INTRODUCED

HB98

14101939D **HOUSE BILL NO. 98** 1 2 Offered January 8, 2014 3 Prefiled December 13, 2013 4 A BILL to amend and reenact § 18.2-76 of the Code of Virginia and to amend the Code of Virginia by 5 adding a section numbered 18.2-71.2, relating to sex-selective abortions; penalty. 6 Patrons-Marshall, R.G. and Poindexter 7 8 Referred to Committee for Courts of Justice 9 10 Be it enacted by the General Assembly of Virginia: 1. That § 18.2-76 of the Code of Virginia is amended and reenacted and that the Code of Virginia 11 is amended by adding a section numbered 18.2-71.2 as follows: 12 § 18.2-71.2. Sex-selective abortion; penalty. 13 14 A. Any person who intentionally performs an abortion with knowledge that the abortion is sought solely and exclusively on account of the sex of the unborn child is guilty of a Class 4 felony. 15 16 B. This section shall not prohibit the use by a physician of any procedure that, in reasonable medical judgment, is necessary to prevent the death of the mother, so long as the physician takes every 17 medically reasonable step, consistent with such procedure, to preserve the life and health of the infant. 18 19 A procedure shall not be deemed necessary to prevent the death of the mother if completing the delivery 20 of the living infant would prevent the death of the mother. C. The mother may not be prosecuted for any criminal offense based on the performance of any act 21 22 or procedure in violation of this section. 23 D. If the application of this section to the period of the mother's pregnancy prior to the viability of 24 the unborn child is held invalid, such invalidity shall not affect the application of this section to the 25 period of the mother's pregnancy subsequent to the viability of the unborn child. 26 § 18.2-76. Informed written consent required; civil penalty. 27 A. Before performing any abortion or inducing any miscarriage or terminating a pregnancy as 28 provided in § 18.2-72, 18.2-73, or 18.2-74, the physician shall obtain the informed written consent of the 29 pregnant woman. However, if the woman has been adjudicated incapacitated by any court of competent 30 jurisdiction or if the physician knows or has good reason to believe that such woman is incapacitated as 31 adjudicated by a court of competent jurisdiction, then only after permission is given in writing by a parent, guardian, committee, or other person standing in loco parentis to the woman, may the physician 32 33 perform the abortion or otherwise terminate the pregnancy. 34 B. At least 24 hours before the performance of an abortion, a qualified medical professional trained 35 in sonography and working under the supervision of a physician licensed in the Commonwealth shall 36 perform fetal transabdominal ultrasound imaging on the patient undergoing the abortion for the purpose 37 of determining gestational age. If the pregnant woman lives at least 100 miles from the facility where 38 the abortion is to be performed, the fetal ultrasound imaging shall be performed at least two hours 39 before the abortion. The ultrasound image shall contain the dimensions of the fetus and accurately 40 portray the presence of external members and internal organs of the fetus, if present or viewable. 41 Determination of gestational age shall be based upon measurement of the fetus in a manner consistent with standard medical practice in the community for determining gestational age. When only the 42 gestational sac is visible during ultrasound imaging, gestational age may be based upon measurement of 43 the gestational sac. If gestational age cannot be determined by a transabdominal ultrasound, then the 44 patient undergoing the abortion shall be verbally offered other ultrasound imaging to determine 45 gestational age, which she may refuse. A print of the ultrasound image shall be made to document the 46 47 measurements that have been taken to determine the gestational age of the fetus. The provisions of this subsection shall not apply if the woman seeking an abortion is the victim of 48 49 rape or incest, if the incident was reported to law-enforcement authorities. Nothing herein shall preclude the physician from using any ultrasound imaging that he considers to be medically appropriate pursuant 50 51 to the standard medical practice in the community.

52 C. The qualified medical professional performing fetal ultrasound imaging pursuant to subsection B 53 shall verbally offer the woman an opportunity to view the ultrasound image, receive a printed copy of 54 the ultrasound image and hear the fetal heart tones pursuant to standard medical practice in the 55 community, and shall obtain from the woman written certification that this opportunity was offered and 56 whether or not it was accepted and, if applicable, verification that the pregnant woman lives at least 100 57 miles from the facility where the abortion is to be performed. A printed copy of the ultrasound image 58 shall be maintained in the woman's medical record at the facility where the abortion is to be performed 59 for the longer of (i) seven years or (ii) the extent required by applicable federal or state law. 60

D. For purposes of this section:

61 "Informed written consent" means the knowing and voluntary written consent to abortion by a 62 pregnant woman of any age, without undue inducement or any element of force, fraud, deceit, duress, or 63 other form of constraint or coercion by the physician who is to perform the abortion or his agent. The 64 basic information to effect such consent, as required by this subsection, shall be provided by telephone or in person to the woman at least 24 hours before the abortion by the physician who is to perform the 65 abortion, by a referring physician, or by a licensed professional or practical nurse working under the 66 direct supervision of either the physician who is to perform the abortion or the referring physician; however, the information in subdivision 5 may be provided instead by a licensed health-care professional working under the direct supervision of either the physician who is to perform the abortion 67 68 69 70 or the referring physician. This basic information shall include:

71 1. A full, reasonable and comprehensible medical explanation of the nature, benefits, and risks of and alternatives to the proposed procedures or protocols to be followed in her particular case; 72

73 2. An instruction that the woman may withdraw her consent at any time prior to the performance of 74 the procedure:

75 3. An offer for the woman to speak with the physician who is to perform the abortion so that he 76 may answer any questions that the woman may have and provide further information concerning the 77 procedures and protocols;

78 4. A statement of the probable gestational age of the fetus at the time the abortion is to be performed 79 and that fetal ultrasound imaging shall be performed prior to the abortion to confirm the gestational age; 80 and

5. An offer to review the printed materials described in subsection F. If the woman chooses to 81 82 review such materials, they shall be provided to her in a respectful and understandable manner, without 83 prejudice and intended to give the woman the opportunity to make an informed choice and shall be provided to her at least 24 hours before the abortion or mailed to her at least 72 hours before the 84 abortion by first-class mail or, if the woman requests, by certified mail, restricted delivery. This offer for 85 the woman to review the material shall advise her of the following: (i) the Department of Health 86 87 publishes printed materials that describe the unborn child and list agencies that offer alternatives to 88 abortion; (ii) medical assistance benefits may be available for prenatal care, childbirth and neonatal care, 89 and that more detailed information on the availability of such assistance is contained in the printed 90 materials published by the Department; (iii) the father of the unborn child is liable to assist in the 91 support of her child, even in instances where he has offered to pay for the abortion, that assistance in 92 the collection of such support is available, and that more detailed information on the availability of such 93 assistance is contained in the printed materials published by the Department; (iv) she has the right to review the materials printed by the Department and that copies will be provided to her free of charge if 94 95 she chooses to review them; and (v) a statewide list of public and private agencies and services that provide ultrasound imaging and auscultation of fetal heart tone services free of charge. Where the 96 97 woman has advised that the pregnancy is the result of a rape, the information in clause (iii) may be 98 omitted-; and

99 6. A statement that it is a criminal offense for a physician to perform an abortion that is sought 100 solely on account of the sex of the unborn child and that a physician shall not perform an abortion 101 sought for this reason. 102

The information required by this subsection may be provided by telephone or in person.

103 E. The physician need not obtain the informed written consent of the woman when the abortion is to be performed pursuant to a medical emergency or spontaneous miscarriage. "Medical emergency" means 104 any condition which, on the basis of the physician's good faith clinical judgment, so complicates the 105 medical condition of a pregnant woman as to necessitate the immediate abortion of her pregnancy to 106 107 avert her death or for which a delay will create a serious risk of substantial and irreversible impairment 108 of a major bodily function.

109 F. On or before October 1, 2001, the Department of Health shall publish, in English and in each 110 language which is the primary language of two percent or more of the population of the 111 Commonwealth, the following printed materials in such a way as to ensure that the information is easily 112 comprehensible:

113 1. Geographically indexed materials designed to inform the woman of public and private agencies and services available to assist a woman through pregnancy, upon childbirth and while the child is 114 115 dependent, including, but not limited to, information on services relating to (i) adoption as a positive alternative, (ii) information relative to counseling services, benefits, financial assistance, medical care 116 and contact persons or groups, (iii) paternity establishment and child support enforcement, (iv) child 117 development, (v) child rearing and stress management, (vi) pediatric and maternal health care, and (vii) 118 119 public and private agencies and services that provide ultrasound imaging and auscultation of fetal heart tone services free of charge. The materials shall include a comprehensive list of the names and 120

telephone numbers of the agencies, or, at the option of the Department of Health, printed materials
including a toll-free, 24-hour-a-day telephone number which may be called to obtain, orally, such a list
and description of agencies in the locality of the caller and of the services they offer;

124 2. Materials designed to inform the woman of the probable anatomical and physiological 125 characteristics of the human fetus at two-week gestational increments from the time when a woman can 126 be known to be pregnant to full term, including any relevant information on the possibility of the fetus's 127 survival and pictures or drawings representing the development of the human fetus at two-week 128 gestational increments. Such pictures or drawings shall contain the dimensions of the fetus and shall be 129 realistic and appropriate for the stage of pregnancy depicted. The materials shall be objective, 130 nonjudgmental and designed to convey only accurate scientific information about the human fetus at the 131 various gestational ages; and

3. Materials containing objective information describing the methods of abortion procedures
commonly employed, the medical risks commonly associated with each such procedure, the possible
detrimental psychological effects of abortion, and the medical risks commonly associated with carrying a
child to term.

136 The Department of Health shall make these materials available at each local health department and, 137 upon request, to any person or entity, in reasonable numbers and without cost to the requesting party.

138 G. Any physician who fails to comply with the provisions of this section shall be subject to a \$2,500 civil penalty.

140 2. That the provisions of this act may result in a net increase in periods of imprisonment or 141 commitment. Pursuant to § 30-19.1:4, the estimated amount of the necessary appropriation cannot 142 be determined for periods of imprisonment in state adult correctional facilities; therefore, Chapter 143 806 of the Acts of Assembly of 2013 requires the Virginia Criminal Sentencing Commission to 144 assign a minimum fiscal impact of \$50,000. Pursuant to § 30-19.1:4, the estimated amount of the 145 necessary appropriation is \$0 for periods of commitment to the custody of the Department of

146 Juvenile Justice.

HB98