# MAINE STATE LEGISLATURE

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## 119th MAINE LEGISLATURE

### **FIRST REGULAR SESSION-1999**

Legislative Document

No. 2123

H.P. 1483

House of Representatives, March 30, 1999

An Act to Require a 24-hour Waiting Period before an Abortion May Be Performed.

Reference to the Committee on Judiciary suggested and ordered printed.

OSEPH W. MAYO, Clerk

Presented by Representative AHEARNE of Madawaska. Cosponsored by Senator DAVIS of Piscataquis and Representatives: BOUFFARD of Lewiston, CARR of Lincoln, DAVIS of Falmouth, MACK of Standish, PERRY of Bangor, SIROIS of Caribou.

Be	it	enacted	by	the !	People	of	the Sta	te of	f Maine	as	follows:	
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- Sec. 1. 22 MRSA §1598, sub-§1, as amended by PL 1993, c. 61, §2, is repealed and the following enacted in its place:

  1. Policy. It is the public policy of the State that an abortion after viability may be performed only when necessary to
- abortion after viability may be performed only when necessary to

  8 preserve the life or health of the pregnant woman. It is also
  the public policy that abortions may be performed only by a

  10 physician.
- Sec. 2. 22 MRSA §1598, sub-§2, as enacted by PL 1979, c. 405, §2, is amended to read:
- 2. Definitions. As used in this section and in sections 16 1599-B to 1599-E, unless the context otherwise indicates, the following terms shall have the following meanings.

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- A. "Abortion" means the intentional interruption of a pregnancy by the application of external agents, whether chemical or physical or by the ingestion of chemical agents with an intention other than to produce a live birth or to remove a dead fetus.
- A-1. "Medical emergency" means a condition that, 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 to avoid a delay that would create serious risk
  of substantial and irreversible impairment of a major bodily
  function.
- B. "Viability" means the state of fetal development when the life of the fetus may be continued indefinitely outside the womb by natural or artificial life-supportive systems.
- Sec. 3. 22 MRSA §1598, sub-§4, as enacted by PL 1979, c. 405, 38 §2, is amended to read:
- 4. Abortions after viability; criminal liability. A person who performs an abortion after viability is-guilty-ef commits a Class D crime if:
- A. He <u>That person</u> knowingly <u>disregarded disregards</u> the viability of the fetus; and
- B. He-knew <u>That person knows</u> that the abortion was <u>is</u> not necessary for the preservation of the life or health of the mether <u>pregnant woman</u>.

2	Sec. 4. 22 MRSA $\S1599$ -A, as enacted by PL 1993, c. 61, $\S4$ , is repealed.
4	Sec. 5. 22 MRSA §§1599-B, 1599-C, 1599-D and 1599-E are enacted to read:
6 8	\$1599-B. Informed consent to abortion
ŭ	An abortion may not be performed or induced except with the
10	voluntary and informed consent of the pregnant woman upon whom the abortion is to be performed or induced, obtained in
12	accordance with this section.
14	1. Standards for consent. Except in the case of a medical emergency, consent to an abortion is voluntary and informed only
16	if before the consent is given the physician who is to perform the abortion or the referring physician, or a qualified physician
18	assistant, health care practitioner, technician or social worker to whom the responsibility has been delegated by either
20	physician, orally informs the pregnant woman of the nature of the proposed procedure or treatment and of those risks and
22	alternatives to the procedure or treatment that a reasonable patient would consider material to the decision whether to
24	undergo the abortion, and the pregnant woman certifies in writing
26	before the abortion that she has been provided with that information. The following elements of notice and consent are
	required by this section.
28	A. At least 24 hours before an abortion, the physician who
30	is to perform the abortion or the referring physician shall orally and in person inform the pregnant woman of:
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34	(1) The nature of the proposed procedure or treatment and of those risks and alternatives to the procedure or
36	treatment that a reasonable patient would consider material to the decision of whether to undergo the
	abortion;
38	(2) The probable gestational age of the fetus at the
40	time the abortion is to be performed; and
42	(3) The medical risks associated with carrying the fetus to term.
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46	B. At least 24 hours before an abortion, the physician who is to perform the abortion or the referring physician, or a
48	qualified physician assistant, health care practitioner, technician or social worker to whom the responsibility has been delegated by either physician, shall inform the
50	pregnant woman that:

2	(1) The department publishes printed material that
	describes the fetus and lists agencies that offer
4	alternatives to abortion, that she has a right to
	review the printed material and that a copy must be
6	provided to her free of charge if she chooses to review
	the material;
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	(2) Medical assistance benefits may be available for
10	prenatal care, childbirth and neonatal care and that
	more detailed information on the availability of that
12	assistance is contained in the printed material
	published by the department; and
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	(3) The father of the fetus is liable to assist in the
16	support of her child after birth even when he has
	offered to pay for the abortion. In the case of rape,
18	this information may be omitted.
20	C. The information in paragraphs A and B must be provided
	to the woman individually and in a private room to protect
22	her privacy and maintain the confidentiality of her decision
	and to ensure that the information focuses on her individual
24	circumstances and that she has an adequate opportunity to
	ask questions.
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	D. At least 24 hours before the abortion, the woman must be
28	given a copy of the printed material described in section
	1599-C. If the woman is unable to the read the material, it
30	must be read to her. If the woman asks questions concerning
	any of the information or material, answers must be provided
32	to her in her own language.
34	E. Prior to the abortion, the woman must certify in writing
	on a certification form provided by the department that the
36	information required to be provided under paragraphs A, B
	and D has been provided. All physicians who perform
38	abortions shall report the total number of certifications
	received monthly to the department. The department shall
40	make the number of certificates received available to the
	public on an annual basis.
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	2. Violations: penalties. A physician who violates the
44	provisions of this section commits unprofessional conduct and the
	physician's license to practice is subject to suspension or
46	revocation in accordance with procedures provided under Title 32,
	chapter 36, subchapter V or Title 32, chapter 48, subchapter II.
48	In addition, a physician who performs or induces an abortion
	without first obtaining the certification required by subsection
50	1, paragraph E or with knowledge or reason to know that the

informed consent of the pregnant woman has not been obtained
commits a Class E crime for the first offense and a Class D crime
for each subsequent offense. It is a defense to any action for
violation of this section based on a failure to furnish the
information required by subsection 1, paragraph A or B if the
physician can demonstrate, by a preponderance of the evidence,
that the physician reasonably believed that furnishing the
information would have resulted in a severely adverse effect on
the physical or mental health of the pregnant woman.

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### §1599-C. Printed information required

The department shall publish and make available within 60 days of the effective date of this section the following printed material:

1. List of services. Geographically indexed material designed to inform a pregnant woman of public and private agencies and services available to assist a woman through pregnancy and childbirth and while the child is dependent, including but not limited to adoption agencies, which must include a comprehensive list of the agencies available, a description of the services those agencies offer and a description of the manner, including telephone numbers, in which the agencies may be contacted or, at the option of the department, printed material including a toll-free, 24-hour telephone number that may be called to obtain such a list and a description of agencies in the locality of the caller and the services offered by those agencies. The material must include the following statement.

"There are many 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 to place your child for adoption. The Maine Department of Human Services strongly urges you to contact the department before making a final decision about abortion."

The material must include information on the availability of medical assistance benefits for prenatal care, childbirth and neonatal care and state that it is unlawful for any individual to coerce a woman to undergo an abortion; that any physician who performs an abortion without obtaining informed consent from that woman or without making available a private medical consultation may be liable to her for damages in a civil court action; that the father of a child is liable to assist in the support of that child even in instances when the father has offered to pay for an abortion; and that the law permits adoptive parents to pay costs of prenatal care, childbirth and neonatal care;

- 2 2. Characteristics of fetus. Material designed to inform a pregnant woman of the probable anatomical and physiological characteristics of a fetus at 2-week gestational increments from fertilization to full term, including pictures representing the 6 development of a fetus at 2-week gestational increments and any relevant information on the possibility of the survival of the 8 fetus. The pictures or drawings must contain the dimensions of the fetus and be realistic and appropriate for the woman's stage 10 of pregnancy. The material must be objective, nonjudgmental and designed to convey only accurate scientific information about the 12 fetus at the various gestational stages. The material must also contain objective information describing the methods of abortion procedures commonly employed, the medical risks commonly 14 associated with each procedure, the possible detrimental 16 psychological effects of abortion and the medical risks commonly associated with carrying a fetus to term; and
- 3. Certification form. A certification form to be used by
  the physician or the physician's agent under section 1599-B,
  subsection 1, paragraph E that lists all the items of information
  that must be given to a woman by the physician or the physician's
  agent.

All material published pursuant to this section must be easily comprehensible to the average reader.

### §1599-D. Civil penalties

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- 1. Civil malpractice action. Any institutional violation of this chapter is admissible in a civil suit as prima facie evidence of a failure to obtain an informed consent. When requested, the court shall allow a woman to proceed using solely her initials or a pseudonym and may close any proceedings in the case and enter other protective orders to preserve the privacy of the woman upon whom the abortion was performed.
- 2. Medical malpractice. Violation of this chapter provides a basis for professional disciplinary action under laws governing medical malpractice.
- 3. Wrongful death. Violation of this chapter provides a basis for recovery for the woman for the death of her child under laws governing wrongful death, whether the child was unborn but viable at the time the abortion was performed or was born alive.

#### \$1599-E. Construction

This chapter may not be construed to create or recognize a right to abortion.

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	abortion that is currently unlawful.
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6	SUMMARY
8	This bill repeals existing standards for informed consent and replaces them with a provision modeled after the Pennsylvania
10	statute held constitutional in Planned Parenthood of Southeastern
	Pennsylvania v. Casey, 505 U.S. 833, 112 S.Ct. 2791, 120 L.Ed.2d
12	674 (1992).