

Existing law provides requirements of physicians who perform abortions. New law adds a requirement that on the date an abortion is performed or induced, the physician performing or inducing the abortion shall:

- (1) Have active admitting privileges at a hospital that is located not further than 30 miles from the location at which the abortion is performed or induced and that provides obstetrical or gynecological health care services.
- (2) Provide the pregnant woman with all of the following before the abortion is performed or induced:
 - (a) A telephone number by which the pregnant woman may reach the physician, or other health care personnel employed by the physician or facility at which the abortion was performed or induced, who has 24 hours per day access to the woman's relevant medical records so that the woman may request assistance related to any complication that arises from the performance or induction of the abortion, or to ask health-related questions regarding the abortion.
 - (b) The name and telephone number of the hospital nearest to the home of the pregnant woman at which an emergency arising from the abortion would be treated.

New law provides that for purposes of new law, "active admitting privileges" refers to a circumstance in which physician is a member in good standing of the medical staff of a licensed hospital and has the ability to admit a patient and provide diagnostic and surgical services to that patient consistent with the requirements of existing law.

New law provides that whoever violates the requirement for admitting privileges established in new law shall be fined not more than \$4,000 per violation.

Existing law provides regulations for the practice of inducing an abortion through use of drugs or chemicals. New law adds the following requirements:

- (1) No drug or chemical shall be administered, dispensed, or otherwise provided to the pregnant woman by a physician or any person acting under the physician's direction, whether in a licensed outpatient abortion facility, private medical office or any other facility, unless the physician has obtained the voluntary and informed consent of the pregnant woman pursuant to the requirements of existing law.
- (2) If a physician prescribes, dispenses, administers, or provides any drug or chemical to a pregnant woman for the purpose of inducing an abortion, the physician shall report the abortion to DHH in accordance with provisions of existing law.
- (3) If the physician knows that the woman experienced a serious adverse event, as defined by the MedWatch Reporting System, during or after the administration or use of a drug to induce an abortion, the physician shall report the event to the U.S. Food and Drug Administration through the MedWatch Reporting System not later than the third day after the date he learns that the event occurred.

New law authorizes the Louisiana State Board of Medical Examiners to take disciplinary action as authorized in existing law against a physician who violates any provision of new law.

Prior law provided that persons who knowingly perform or attempt to perform an abortion using drugs or chemicals without complying with the requirements of prior law shall be subject to penalties provided in existing law. New law amends prior law to provide that persons subject to such penalties are persons not under the direct and immediate supervision of a physician who knowingly perform or attempt to perform an abortion using drugs or chemicals without complying with the requirements of existing law.

For purposes of the Outpatient Abortion Facility Licensing Law (R.S. 40:2175.1 et seq.), prior law defined "first trimester" as the time period from six to 14 weeks after the first day

of the last menstrual period. New law revises definition to provide that "first trimester" means the time period up to 14 weeks after the first day of the last menstrual period.

For purposes of the Outpatient Abortion Facility Licensing Law, prior law defined "outpatient abortion facility" as any outpatient facility, other than a hospital or an ambulatory surgical center, in which any second trimester or five or more first trimester abortions per month are performed. New law changes the abortions per unit of time metric provided in the definition from five or more first trimester abortions per month to five or more first trimester abortions per calendar year.

New law provides the following expressions of legislative intent:

- (1) It is the intent of the legislature that each physician who performs an abortion as defined in existing law shall follow the long-established procedure of reporting anonymous, aggregate abortion statistics and health complications to DHH, subject to all state and federal privacy protections, for the purpose of providing anonymous and accurate public health and safety data regarding abortion and its impact on women's health.
- (2) It is the intent of the legislature that every application of new law to every individual woman shall be severable from each other. In the event the application of new law is found to impose an impermissible undue burden on any pregnant woman or group of pregnant women, the application of new law to those women shall be severed from the remaining applications of new law that do not impose an undue burden, and those remaining applications shall remain in force and unaffected.

New law provides that new law shall be known as the "Unsafe Abortion Protection Act".

Effective Sept. 1, 2014.

(Amends R.S. 40:1299.35.2(A), 1299.35.2.1, and 2175.3(2) and (5))