.8(1). The report shall provide statistics for all previous calendar years during which §188.375 was in effect, adjusted to reflect any additional information from late or corrected reports. This report, along with changing the current abortion reporting for, would fall into the established duties of the Bureau of Vital Statistics; therefore, no fiscal impact for staff is expected.

The department anticipates being able to absorb the costs identified as falling under current established duties. However, until the FY20 budget is final, the department cannot identify specific funding sources.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the DHSS will be able to perform the additional duties prescribed in this bill with current staff and resources and will present no fiscal impact to the DHSS for fiscal note purposes.



ASSUMPTION (continued)

Officials from the **Office of Administration (OA), Information Technology Services Division (ITSD)/DHSS** state modification of the existing application tools will be needed to add additional data collection as specified in this proposal. Tools include a Microsoft Access database for data entry of paper forms, file layouts for electronic exchange and mainframe database used for statistical reporting.

OA, ITSD assumes any new IT project/system will be bid out as ITSD resources are at full capacity. The IT consultant rate of \$75 per hour is used to estimate system modifications. It is assumed 86.4 IT consultant hours will be needed to complete this project. One time costs to the General Revenue Fund in FY 2020 of \$6,480 are estimated. ( $\$75/\text{hour} * 86.4 \text{ hours} = \$6,480$ ).

**Oversight** notes ITSD assumes that every new IT project/system will be bid out because all their resources are at full capacity. For this bill, ITSD assumes they will contract out the programming changes needed to various DHSS systems.

ITSD estimates the updates would take 86.4 hours at a contract rate of \$75 per hour for a cost to the state of \$6,480 to the General Revenue Fund. Oversight notes that an average salary for a current IT Specialist within ITSD is \$51,618, which totals roughly \$80,000 per year when fringe benefits are added. Assuming all ITSD resources are at full capacity, Oversight assumes ITSD may (instead of contracting out the programming) hire an additional IT Specialist to perform the work required by this bill on the DHSS systems. Therefore, Oversight will range the fiscal impact from the cost of contracting out the work on DHSS systems (\$6,480) to hiring an additional FTE IT Specialist (roughly \$80,000 per year).

Officials from the **Office of Attorney General (AGO)** assume any additional litigation costs arising from this proposal can be absorbed with existing personnel and resources. However, the AGO may seek additional appropriations if there is a significant increase in litigation.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the AGO will be able to perform any additional duties required by this proposal with current staff and resources and will reflect no fiscal impact to the AGO for fiscal note purposes.

Officials from the **Department of Insurance, Financial Institutions and Professional Registration (DIFP)** state this bill is anticipated to have no fiscal impact to the department. However, should the work be more than anticipated, DIFP would request additional appropriation and/or FTE through the budget process.

**Oversight** does not have any information to the contrary. Therefore, Oversight assumes the DIFP will be able to meet the requirements of this proposal with current staff and resources and will present no fiscal impact for the DIFP for fiscal note purposes.

ASSUMPTION (continued)

**Oversight** notes officials from the **Department of Corrections**, the **Department of Public Safety**, **Missouri State Highway Patrol**, the **Department of Social Services**, **Legislative Research**, the **Missouri Office of Prosecution Services**, the **Office of State Courts Administrator**, and the **Office of State Public Defender** assume this proposal will not have any fiscal impact to their organizations. Oversight does not have any information to the contrary. Therefore, Oversight will reflect no fiscal impact for these agencies for fiscal note purposes.

| <u>FISCAL IMPACT - State Government</u>  | FY 2020<br>(10 Mo.)                 | FY 2021                         | FY 2022                          |
|--|-------------------------------------|---------------------------------|----------------------------------|
| <b>GENERAL REVENUE FUND</b>  |                                     |                                 |                                  |
| <u>Costs - OA, ITSD/DSS (\$188.375)</u>  |                                     |                                 |                                  |
| DHSS system changes (ranged from contracting out the programming to hiring additional 1 FTE IT Specialist) | <u>(\$6,480 or \$66,667)</u>        | <u>\$0 or (80,800)</u>          | <u>\$0 for (\$81,608)</u>        |
| FTE Change - OA, ITSD  | 0 or 1 FTE                          | 0 or 1 FTE                      | 0 or 1 FTE                       |
| <b>ESTIMATED NET EFFECT ON THE GENERAL REVENUE FUND</b>  | <b><u>(\$6,480 to \$66,667)</u></b> | <b><u>\$0 or (\$80,800)</u></b> | <b><u>\$0 for (\$81,608)</u></b> |
| Estimated Net FTE Change to the General Revenue Fund   | 0 or 1 FTE                          | 0 or 1 FTE                      | 0 or 1 FTE                       |
| <b>FEDERAL FUNDS</b>   |                                     |                                 |                                  |
| <u>Loss - DSS (\$188.026)</u>  |                                     |                                 |                                  |
| A potential reduction in federal funding if Missouri is found to be non-compliant with federal law         | <u>\$0 to (Unknown)</u>             | <u>\$0 to (Unknown)</u>         | <u>\$0 to (Unknown)</u>          |
| <b>ESTIMATED NET EFFECT ON FEDERAL FUNDS</b>   | <b><u>\$0 to (Unknown)</u></b>      | <b><u>\$0 to (Unknown)</u></b>  | <b><u>\$0 to (Unknown)</u></b>   |

| <u>FISCAL IMPACT - Local Government</u> | FY 2020<br>(10 Mo.) | FY 2021    | FY 2022    |
|---|---------------------|------------|------------|
|   | <u>\$0</u>          | <u>\$0</u> | <u>\$0</u> |

FISCAL IMPACT - Small Business

§§188.010 and 188.017 - This proposal may have a significant negative fiscal impact on small business health care providers if the State of Missouri loses federal funding used to provide services to MO HealthNet recipients through these health care providers.

FISCAL DESCRIPTION

This act modifies several provisions relating to abortion, including: (1) the "Right to Life of the Unborn Child Act"; (2) prohibition of certain abortions following the detection of a heartbeat of an unborn child; and (3) the "Pain Capable Unborn Child Protection Act".

**RIGHT TO LIFE OF THE UNBORN CHILD ACT (Sections 188.010, 188.017)**

Under this act, the General Assembly declares its intention that the state and its political subdivisions shall be a "sanctuary of life" to protect pregnant women and their unborn children.

Additionally, this act establishes the "Right to Life of the Unborn Child Act". Under this act, an abortion performed or induced upon a woman, unless in cases of medical emergencies, shall be a Class B felony and shall subject the person performing or inducing the abortion to suspension or revocation of his or her professional license.

This provision has a contingent effective date.

**PROHIBITION OF CERTAIN ABORTIONS FOLLOWING THE DETECTION OF A HEARTBEAT OF AN UNBORN CHILD (Sections 188.026, 188.027, and 188.052)**

Under this act, no physician shall perform or induce an abortion on a pregnant woman without first performing a heartbeat detection test on the unborn child. Except in cases of medical emergency, a physician shall not perform or induce an abortion if a heartbeat of an unborn child is detected and shall inform the woman, in writing, that such abortion cannot be performed or induced. If a heartbeat is not detected, an abortion may be performed or induced, in accordance with applicable law, so long as the abortion is performed or induced within 96 hours of the heartbeat detection test. If more than 96 hours has passed since the heartbeat detection test, the physician shall perform a new test prior to an abortion.

FISCAL DESCRIPTION (continued)

The physician shall record the estimated gestational age of the unborn child as well as the time, date, method, and results of the heartbeat detection test in the woman's medical record and in the abortion report submitted to the Department of Health and Senior Services.

Any physician who fails to perform a heartbeat detection test prior to the performance or inducement of an abortion shall be subject to having his or her medical license rejected, revoked, or suspended for 6 months and shall pay a \$1,000 fine. Any physician who performs or induces an abortion following the detection of a heartbeat of the unborn child shall have his or her license revoked and any future license application denied. No woman upon whom an abortion was performed or induced in violation of this act shall be prosecuted for a conspiracy to violate the provisions of this act.

PAIN CAPABLE UNBORN CHILD PROTECTION ACT (Section 188.375)

This act establishes the "Pain-Capable Unborn Child Protection Act," which prohibits any abortion, except in the case of a medical emergency, from being performed or induced on a woman carrying a pain-capable unborn child, defined as an unborn child at twenty weeks since the first day of the woman's last menstrual period. A person violating this provision shall be guilty of a Class B felony, as well as subject to suspension or revocation of his or her professional license.

If a physician performs or induces an abortion upon a woman carrying a pain-capable unborn child in cases of a medical emergency, the physician shall utilize the available method or technique that provides the best opportunity for the unborn child to survive, or if such method is not available, the method or technique that offers less risk to the life and health of the mother. The physician shall document in writing the method or technique utilized and the reason it was selected. In such cases of medical emergency, there shall be another physician in attendance other than the physician performing or inducing the abortion who shall provide immediate care for a child born as a result of the abortion. Any physician who violates these provisions shall be guilty of a Class D felony and subject to suspension or revocation of his or her license.

Any physician that performs or induces an abortion shall report to the Department of Health and Senior Services as specified in the act, including the probable gestational age, if determined, and the basis of that determination, or, if the age was not determined, the basis of the medical emergency. Additionally, the physician shall report the method of abortion. The report shall not contain the name or address of the patient or any other identifying information. The report shall be confidential and shall not be made available except under a court order.

FISCAL DESCRIPTION (continued)

Beginning June 30, 2020, and each year thereafter, the Department shall issue a public report releasing statistical information from previous calendar years compiled from the reports submitted under this act. This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

SOURCES OF INFORMATION

Office of Attorney General  
Department of Health and Senior Services  
Department of Insurance, Financial Institutions and Professional Registration  
Department of Corrections  
Department of Public Safety -  
    Missouri State Highway Patrol  
Department of Social Services  
Legislative Research  
Missouri Office of Prosecution Services  
Office of State Courts Administrator  
Office of State Public Defender



Kyle Rieman  
Director  
March 21, 2019

Ross Strobe  
Assistant Director  
March 21, 2019