WEST VIRGINIA LEGISLATURE 2021 REGULAR SESSION

Committee Substitute

for

House Bill 2982

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[Introduced March 8, 2021; referred to the Committee
on Health and Human Resources then the Judiciary]

A BILL to amend and reenact §16-2I-1, §16-2I-2, and §16-2I-3 of the Code of West Virginia, 1931, as amended, all relating to the Second Chance at Life Act; requiring that information about the process of chemical abortion be provided to a woman prior to prescribing pharmaceuticals for, or administering, a chemical abortion except in certain emergency circumstances; updating definitions; specifying that the woman be informed of the possibility of reversal of a chemical abortion if undertaken within a critical time period; dictating minimum standards for printed materials; and requiring documentation of the procedures required hereby.

Be it enacted by the Legislature of West Virginia:

ARTICLE 2I. WOMEN'S RIGHT TO KNOW ACT.

§16-2I-1. Definitions.

For the purposes of this article, the words or phrases defined in this section have these meanings ascribed to them.

(a) "Abortion" means the use or prescription of any instrument, medicine, drug or any other substance or device intentionally to terminate the pregnancy of a female known to be pregnant with an intention other than to increase the probability of a live birth, to preserve the life or health of the child after live birth or to remove a dead embryo or fetus.

means the same as that term is defined in §16-2F-2 of this code.

(b) "Attempt to perform an abortion" means an act, or an omission of a statutorily required act, that, under the circumstances as the actor believes them to be, constitutes a substantial step in a course of conduct planned to culminate in the performance of an abortion in West Virginia in violation of this article. means the same as that term is defined in §16-2M-2 of this code.

"Chemical abortion" means the use or prescription of an abortion-inducing drug dispensed with the intent to cause the death of the unborn child.

"Licensed medical professional" means the same as that term is defined in §16-2P-1 of this code.

16	(c) "Medical emergency" means any condition which, on the basis of a physician's good-
17	faith clinical judgment, so complicates the medical condition of a pregnant female as to
18	necessitate the immediate termination of her pregnancy to avert her death or for which a delay
19	will create serious risk of substantial and irreversible impairment of a major bodily function.
20	means the same as that term is defined in §16-2M-2 of this code.
21	(d) "Physician" means any medical or osteopathic doctor licensed to practice medicine in
22	this state. means the same as that term is defined in §16-2M-2 of this code.
23	(e) "Probable gestational age of the embryo or fetus" means what, in the judgment of the
24	physician, will with reasonable probability be the gestational age of the embryo or fetus at the
25	time the abortion is planned to be performed.
26	"Reasonable medical judgement" means the same as that term is defined in §16-2M-2 of
27	this code.
28	(f) "Stable Internet website" means a website that, to the extent reasonably practicable, is
29	safeguarded from having its content altered other by another than by the Department of Health
30	and Human Resources.

§16-2I-2. Informed consent.

- No An abortion may not be performed in this state except with the voluntary and informed consent of the female upon whom the abortion is to be performed. Except in the case of a medical emergency, consent to an abortion is voluntary and informed if, and only if:
- (a) The female is told the following, by telephone or in person, by the physician or the licensed health care medical professional to whom the responsibility has been delegated by the physician who is to perform the abortion at least 24 hours before the abortion:
- (1) The particular medical risks associated with the particular abortion procedure to be employed, including, when medically accurate, the risks of infection, hemorrhage, danger to subsequent pregnancies and infertility;

10	(2) The probable gestational age of the embryo or fetus at the time the abortion is to be
11	performed; and

- (3) The medical risks associated with carrying her child to term; and
- (4) If a chemical abortion involving the two-drug process of mifepristone and then misoprostol the female shall be informed that:
- (A) It may be possible to stop the intended effects of a chemical abortion utilizing mifepristone if the female changes her mind, but that time is of the essence; and
- (B) After the first drug involved in the two-drug process is dispensed in a chemical abortion utilizing mifepristone, the physician or an agent of the physician shall provide written medical discharge instructions to the pregnant female which shall include the statement:

"If you change your mind, it may be possible to avoid, cease, or even to stop the intended effects of a chemical abortion utilizing mifepristone, if the second pill has not been taken. Please consult with a health care provider."

The information required by this subsection may be provided by telephone without conducting a physical examination or tests of the patient, in which case the information required to be provided may be based on facts supplied by the female to the physician or other licensed health care professional to whom the responsibility has been delegated by the physician and whatever other relevant information is reasonably available to the physician or other licensed health care professional to whom the responsibility has been delegated by the physician. It may not be provided by a tape recording, but must be provided during a consultation in which the physician or licensed health care professional to whom the responsibility has been delegated by the physician is able to ask questions of the female and the female is able to ask questions of the physician or the licensed health care professional to whom the responsibility has been delegated by the physician.

If a physical examination, tests or the availability of other information to the physician or other licensed health care professional to whom the responsibility has been delegated by the

physician subsequently indicate, in the medical judgment of the physician or the licensed health care professional to whom the responsibility has been delegated by the physician, a revision of the information previously supplied to the patient, that revised information may be communicated to the patient at any time before the performance of the abortion procedure.

Nothing in this section may be construed to preclude provision of required information in a language understood by the patient through a translator.

- (b) The female is informed, by telephone or in person, by the physician who is to perform the abortion, or by an agent of the physician, at least 24 hours before the abortion procedure:
- (1) That medical assistance benefits may be available for prenatal care, childbirth, and neonatal care through governmental or private entities;
- (2) That the father, if his identity can be determined, is liable to assist in the support of her child based upon his ability to pay even in instances in which the father has offered to pay for the abortion;
- (3) That she has the right to review the printed materials described in §16-2I-3 of this code, that these materials are available on a state-sponsored website and the website address; and
- (4) That the female will be presented with a form which she will be required to execute prior to the abortion procedure that is available pursuant to §16-2I-3 of this code, and that the form to be presented will inform her of the opportunity to view the ultrasound image and her right to view or decline to view the ultrasound image, if an ultrasound is performed.

The physician or an agent of the physician shall orally inform the female that the materials have been provided by the State of West Virginia and that they describe the embryo or fetus and list agencies and entities which offer alternatives to abortion.

If the female chooses to view the materials other than on the website, then they shall either be provided to her at least 24 hours before the abortion or mailed to her at least 72 hours before the abortion by first class mail in an unmarked envelope.

The information required by this subsection may be provided by a tape recording if provision is made to record or otherwise register specifically whether the female does or does not choose to have the printed materials given or mailed to her.

- (c) The form required pursuant to subdivision (b)(4) of this section shall include the following information:
- (1) It is a female's decision whether or not to undergo any ultrasound imaging procedure in consultation with her health care provider;
- (2) If an ultrasound is performed in conjunction with the performance of an abortion procedure, the female has the right to view or to decline to view the image; and
- (3) That the woman female has been previously informed of her opportunity to view the ultrasound image and her right to view or decline to view the ultrasound image. The woman female shall certify her choice on this form prior to the abortion procedure being performed.

The female shall certify in writing, before the abortion, that the information described in subsections (a) and (b) of this section has been provided to her and that she has been informed of her opportunity to review the information referred to in subdivision (b)(3) of this section.

Before performing the abortion procedure, the physician who is to perform the abortion or the physician's agent shall obtain a copy of the executed certification required by the provisions of subsections (b) and (c) of this section.

(d) The female shall certify in writing, before the abortion, that the information described in §16-2I-2(a)(4) has been provided to her and that she has been notified about the possibility of stopping the intended effects of a chemical abortion.

§16-2I-3. Printed information.

(a) Within 90 days of the effective date of this article, the Secretary of the Department of Health and Human Resources shall cause to be published, in English and in each language which is the primary language of 2% or more of the state's population, as determined by the most recent decennial census performed by the U.S. census bureau, and shall cause to be available on the

website provided for in section four of this article §16-21-4 the following printed materials in such a way as to ensure that the information is easily comprehensible:

- (1) Geographically indexed materials designed to inform the reader of public and private agencies and services available to assist a female through pregnancy, upon childbirth and while the child is dependent, including adoption agencies, which shall include a comprehensive list of the agencies available, a description of the services they offer and a description of the manner, including telephone numbers. At the option of the Secretary of Health and Human Resources, a 24-hour-a-day telephone number may be established with the number being published in such a way as to maximize public awareness of its existence which may be called to obtain a list and description of agencies in the locality of the caller and of the services they offer; and
- (2) Materials designed to inform the female of the probable anatomical and physiological characteristics of the embryo or fetus at two-week gestational increments from the time when a female can be known to be pregnant to full term, including any relevant information on the possibility of the embryo or fetus's survival and pictures or drawings representing the development of an embryo or fetus at two-week gestational increments: *Provided*, That any such pictures or drawings must contain the dimensions of the embryo or fetus and must be realistic and appropriate for the stage of pregnancy depicted. The materials shall be objective, nonjudgmental, and designed to convey only accurate scientific information about the embryo or fetus at the various gestational ages. The material shall also contain objective information describing the methods of abortion procedures commonly employed, the medical risks commonly associated with each procedure, the possible detrimental psychological effects of abortion and the medical risks commonly associated with carrying a child to term; and
- (3) Materials designed to inform the female of the possibility of stopping the effects of a chemical abortion utilizing mifepristone, if she changes her mind, and information on and assistance with the resources that may be available.

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- (b) The materials referred to in subsection (a) of this section shall be printed in a typeface large enough to be clearly legible. The website provided for in section four of this article shall be maintained at a minimum resolution of seventy dots per inch. All pictures appearing on the website shall be a minimum of 200 x 300 pixels. All letters on the website shall be a minimum of 11-point font. All information and pictures shall be accessible with an industry standard browser requiring no additional plug-ins.
- (c) The materials required under this section shall be available at no cost from the Department of Health and Human Resources upon request and in appropriate numbers to any person, facility or hospital.

NOTE: The purpose of this bill is to require that information about the process of chemical abortion be provided to a woman prior to prescribing pharmaceuticals for, or administering, a chemical abortion except in certain emergency circumstances.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.