1	ABORTION REVISIONS
2	2024 GENERAL SESSION
3	STATE OF UTAH
4	Chief Sponsor: Brian S. King
5	Senate Sponsor:
6 7	LONG TITLE
8	General Description:
9	This bill modifies provisions related to abortion.
10	Highlighted Provisions:
11	This bill:
12	 allows for the licensing of abortion clinics and allows an abortion to be performed
13	in an abortion clinic;
14	 removes the 72-hour waiting period before an abortion may be performed;
15	 modifies the material that must be included in an information module and website
16	concerning abortion; and
17	makes technical and conforming changes.
18	Money Appropriated in this Bill:
19	None
20	Other Special Clauses:
21	None
22	Utah Code Sections Affected:
23	AMENDS:
24	26B-2-201, as last amended by Laws of Utah 2023, Chapter 301 and renumbered and
25	amended by Laws of Utah 2023, Chapter 305
26	26B-2-204, as last amended by Laws of Utah 2023, Chapter 301 and renumbered and
27	amended by Laws of Utah 2023, Chapter 305



28	26B-2-205, as last amended by Laws of Utah 2023, Chapter 301 and renumbered and
29	amended by Laws of Utah 2023, Chapter 305
30	26B-2-206, as last amended by Laws of Utah 2023, Chapter 301 and renumbered and
31	amended by Laws of Utah 2023, Chapter 305
32	26B-2-224, as last amended by Laws of Utah 2023, Chapter 301 and renumbered and
33	amended by Laws of Utah 2023, Chapter 305
34	26B-2-232, as renumbered and amended by Laws of Utah 2023, Chapter 305
35	76-7-301, as last amended by Laws of Utah 2023, Chapters 301, 330
36	76-7-302, as last amended by Laws of Utah 2023, Chapters 158, 301
37	76-7-305, as last amended by Laws of Utah 2023, Chapters 301, 330
38	76-7-305.5, as last amended by Laws of Utah 2023, Chapters 301, 330
39	76-7a-101, as last amended by Laws of Utah 2023, Chapters 158, 301
40	76-7a-201, as last amended by Laws of Utah 2023, Chapters 158, 301
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42	Be it enacted by the Legislature of the state of Utah:
43	Section 1. Section 26B-2-201 is amended to read:
44	26B-2-201. Definitions.
45	As used in this part:
46	(1) [(a)] "Abortion clinic" means a type I abortion clinic or a type II abortion clinic.
47	[(b) "Abortion clinic" does not mean a clinic that meets the definition of hospital under
48	Section 76-7-301 or Section 76-71-101.]
49	(2) "Activities of daily living" means essential activities including:
50	(a) dressing;
51	(b) eating;
52	(c) grooming;
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	(d) bathing;
54	(d) bathing;(e) toileting;
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	(e) toileting;
55	(e) toileting;(f) ambulation;

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- 59 surgical services to patients not requiring hospitalization.
 - (4) "Assistance with activities of daily living" means providing of or arranging for the provision of assistance with activities of daily living.
 - (5) (a) "Assisted living facility" means:
 - (i) a type I assisted living facility, which is a residential facility that provides assistance with activities of daily living and social care to two or more residents who:
 - (A) require protected living arrangements; and
 - (B) are capable of achieving mobility sufficient to exit the facility without the assistance of another person; and
 - (ii) a type II assisted living facility, which is a residential facility with a home-like setting that provides an array of coordinated supportive personal and health care services available 24 hours per day to residents who have been assessed under department rule to need any of these services.
 - (b) Each resident in a type I or type II assisted living facility shall have a service plan based on the assessment, which may include:
 - (i) specified services of intermittent nursing care;
 - (ii) administration of medication; and
 - (iii) support services promoting residents' independence and self-sufficiency.
 - (6) "Birthing center" means a facility that:
 - (a) receives maternal clients and provides care during pregnancy, delivery, and immediately after delivery; and
 - (b) (i) is freestanding; or
 - (ii) is not freestanding, but meets the requirements for an alongside midwifery unit described in Subsection 26B-2-228(7).
 - (7) "Committee" means the Health Facility Committee created in Section 26B-1-204.
 - (8) "Consumer" means any person not primarily engaged in the provision of health care to individuals or in the administration of facilities or institutions in which such care is provided and who does not hold a fiduciary position, or have a fiduciary interest in any entity involved in the provision of health care, and does not receive, either directly or through his spouse, more than 1/10 of his gross income from any entity or activity relating to health care.
 - (9) "End stage renal disease facility" means a facility which furnishes staff-assisted

kidney dialysis services, self-dialysis services, or home-dialysis services on an outpatient basis.

- (10) "Freestanding" means existing independently or physically separated from another health care facility by fire walls and doors and administrated by separate staff with separate records.
- (11) "General acute hospital" means a facility which provides diagnostic, therapeutic, and rehabilitative services to both inpatients and outpatients by or under the supervision of physicians.
- (12) "Governmental unit" means the state, or any county, municipality, or other political subdivision or any department, division, board, or agency of the state, a county, municipality, or other political subdivision.
- (13) (a) "Health care facility" means general acute hospitals, specialty hospitals, home health agencies, hospices, nursing care facilities, residential-assisted living facilities, birthing centers, ambulatory surgical facilities, small health care facilities, abortion clinics, [a clinic that meets the definition of hospital under Section 76-7-301 or 76-71-201,] facilities owned or operated by health maintenance organizations, end stage renal disease facilities, and any other health care facility which the committee designates by rule.
- (b) "Health care facility" does not include the offices of private physicians or dentists, whether for individual or group practice, except that it does include an abortion clinic.
- (14) "Health maintenance organization" means an organization, organized under the laws of any state which:
 - (a) is a qualified health maintenance organization under 42 U.S.C. Sec. 300e-9; or
- (b) (i) provides or otherwise makes available to enrolled participants at least the following basic health care services: usual physician services, hospitalization, laboratory, x-ray, emergency, and preventive services and out-of-area coverage;
- (ii) is compensated, except for copayments, for the provision of the basic health services listed in Subsection (14)(b)(i) to enrolled participants by a payment which is paid on a periodic basis without regard to the date the health services are provided and which is fixed without regard to the frequency, extent, or kind of health services actually provided; and
- (iii) provides physicians' services primarily directly through physicians who are either employees or partners of such organizations, or through arrangements with individual physicians or one or more groups of physicians organized on a group practice or individual

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- (15) (a) "Home health agency" means an agency, organization, or facility or a subdivision of an agency, organization, or facility which employs two or more direct care staff persons who provide licensed nursing services, therapeutic services of physical therapy, speech therapy, occupational therapy, medical social services, or home health aide services on a visiting basis.
- (b) "Home health agency" does not mean an individual who provides services under the authority of a private license.
- (16) "Hospice" means a program of care for the terminally ill and their families which occurs in a home or in a health care facility and which provides medical, palliative, psychological, spiritual, and supportive care and treatment.
- (17) "Nursing care facility" means a health care facility, other than a general acute or specialty hospital, constructed, licensed, and operated to provide patient living accommodations, 24-hour staff availability, and at least two of the following patient services:
- (a) a selection of patient care services, under the direction and supervision of a registered nurse, ranging from continuous medical, skilled nursing, psychological, or other professional therapies to intermittent health-related or paraprofessional personal care services;
- (b) a structured, supportive social living environment based on a professionally designed and supervised treatment plan, oriented to the individual's habilitation or rehabilitation needs; or
- (c) a supervised living environment that provides support, training, or assistance with individual activities of daily living.
- (18) "Person" means any individual, firm, partnership, corporation, company, association, or joint stock association, and the legal successor thereof.
 - (19) "Resident" means a person 21 years old or older who:
- (a) as a result of physical or mental limitations or age requires or requests services provided in an assisted living facility; and
- (b) does not require intensive medical or nursing services as provided in a hospital or nursing care facility.
- 150 (20) "Small health care facility" means a four to 16 bed facility that provides licensed 151 health care programs and services to residents.

152	(21) "Specialty hospital" means a facility which provides specialized diagnostic,
153	therapeutic, or rehabilitative services in the recognized specialty or specialties for which the
154	hospital is licensed.
155	(22) "Substantial compliance" means in a department survey of a licensee, the
156	department determines there is an absence of deficiencies which would harm the physical
157	health, mental health, safety, or welfare of patients or residents of a licensee.
158	(23) "Type I abortion clinic" means a facility, including a physician's office, but not
159	including a general acute or specialty hospital, that:
160	(a) performs abortions, as defined in Section 76-7-301, during the first trimester of
161	pregnancy; and
162	(b) does not perform abortions, as defined in Section 76-7-301, after the first trimester
163	of pregnancy.
164	(24) "Type II abortion clinic" means a facility, including a physician's office, but not
165	including a general acute or specialty hospital, that:
166	(a) performs abortions, as defined in Section 76-7-301, after the first trimester of
167	pregnancy; or
168	(b) performs abortions, as defined in Section 76-7-301, during the first trimester of
169	pregnancy and after the first trimester of pregnancy.
170	Section 2. Section 26B-2-204 is amended to read:
171	26B-2-204. Licensing of an abortion clinic Rulemaking authority Fee
172	Licensing of a clinic meeting the definition of hospital.
173	[(1) (a) No abortion clinic may operate in the state on or after January 1, 2024, or the
174	last valid date of an abortion clinic license issued under the requirements of this section,
175	whichever date is later.]
176	[(b) Notwithstanding Subsection (1)(a), a licensed abortion clinic may not perform an
177	abortion in violation of any provision of state law.]
178	[(2) The state may not issue a license for an abortion clinic after May 2, 2023.]
179	[(3) For any license for an abortion clinic that is issued under this section:]
180	[(a)] (1) A type I abortion clinic may not operate in the state without a license issued by
181	the department to operate a type I abortion clinic.
182	[(b)] (2) A type II abortion clinic may not operate in the state without a license issued

183	by the department to operate a type II abortion clinic.
184	[(c)] (3) The department shall make rules establishing minimum health, safety,
185	sanitary, and recordkeeping requirements for:
186	[(i)] (a) a type I abortion clinic; and
187	[(ii)] (b) a type II abortion clinic.
188	[(d)] (4) To receive and maintain a license described in this section, an abortion clinic
189	shall:
190	[(i)] (a) apply for a license on a form prescribed by the department;
191	[(ii)] (b) satisfy and maintain the minimum health, safety, sanitary, and recordkeeping
192	requirements established [unde7r] under Subsection (3) that relate to the type of abortion clinic
193	licensed;
194	[(iii)] (c) comply with the recordkeeping and reporting requirements of Section
195	76-7-313;
196	[(iv)] (d) comply with the requirements of Title 76, Chapter 7, Part 3, Abortion, and
197	Title 76, Chapter 7a, Abortion Prohibition;
198	[(v)] (e) pay the annual licensing fee; and
199	[(vi)] (f) cooperate with inspections conducted by the department.
200	[(e)] (5) The department shall, at least twice per year, inspect each abortion clinic in
201	the state to ensure that the abortion clinic is complying with all statutory and licensing
202	requirements relating to the abortion clinic. At least one of the inspections shall be made
203	without providing notice to the abortion clinic.
204	[(f)] (6) The department shall charge an annual license fee, set by the department in
205	accordance with the procedures described in Section 63J-1-504, to an abortion clinic in an
206	amount that will pay for the cost of the licensing requirements described in this section and the
207	cost of inspecting abortion clinics.
208	[(g)] (7) The department shall deposit the licensing fees described in this section in the
209	General Fund as a dedicated credit to be used solely to pay for the cost of the licensing
210	requirements described in this section and the cost of inspecting abortion clinics.
211	[(4) (a) Notwithstanding any other provision of this section, the department may
212	license a clinic that meets the definition of hospital under Section 76-7-301 or Section
213	76-7a-101.]

214	[(b) A clinic described in Subsection (4)(a) is not defined as an abortion clinic.]
215	Section 3. Section 26B-2-205 is amended to read:
216	26B-2-205. Exempt facilities.
217	This part does not apply to:
218	(1) a dispensary or first aid facility maintained by any commercial or industrial plant,
219	educational institution, or convent;
220	(2) a health care facility owned or operated by an agency of the United States;
221	(3) the office of a physician, physician assistant, or dentist whether it is an individual
222	or group practice, except that it does apply to an abortion clinic;
223	(4) a health care facility established or operated by any recognized church or
224	denomination for the practice of religious tenets administered by mental or spiritual means
225	without the use of drugs, whether gratuitously or for compensation, if it complies with statutes
226	and rules on environmental protection and life safety;
227	(5) any health care facility owned or operated by the Department of Corrections,
228	created in Section 64-13-2; and
229	(6) a residential facility providing 24-hour care:
230	(a) that does not employ direct care staff;
231	(b) in which the residents of the facility contract with a licensed hospice agency to
232	receive end-of-life medical care; and
233	(c) that meets other requirements for an exemption as designated by administrative
234	rule.
235	Section 4. Section 26B-2-206 is amended to read:
236	26B-2-206. License required Not assignable or transferable Posting
237	Expiration and renewal Time for compliance by operating facilities.
238	(1) (a) A person or governmental unit acting severally or jointly with any other person
239	or governmental unit, may not establish, conduct, or maintain a health care facility in this state
240	without receiving a license from the department as provided by this part and the rules adopted
241	pursuant to this part.
242	(b) This Subsection (1) does not apply to facilities that are exempt under Section
243	26B-2-205.
244	(2) A license issued under this part is not assignable or transferable.

245	(3) The current license shall at all times be posted in each health care facility in a place
246	readily visible and accessible to the public.
247	(4) (a) The department may issue a license for a period of time not to exceed 12
248	months from the date of issuance for an abortion clinic and not to exceed 24 months from the
249	date of issuance for other health care facilities that meet the provisions of this part and
250	department rules adopted pursuant to this part.
251	(b) Each license expires at midnight on the day designated on the license as the
252	expiration date, unless previously revoked by the department.
253	(c) The license shall be renewed upon completion of the application requirements,
254	unless the department finds the health care facility has not complied with the provisions of this
255	part or the rules adopted pursuant to this part.
256	(5) A license may be issued under this section only for the operation of a specific
257	facility at a specific site by a specific person.
258	(6) Any health care facility in operation at the time of adoption of any applicable rules
259	as provided under this part shall be given a reasonable time for compliance as determined by
260	the committee.
261	Section 5. Section 26B-2-224 is amended to read:
262	26B-2-224. Patient identity protection.
263	(1) As used in this section:
264	(a) "EMTALA" means the federal Emergency Medical Treatment and Active Labor
265	Act.
266	(b) "Health professional office" means:
267	(i) a physician's office; or
268	(ii) a dental office.
269	(c) "Medical facility" means:
270	(i) a general acute hospital;
271	(ii) a specialty hospital;
272	(iii) a home health agency;
273	(iv) a hospice;
274	(v) a nursing care facility;
275	(vi) a residential-assisted living facility;

276	(vii) a birthing center;
277	(viii) an ambulatory surgical facility;
278	(ix) a small health care facility;
279	(x) an abortion clinic;
280	[(xi) a clinic that meets the definition of hospital under Section 76-7-301 or Section
281	76-7a-101;]
282	[(xii)] (xi) a facility owned or operated by a health maintenance organization;
283	[(xiii)] (xii) an end stage renal disease facility;
284	[(xiv)] (xiii) a health care clinic; or
285	[(xv)] (xiv) any other health care facility that the committee designates by rule.
286	(2) (a) In order to discourage identity theft and health insurance fraud, and to reduce
287	the risk of medical errors caused by incorrect medical records, a medical facility or a health
288	professional office shall request identification from an individual prior to providing in-patient
289	or out-patient services to the individual.
290	(b) If the individual who will receive services from the medical facility or a health
291	professional office lacks the legal capacity to consent to treatment, the medical facility or a
292	health professional office shall request identification:
293	(i) for the individual who lacks the legal capacity to consent to treatment; and
294	(ii) from the individual who consents to treatment on behalf of the individual described
295	in Subsection (2)(b)(i).
296	(3) A medical facility or a health professional office:
297	(a) that is subject to EMTALA:
298	(i) may not refuse services to an individual on the basis that the individual did not
299	provide identification when requested; and
300	(ii) shall post notice in its emergency department that informs a patient of the patient's
301	right to treatment for an emergency medical condition under EMTALA;
302	(b) may not be penalized for failing to ask for identification;
303	(c) is not subject to a private right of action for failing to ask for identification; and
304	(d) may document or confirm patient identity by:
305	(i) photograph;
306	(ii) fingerprinting;

307	(iii) palm scan; or
308	(iv) other reasonable means.
309	(4) The identification described in this section:
310	(a) is intended to be used for medical records purposes only; and
311	(b) shall be kept in accordance with the requirements of the Health Insurance
312	Portability and Accountability Act of 1996.
313	Section 6. Section 26B-2-232 is amended to read:
314	26B-2-232. Treatment of aborted remains.
315	(1) As used in this section, "aborted fetus" means a product of human conception,
316	regardless of gestational age, that has died from an abortion as that term is defined in Section
317	76-7-301.
318	(2) (a) A health care facility having possession of an aborted fetus shall provide for the
319	final disposition of the aborted fetus through:
320	(i) cremation as that term is defined in Section 58-9-102; or
321	(ii) interment.
322	(b) A health care facility may not conduct the final disposition of an aborted fetus less
323	than 72 hours after an abortion is performed unless:
324	(i) the pregnant woman authorizes the health care facility, in writing, to conduct the
325	final disposition of the aborted fetus less than 72 hours after the abortion is performed; or
326	(ii) immediate disposition is required under state or federal law.
327	(c) A health care facility may serve as an authorizing agent as defined in Section
328	58-9-102 with respect to the final disposition of an aborted fetus if:
329	(i) the pregnant woman provides written authorization for the health care facility to act
330	as the authorizing agent; or
331	(ii) (A) more than 72 hours have passed since the abortion was performed; and
332	(B) the pregnant woman did not exercise her right to control the final disposition of the
333	aborted fetus under Subsection (4)(a).
334	(d) Within 120 business days after the day on which an abortion is performed, a health
335	care facility possessing an aborted fetus shall:
336	(i) conduct the final disposition of the aborted fetus in accordance with this section; or
337	(ii) ensure that the aborted fetus is preserved until final disposition.

338	(e) A health care facility shall conduct the final disposition under this section in
339	accordance with applicable state and federal law.
340	(3) Before performing an abortion, a health care facility shall[:],
341	[(a) provide the pregnant woman with the information described in Subsection
342	76-7-305.5(2)(w) through:]
343	[(i) a form approved by the department;]
344	[(ii) an in-person consultation with a physician; or]
345	[(iii) an in-person consultation with a mental health therapist as defined in Section
346	58-60-102; and]
347	[(b)] if the pregnant woman makes a decision under Subsection (4)(b), document the
348	pregnant woman's decision under Subsection (4)(b) in the pregnant woman's medical record.
349	(4) A pregnant woman who has an abortion:
350	(a) except as provided in Subsection $[(6)]$ (5) , has the right to control the final
351	disposition of the aborted fetus;
352	(b) if the pregnant woman has a preference for disposition of the aborted fetus, shall
353	inform the health care facility of the pregnant woman's decision for final disposition of the
354	aborted fetus;
355	(c) is responsible for the costs related to the final disposition of the aborted fetus at the
356	chosen location if the pregnant woman chooses a method or location for the final disposition of
357	the aborted fetus that is different from the method or location that is usual and customary for
358	the health care facility; and
359	(d) for a medication-induced abortion, shall be permitted to return the aborted fetus to
360	the health care facility in a sealed container for disposition by the health care facility in
361	accordance with this section.
362	[(5) The form described in Subsection (3)(a)(i) shall include the following
363	information:]
364	["You have the right to decide what you would like to do with the aborted fetus. You
365	may decide for the provider to be responsible for disposition of the fetus. If you are having a
366	medication-induced abortion, you also have the right to bring the aborted fetus back to this
367	provider for disposition after the fetus is expelled. The provider may dispose of the aborted
368	fetus by burial or cremation. You can ask the provider if you want to know the specific method

369	for disposition."
370	[(6)] (5) If the pregnant woman is a minor, the health care facility shall obtain parental
371	consent for the disposition of the aborted fetus unless the minor is granted a court order under
372	Subsection 76-7-304.5(1)(b).
373	[(7)] (6) (a) A health care facility may not include fetal remains with other biological,
374	infectious, or pathological waste.
375	(b) Fetal tissue that is sent for permanently fixed pathology or used for genetic study is
376	not subject to the requirements of this section.
377	(c) (i) A health care facility is responsible for maintaining a record to demonstrate to
378	the department that the health care facility has complied with the provisions of this section.
379	(ii) The records described in Subsection [(7)(c)(i)] <u>(6)(c)(i)</u> shall be:
380	(A) maintained for at least two years; and
381	(B) made available to the department for inspection upon request by the department.
382	Section 7. Section 76-7-301 is amended to read:
383	76-7-301. Definitions.
384	As used in this part:
385	(1) (a) "Abortion" means the act, by a physician, of using an instrument, or prescribing
386	a drug, with the intent to cause the death of an unborn child of a woman known to be pregnant
387	except as permitted under this part.
388	(b) "Abortion" does not include:
389	(i) removal of a dead unborn child;
390	(ii) removal of an ectopic pregnancy; or
391	(iii) the killing or attempted killing of an unborn child without the consent of the
392	pregnant woman, unless:
393	(A) the killing or attempted killing is done through a medical procedure carried out by
394	a physician or through a substance used under the direction of a physician; and
395	(B) the physician is unable to obtain the consent due to a medical emergency.
396	(2) "Abortion clinic" means the same as that term is defined in Section 26B-2-201.
397	(3) "Abuse" means the same as that term is defined in Section 80-1-102.
398	[(3)] (4) "Department" means the Department of Health and Human Services.

[(4)] (5) "Down syndrome" means a genetic condition associated with an extra

400	chromosome 21, in whole or in part, or an effective trisomy for chromosome 21.
401	[(5)] (6) "Gestational age" means the age of an unborn child as calculated from the first
402	day of the last menstrual period of the pregnant woman.
403	[(6)] <u>(7)</u> "Hospital" means:
404	(a) a general hospital licensed by the department according to Title 26B, Chapter 2,
405	Part 2, Health Care Facility Licensing and Inspection; and
406	(b) a clinic or other medical facility [that meets the following criteria:] to the extent
407	that such clinic or other medical facility is certified by the department as providing equipment
408	and personnel sufficient in quantity and quality to provide the same degree of safety to the
409	pregnant woman and the unborn child as would be provided for the particular medical
410	procedures undertaken by a general hospital licensed by the department.
411	[(i) a clinician who performs procedures at the clinic is required to be credentialed to
412	perform the same procedures at a general hospital licensed by the department; and]
413	[(ii) any procedures performed at the clinic are done with the same level of safety for
414	the pregnant woman and unborn child as would be available in a general hospital licensed by
415	the department.]
416	[(7)] (8) "Information module" means the pregnancy termination information module
417	prepared by the department.
418	[(8)] (9) "Medical emergency" means a life threatening physical condition aggravated
419	by, caused by, or arising from a pregnancy that places the pregnant woman at risk of death, or
420	poses a serious risk of substantial impairment of a major bodily function, unless the abortion is
421	performed or induced.
422	$\left[\frac{(9)}{(10)}\right]$ "Minor" means an individual who is:
423	(a) under 18 years old;
424	(b) unmarried; and
425	(c) not emancipated.
426	$\left[\frac{(10)}{(11)}\right]$ (a) "Partial birth abortion" means an abortion in which the person
427	performing the abortion:
428	(i) deliberately and intentionally vaginally delivers a living fetus until, in the case of a
429	head first presentation, the entire fetal head is outside the body of the mother, or, in the case of
430	breech presentation, any part of the fetal trunk past the navel is outside the body of the mother,

431	for the purpose of performing an overt act that the person knows will kill the partially delivered
432	living fetus; and
433	(ii) performs the overt act, other than completion of delivery, that kills the partially
434	living fetus.
435	(b) "Partial birth abortion" does not include the dilation and evacuation procedure
436	involving dismemberment prior to removal, the suction curettage procedure, or the suction
437	aspiration procedure for abortion.
438	[(11)] (12) "Perinatal hospice" means comprehensive support to the mother and her
439	family from the time of the diagnosis of a lethal fetal anomaly, through the time of the child's
440	birth, and through the postpartum period, that:
441	(a) focuses on alleviating fear and ensuring that the woman and her family experience
442	the life and death of a child in a comfortable and supportive environment; and
443	(b) may include counseling or medical care by:
444	(i) maternal-fetal medical specialists;
445	(ii) obstetricians;
446	(iii) neonatologists;
447	(iv) anesthesia specialists;
448	(v) psychiatrists, psychologists, or other mental health providers;
449	(vi) clergy;
450	(vii) social workers; or
451	(viii) specialty nurses.
452	[(12)] <u>(13)</u> "Physician" means:
453	(a) a medical doctor licensed to practice medicine and surgery under Title 58, Chapter
454	67, Utah Medical Practice Act;
455	(b) an osteopathic physician licensed to practice osteopathic medicine under Title 58,
456	Chapter 68, Utah Osteopathic Medical Practice Act; or
457	(c) a physician employed by the federal government who has qualifications similar to
458	an individual described in Subsection $[\frac{(12)(a)}{a}]$ $\underline{(13)(a)}$ or (b).
459	[(13)] (14) (a) "Severe brain abnormality" means a malformation or defect that causes
460	an individual to live in a mentally vegetative state.

(b) "Severe brain abnormality" does not include:

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462	(i) Down syndrome;
463	(ii) spina bifida;
464	(iii) cerebral palsy; or
465	(iv) any other malformation, defect, or condition that does not cause an individual to
466	live in a mentally vegetative state.
467	Section 8. Section 76-7-302 is amended to read:
468	76-7-302. Circumstances under which abortion authorized.
469	(1) An abortion may be performed in this state only by a physician.
470	(2) An abortion may be performed in this state only under the following circumstances:
471	(a) the unborn child has not reached 18 weeks gestational age;
472	(b) the unborn child has reached 18 weeks gestational age, and:
473	(i) the abortion is necessary to avert:
474	(A) the death of the woman on whom the abortion is performed; or
475	(B) a serious physical risk of substantial impairment of a major bodily function of the
476	woman on whom the abortion is performed; or
477	(ii) subject to Subsection (4), two physicians who practice maternal fetal medicine
478	concur, in writing, in the patient's medical record that the fetus has a fetal abnormality that in
479	the physicians' reasonable medical judgment is incompatible with life; or
480	(c) the unborn child has not reached 18 weeks gestational age and:
481	(i) (A) the woman is pregnant as a result of:
482	(I) rape, as described in Section 76-5-402;
483	(II) rape of a child, as described in Section 76-5-402.1; or
484	(III) incest, as described in Subsection 76-5-406(2)(j) or Section 76-7-102; or
485	(B) the pregnant child is under the age of 14; and
486	(ii) before the abortion is performed, the physician who performs the abortion:
487	(A) for an abortion authorized under Subsection (2)(c)(i)(A), verifies that the incident
488	described in Subsection (2)(c)(i)(A) has been reported to law enforcement; and
489	(B) if applicable, complies with the requirements of Section 80-2-602.
490	(3) An abortion may be performed only in an abortion clinic or a hospital, unless it is
491	necessary to perform the abortion in another location due to a medical emergency.
492	(4) If the unborn child has been diagnosed with a fetal abnormality that is incompatible

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described in Subsection (2)(c)(i); and

493	with life, at the time of the diagnosis, the physician shall inform the woman, both verbally and
494	in writing, that perinatal hospice and perinatal palliative care services are available and are an
495	alternative to abortion.
496	(5) A physician who performs an abortion under Subsection (2)(c) shall:
497	(a) maintain an accurate record as to the manner in which the physician conducted the
498	verification under Subsection (2)(c)(ii)(A); and
499	(b) report the information described in Subsection (5)(a) to the department in
500	accordance with Section 76-7-313.
501	Section 9. Section 76-7-305 is amended to read:
502	76-7-305. Informed consent requirements for abortion Exceptions.
503	(1) A person may not perform an abortion, unless, before performing the abortion, the
504	physician who will perform the abortion obtains from the woman on whom the abortion is to
505	be performed a voluntary and informed written consent that is consistent with:
506	(a) Section 8.08 of the American Medical Association's Code of Medical Ethics,
507	Current Opinions; and
508	(b) the provisions of this section.
509	(2) Except as provided in Subsection (8), consent to an abortion is voluntary and
510	informed only if[, at least 72 hours before the abortion]:
511	(a) a staff member of [a] an abortion clinic or hospital, physician, registered nurse,
512	nurse practitioner, advanced practice registered nurse, certified nurse midwife, genetic
513	counselor, or physician's assistant presents the information module to the pregnant woman;
514	(b) the pregnant woman views the entire information module and presents evidence to
515	the individual described in Subsection (2)(a) that the pregnant woman viewed the entire
516	information module;
517	(c) after receiving the evidence described in Subsection (2)(b), the individual described
518	in Subsection (2)(a):
519	(i) documents that the pregnant woman viewed the entire information module;
520	(ii) gives the pregnant woman, upon her request, a copy of the documentation

(iii) provides a copy of the statement described in Subsection (2)(c)(i) to the physician

who is to perform the abortion, upon request of that physician or the pregnant woman;

disposition of the aborted fetus.]

524	(d) after the pregnant woman views the entire information module, the physician who
525	is to perform the abortion, the referring physician, a physician, a registered nurse, nurse
526	practitioner, advanced practice registered nurse, certified nurse midwife, genetic counselor, or
527	physician's assistant, in a face-to-face consultation in any location in the state, orally informs
528	the woman of:
529	(i) the nature of the proposed abortion procedure;
530	(ii) specifically how the procedure described in Subsection (2)(d)(i) will affect the
531	fetus;
532	(iii) the risks and alternatives to the abortion procedure or treatment;
533	(iv) the options and consequences of aborting a medication-induced abortion, if the
534	proposed abortion procedure is a medication-induced abortion;
535	(v) the probable gestational age and a description of the development of the unborn
536	child at the time the abortion would be performed;
537	(vi) the medical risks associated with carrying her child to term;
538	(vii) the right to view an ultrasound of the unborn child, at no expense to the pregnant
539	woman, upon her request; and
540	(viii) when the result of a prenatal screening or diagnostic test indicates that the unborn
541	child has or may have Down syndrome, the department's website, which contains the
542	information described in Section 26B-7-106, including the information on the informational
543	support sheet; and
544	(e) after the pregnant woman views the entire information module, a staff member of
545	the <u>abortion clinic or</u> hospital provides to the pregnant woman:
546	(i) on a document that the pregnant woman may take home:
547	(A) the address for the department's website described in Section 76-7-305.5; and
548	(B) a statement that the woman may request, from a staff member of the <u>abortion clinic</u>
549	$\underline{\text{or}}$ hospital where the woman viewed the information module, a printed copy of the material on
550	the department's website; and
551	(ii) a printed copy of the material on the department's website described in Section
552	76-7-305.5, if requested by the pregnant woman[; and].
553	[(iii) a copy of the form described in Subsection 26B-2-232(3)(a)(i) regarding the

555	(3) Before performing an abortion, the physician who is to perform the abortion shall:
556	(a) in a face-to-face consultation, provide the information described in Subsection
557	(2)(d), unless the attending physician or referring physician is the individual who provided the
558	information required under Subsection (2)(d); and
559	(b) (i) obtain from the pregnant woman a written certification that the information
560	required to be provided under Subsection (2) and this Subsection (3) was provided in
561	accordance with the requirements of Subsection (2) and this Subsection (3);
562	(ii) obtain a copy of the statement described in Subsection (2)(c)(i); and
563	(iii) ensure that[:]
564	[(A) the woman has received the information described in Subsections 26B-2-232(3)
565	and (4); and]
566	[(B)] if the woman has a preference for the disposition of the aborted fetus, the woman
567	has informed the health care facility of the woman's decision regarding the disposition of the
568	aborted fetus.
569	(4) When a medical emergency compels the performance of an abortion, the physician
570	shall inform the woman prior to the abortion, if possible, of the medical indications supporting
571	the physician's judgment that an abortion is necessary.
572	(5) If an ultrasound is performed on a woman before an abortion is performed, the
573	individual who performs the ultrasound, or another qualified individual, shall:
574	(a) inform the woman that the ultrasound images will be simultaneously displayed in a
575	manner to permit her to:
576	(i) view the images, if she chooses to view the images; or
577	(ii) not view the images, if she chooses not to view the images;
578	(b) simultaneously display the ultrasound images in order to permit the woman to:
579	(i) view the images, if she chooses to view the images; or
580	(ii) not view the images, if she chooses not to view the images;
581	(c) inform the woman that, if she desires, the person performing the ultrasound, or
582	another qualified person shall provide a detailed description of the ultrasound images,
583	including:
584	(i) the dimensions of the unborn child;
585	(ii) the presence of cardiac activity in the unborn child, if present and viewable; and

586	(iii) the presence of external body parts or internal organs, if present and viewable; and
587	(d) provide the detailed description described in Subsection (5)(c), if the woman
588	requests it.
589	(6) The information described in Subsections (2), (3), and (5) is not required to be
590	provided to a pregnant woman under this section if the abortion is performed for a reason
591	described in:
592	(a) Subsection 76-7-302(2)(b)(i), if the treating physician and one other physician
593	concur, in writing, that the abortion is necessary to avert:
594	(i) the death of the woman on whom the abortion is performed; or
595	(ii) a risk described in Subsection 76-7-302(2)(b)(i)(B); or
596	(b) Subsection 76-7-302(2)(b)(ii).
597	(7) In addition to the criminal penalties described in this part, a physician who violates
598	the provisions of this section:
599	(a) is guilty of unprofessional conduct as defined in Section 58-67-102 or 58-68-102;
600	and
601	(b) shall be subject to:
602	(i) suspension or revocation of the physician's license for the practice of medicine and
603	surgery in accordance with Section 58-67-401 or 58-68-401; and
604	(ii) administrative penalties in accordance with Section 58-67-402 or 58-68-402.
605	(8) A physician is not guilty of violating this section for failure to furnish any of the
606	information described in Subsection (2) or (3), or for failing to comply with Subsection (5), if:
607	(a) the physician can demonstrate by a preponderance of the evidence that the
608	physician reasonably believed that furnishing the information would have resulted in a severely
609	adverse effect on the physical or mental health of the pregnant woman;
610	(b) in the physician's professional judgment, the abortion was necessary to avert:
611	(i) the death of the woman on whom the abortion is performed; or
612	(ii) a risk described in Subsection 76-7-302(2)(b)(i)(B);
613	(c) the pregnancy was the result of rape or rape of a child, as described in Sections
614	76-5-402 and 76-5-402.1;
615	(d) the pregnancy was the result of incest, as defined in Subsection 76-5-406(2)(j) and
616	Section 76-7-102; or

617	(e) at the time of the abortion, the pregnant child was 14 years old or younger.
618	(9) A physician who complies with the provisions of this section and Section
619	76-7-304.5 may not be held civilly liable to the physician's patient for failure to obtain
620	informed consent under Section 78B-3-406.
621	(10) (a) The department shall provide an ultrasound, in accordance with the provisions
622	of Subsection (5)(b), at no expense to the pregnant woman.
623	(b) A local health department shall refer a pregnant woman who requests an ultrasound
624	described in Subsection (10)(a) to the department.
625	[(11) A physician is not guilty of violating this section if:]
626	[(a) the information described in Subsection (2) is provided less than 72 hours before
627	the physician performs the abortion; and]
628	[(b) in the physician's professional judgment, the abortion was necessary in a case
629	where:]
630	[(i) a ruptured membrane, documented by the attending or referring physician, will
631	cause a serious infection; or]
632	[(ii) a serious infection, documented by the attending or referring physician, will cause
633	a ruptured membrane.]
634	Section 10. Section 76-7-305.5 is amended to read:
635	76-7-305.5. Requirements for information module and website.
636	[(1)] In order to ensure that a woman's consent to an abortion is truly an informed
637	consent, the department shall, in accordance with the requirements of this section, develop an
638	information module and maintain a public website that is scientifically accurate,
639	comprehensible, and presented in a truthful, nonmisleading manner.
640	[(2) The information module and public website described in Subsection (1) shall:]
641	[(a) be scientifically accurate, comprehensible, and presented in a truthful,
642	nonmisleading manner;]
643	[(b) present adoption as a preferred and positive choice and alternative to abortion;]
644	[(c) be produced in a manner that conveys the state's preference for childbirth over
645	abortion;]
646	[(d) state that the state prefers childbirth over abortion;]
647	[(e) state that it is unlawful for any person to coerce a woman to undergo an abortion;]

648	[(f) state that any physician who performs an abortion without obtaining the woman's
649	informed consent or without providing her a private medical consultation in accordance with
650	the requirements of this section, may be liable to her for damages in a civil action at law;]
651	[(g) provide a geographically indexed list of resources and public and private services
652	available to assist, financially or otherwise, a pregnant woman during pregnancy, at childbirth,
653	and while the child is dependent, including:
654	[(i) medical assistance benefits for prenatal care, childbirth, and neonatal care;]
655	[(ii) services and supports available under Section 35A-3-308;]
656	[(iii) other financial aid that may be available during an adoption;]
657	[(iv) services available from public adoption agencies, private adoption agencies, and
658	private attorneys whose practice includes adoption; and]
659	[(v) the names, addresses, and telephone numbers of each person listed under this
660	Subsection (2)(g);]
661	[(h) describe the adoption-related expenses that may be paid under Section 76-7-203;]
662	[(i) describe the persons who may pay the adoption related expenses described in
663	Subsection (2)(h);]
664	[(j) except as provided in Subsection (4), describe the legal responsibility of the father
665	of a child to assist in child support, even if the father has agreed to pay for an abortion;]
666	[(k) except as provided in Subsection (4), describe the services available through the
667	Office of Recovery Services, within the Department of Health and Human Services, to
668	establish and collect the support described in Subsection (2)(j);]
669	[(l) state that private adoption is legal;]
670	[(m) describe and depict, with pictures or video segments, the probable anatomical and
671	physiological characteristics of an unborn child at two-week gestational increments from
672	fertilization to full term, including:
673	[(i) brain and heart function;]
674	[(ii) the presence and development of external members and internal organs; and]
675	[(iii) the dimensions of the fetus;]
676	[(n) show an ultrasound of the heartbeat of an unborn child at:]
677	[(i) four weeks from conception;]
678	[(ii) six to eight weeks from conception; and]

679	(iii) each month after 10 weeks gestational age, up to 14 weeks gestational age;
680	[(o) describe abortion procedures used in current medical practice at the various stages
681	of growth of the unborn child, including:]
682	[(i) the medical risks associated with each procedure;]
683	[(ii) the risk related to subsequent childbearing that are associated with each procedure
684	and]
685	[(iii) the consequences of each procedure to the unborn child at various stages of fetal
686	development;]
687	[(p) describe the possible detrimental psychological effects of abortion;]
688	[(q) describe the medical risks associated with carrying a child to term;]
689	[(r) include relevant information on the possibility of an unborn child's survival at the
690	two-week gestational increments described in Subsection (2)(m);]
691	[(s) except as provided in Subsection (5), include:]
692	[(i) information regarding substantial medical evidence from studies concluding that an
693	unborn child who is at least 20 weeks gestational age may be capable of experiencing pain
694	during an abortion procedure; and]
695	[(ii) the measures that will be taken in accordance with Section 76-7-308.5;]
696	[(t) explain the options and consequences of aborting a medication-induced abortion;]
697	[(u) include the following statement regarding a medication-induced abortion,
698	"Research indicates that mifepristone alone is not always effective in ending a pregnancy. You
699	may still have a viable pregnancy after taking mifepristone. If you have taken mifepristone but
700	have not yet taken the second drug and have questions regarding the health of your fetus or are
701	questioning your decision to terminate your pregnancy, you should consult a physician
702	immediately.";]
703	[(v) inform a pregnant woman that she has the right to view an ultrasound of the
704	unborn child, at no expense to her, upon her request;]
705	[(w) inform a pregnant woman that she has the right to:]
706	[(i) determine the final disposition of the remains of the aborted fetus;]
707	[(ii) unless the woman waives this right in writing, wait up to 72 hours after the
708	abortion procedure is performed to make a determination regarding the disposition of the
709	aborted fetus before the health care facility may dispose of the fetal remains;

710	[(iii) receive information about options for disposition of the aborted fetus, including
711	the method of disposition that is usual and customary for a health care facility; and]
712	[(iv) for a medication-induced abortion, return the aborted fetus to the health care
713	facility for disposition; and]
714	[(x) provide a digital copy of the form described in Subsection 26B-2-232(3)(a)(i);
715	and]
716	[(y) be in a typeface large enough to be clearly legible.]
717	[(3) The information module and website described in Subsection (1) may include a
718	toll-free 24-hour telephone number that may be called in order to obtain, orally, a list and
719	description of services, agencies, and adoption attorneys in the locality of the caller.]
720	[(4) The department may develop a version of the information module and website that
721	omits the information in Subsections (2)(j) and (k) for a viewer who is pregnant as the result of
722	rape.]
723	[(5) The department may develop a version of the information module and website that
724	omits the information described in Subsection (2)(s) for a viewer who will have an abortion
725	performed:]
726	[(a) on an unborn child who is less than 20 weeks gestational age at the time of the
727	abortion; or]
728	[(b) on an unborn child who is at least 20 weeks gestational age at the time of the
729	abortion, if:]
730	[(i) the abortion is being performed for a reason described in Subsection
731	76-7-302(2)(b)(i) or (ii); and]
732	[(ii) due to a serious medical emergency, time does not permit compliance with the
733	requirement to provide the information described in Subsection (2)(s).]
734	[(6) The department and each local health department shall make the information
735	module and the website described in Subsection (1) available at no cost to any person.]
736	[(7) The department shall make the website described in Subsection (1) available for
737	viewing on the department's website by clicking on a conspicuous link on the home page of the
738	website.]
739	[(8) The department shall ensure that the information module is:]
740	[(a) available to be viewed at all facilities where an abortion may be performed;]

/41	(b) interactive for the individual viewing the module, including the provision of
742	opportunities to answer questions and manually engage with the module before the module
743	transitions from one substantive section to the next;]
744	[(c) produced in English and may include subtitles in Spanish or another language;
745	and]
746	[(d) capable of being viewed on a tablet or other portable device.]
747	[(9) After the department releases the initial version of the information module, for the
748	use described in Section 76-7-305, the department shall:
749	[(a) update the information module, as required by law; and]
750	[(b) present an updated version of the information module to the Health and Human
751	Services Interim Committee for the committee's review and recommendation before releasing
752	the updated version for the use described in Section 76-7-305.]
753	Section 11. Section 76-7a-101 is amended to read:
754	76-7a-101. Definitions.
755	As used in this chapter:
756	(1) (a) "Abortion" means the act, by a physician, of using an instrument, or prescribing
757	a drug, with the intent to cause the death of an unborn child of a woman known to be pregnant
758	except as permitted under this chapter.
759	(b) "Abortion" does not include:
760	(i) removal of a dead unborn child;
761	(ii) removal of an ectopic pregnancy; or
762	(iii) the killing or attempted killing of an unborn child without the consent of the
763	pregnant woman, unless:
764	(A) the killing or attempted killing is done through a medical procedure carried out by
765	a physician or through a substance used under the direction of a physician; and
766	(B) the physician is unable to obtain the consent due to a medical emergency.
767	(2) "Abortion clinic" means a type I abortion clinic licensed by the state or a type II
768	abortion clinic licensed by the state.
769	(3) "Department" means the Department of Health and Human Services.
770	[(3)] (4) "Down syndrome" means a genetic condition associated with an extra
771	chromosome 21, in whole or in part, or an effective trisomy for chromosome 21.

772	[(4)] <u>(5)</u> "Hospital" means:
773	(a) a general hospital licensed by the department; [and] or
774	(b) a clinic or other medical facility [that meets the following criteria:] to the extent the
775	clinic or other medical facility is certified by the department as providing equipment and
776	personnel sufficient in quantity and quality to provide the same degree of safety to a pregnant
777	woman and an unborn child as would be provided for the particular medical procedure
778	undertaken by a general hospital licensed by the department.
779	[(i) a clinician who performs procedures at the clinic is required to be credentialed to
780	perform the same procedures at a general hospital licensed by the department; and]
781	[(ii) any procedures performed at the clinic are done with the same level of safety for
782	the pregnant woman and unborn child as would be available in a general hospital licensed by
783	the department.]
784	[(5)] (6) "Medical emergency" means a life threatening physical condition aggravated
785	by, caused by, or arising from a pregnancy that places the pregnant woman at risk of death, or
786	poses a serious risk of substantial impairment of a major bodily function, unless the abortion is
787	performed or induced.
788	[(6)] (7) "Perinatal hospice" means comprehensive support to the mother and her
789	family from the time of the diagnosis of a lethal fetal anomaly, through the time of the child's
790	birth, and through the postpartum period, that:
791	(a) focuses on alleviating fear and ensuring that the woman and her family experience
792	the life and death of a child in a comfortable and supportive environment; and
793	(b) may include counseling or medical care by:
794	(i) maternal-fetal medical specialists;
795	(ii) obstetricians;
796	(iii) neonatologists;
797	(iv) anesthesia specialists;
798	(v) psychiatrists, psychologists, or other mental health providers;
799	(vi) clergy;
800	(vii) social workers; or
801	(viii) specialty nurses.
802	[(7)] (8) "Physician" means:

803	(a) a medical doctor licensed to practice medicine and surgery in the state;
804	(b) an osteopathic physician licensed to practice osteopathic medicine in the state; or
805	(c) a physician employed by the federal government who has qualifications similar to
806	an individual described in Subsection $[\frac{(7)(a)}{(8)(a)}]$ or (b).
807	[(8)] (9) (a) "Severe brain abnormality" means a malformation or defect that causes an
808	individual to live in a mentally vegetative state.
809	(b) "Severe brain abnormality" does not include:
810	(i) Down syndrome;
811	(ii) spina bifida;
812	(iii) cerebral palsy; or
813	(iv) any other malformation, defect, or condition that does not cause an individual to
814	live in a mentally vegetative state.
815	Section 12. Section 76-7a-201 is amended to read:
816	76-7a-201. Abortion prohibition Exceptions Penalties.
817	(1) An abortion may be performed in this state only under the following circumstances:
818	(a) the abortion is necessary to avert:
819	(i) the death of the woman on whom the abortion is performed; or
820	(ii) a serious physical risk of substantial impairment of a major bodily function of the
821	woman on whom the abortion is performed;
822	(b) subject to Subsection (3), two physicians who practice maternal fetal medicine
823	concur, in writing, in the patient's medical record that the fetus has a fetal abnormality that in
824	the physicians' reasonable medical judgment is incompatible with life; or
825	(c) the unborn child has not reached 18 weeks gestational age and:
826	(i) (A) the woman is pregnant as a result of:
827	(I) rape, as described in Section 76-5-402;
828	(II) rape of a child, as described in Section 76-5-402.1; or
829	(III) incest, as described in Subsection 76-5-406(2)(j) or Section 76-7-102; or
830	(B) the pregnant child is under the age of 14; and
831	(ii) before the abortion is performed, the physician who performs the abortion:
832	(A) for an abortion authorized under Subsection (1)(c)(i)(A), verifies that the incident
833	described in Subsection (1)(c)(i)(A) has been reported to law enforcement; and

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834	(B) if applicable, complies with requirements related to reporting suspicions of or
835	known child abuse.
836	(2) An abortion may be performed only:
837	(a) by a physician; and
838	(b) in an abortion clinic or a hospital, unless it is necessary to perform the abortion in
839	another location due to a medical emergency.
840	(3) If the unborn child has been diagnosed with a fetal abnormality that is incompatible
841	with life, at the time of the diagnosis, the physician shall inform the woman, both verbally and
842	in writing, that perinatal hospice services and perinatal palliative care are available and are an
843	alternative to abortion.
844	(4) A person who performs an abortion in violation of this section is guilty of a second
845	degree felony.
846	(5) In addition to the penalty described in Subsection (4), the department may take
847	appropriate corrective action against a health care facility, including revoking the health care
848	facility's license, if a violation of this chapter occurs at the health care facility.
849	(6) The department shall report a physician's violation of any provision of this section
850	to the state entity that regulates the licensing of a physician.
851	(7) A physician who performs an abortion under Subsection (1)(c) shall:
852	(a) maintain an accurate record as to the manner in which the physician conducted the
853	verification under Subsection (1)(c)(ii)(A); and
854	(b) report the information described in Subsection (7)(a) to the department in
855	accordance with Section 76-7-313.
856	Section 13. Effective date.

This bill takes effect on May 1, 2024.