

HS HCS HB 156 -- INFORMED CONSENT FOR ABORTION (Phillips)

This substitute revises the provision pertaining to informed consent for an abortion.

Except in the case of a medical emergency, the substitute prohibits a person from performing or inducing an abortion unless a treating physician has conferred with the patient and discussed the indicators and contra-indicators of the proposed abortion or drug or drugs used for the abortion, considering a woman's medical history and medical condition. The conference between a treating physician and the patient must occur at least 24 hours before performing or inducing an abortion.

Before an abortion is performed or induced by a drug or drugs, one conference between a treating physician and the patient must occur 24 hours prior to the writing or communication of the first prescription for a drug or drugs which are used to induce an abortion.

During the conference, the patient is required to be screened for risk factors, which include 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 an abortion or drug or drugs used.

The substitute requires that at the end of the conference, a treating physician and the patient are required to sign a written statement certifying that the screening and discussion have occurred and that the woman gave her informed consent freely and without coercion. All executed statements will be maintained in the patient's medical file which are subject to the confidentiality laws of Missouri.

The Department of Health and Senior Services is required to develop a model form that will be used by treating physicians. In the absence of the model form, treating physicians are not exempt from the requirements of the substitute.

The substitute also requires persons performing abortions to furnish and maintain proof of medical malpractice insurance with coverage amounts of at least \$500,000. Abortion facilities and hospitals may provide medical malpractice insurance for the services of persons employed at their facilities. However, these facilities are prohibited from employing the services of a person to perform abortions if the person has not furnished or maintained proof of medical malpractice insurance.

A person who does not maintain medical malpractice insurance will

be subject to additional sanctioning of his or her license, certificate, or permit.

The provisions concerning proof of medical malpractice insurance become effective January 1, 2004.

FISCAL NOTE: No impact on state funds.