



2016 State Legislative Session Report

Executive Summary

In 2016, state legislatures across the country remained a key battleground for the legal protection of mothers and their unborn children. The continued strong interest in abortion-related measures is of particular interest given that it is an election year and some states (including Texas) were not in regular session.

Notably, a majority of states considered measures related to federal and state funding of abortion and/or abortion providers. Efforts to ensure tax dollars do not pay for abortion and are not given to abortion providers increased after yet another scandal was uncovered at Planned Parenthood, the nation's largest abortion chain, which receives a half billion taxpayer dollars each year.

Other significant abortion-related measures in 2016 included 20 week (five month) abortion limitations, prohibitions on abortions based on sex, race or genetic abnormality, prohibitions on dismemberment abortions, ultrasound requirements, and support for abortion alternatives.

Undoubtedly sparked by the attention drawn last summer to the abortion industry's harvesting of the body parts of aborted children, states also considered measures providing for the dignified treatment of the bodies of deceased infants, including prohibiting the sale, transfer, use and/or donation of fetal remains and regulating experimentation on deceased unborn infants. Alabama and Idaho each enacted an *Unborn Infants Dignity Act* based on new AUL model legislation.

While 2016 abortion-related measures were overwhelmingly life-affirming, there was a noticeable and continuing increase in measures seeking to undermine existing state law and policies regulating or limiting abortion. States considered at least 40 measures undermining life-affirming laws or supporting the so-called "right" to abortion.

AUL/AUL Action: Legislative Victories in 2016

In 2016, three measures based on AUL model legislation were enacted and one AUL model was adopted.

Enacted Measures:

- **Alabama** enacted H 45 the *Unborn Infants Dignity Act* which includes AUL model language.
- **Idaho** enacted S 1404 the *Unborn Infants Dignity Act* which includes AUL model language.
- **Indiana** enacted H 1337 to prohibit prenatal discrimination regarding race, sex or diagnosis of disability and to require perinatal hospice information. The bill includes AUL model language and AUL provided a letter of support during the legislative process.

Resolutions Adopted:

- The **Georgia** House adopted a resolution based on AUL model language to recognize the contributions of pregnancy resource centers.

Other Significant AUL Measures in 2016:

Abortion-Related Measures:

- **Colorado** considered the *Women's Health Protection Act* (H 1203), based on AUL model language.
- The **Georgia** Senate considered a resolution (SR 1306) based on AUL model language to recognize the contributions of pregnancy resource centers.
- **Illinois** considered a measure (H 4421) including AUL model language to prohibit abortion after 20 weeks (five months) gestation.
- **Illinois** considered an ultrasound requirement (H 5022) including AUL model language.
- **Illinois** considered a measure (H 6566) to prohibit prenatal discrimination on the basis of race, sex, or diagnosis and requiring perinatal hospice information that includes AUL model language.
- **Indiana** considered enhancements to its parental involvement law partially-based on AUL model language (S 392).

- **Missouri** considered a measure (H 1815) to prohibit sex-selection abortions and abortions based on genetic abnormalities based on AUL model language.
- **Missouri** considered parental involvement enhancements (H1968) based on AUL model language.
- **Mississippi** considered a measure (S 2326) based on AUL model language to defund the abortion industry and advance women's health.
- **New Hampshire** considered a ban on abortions based on genetic abnormalities (H 1623) including AUL model language.
- **New Hampshire** considered a 20 week (five month) abortion limit (H 1636) based on AUL's *Women's Health Defense Act* model.
- **New Hampshire** considered a measure (H 1662) based on AUL's *Abortion Inducing Drugs Safety Act* model.
- **New Hampshire** considered a resolution (HJR 3) calling for an investigation and defunding of abortion providers including AUL model language.
- Both chambers of the **Oklahoma** Legislature passed a measure (H 3128) to prohibition prenatal discrimination that includes AUL model language.
- **Rhode Island** considered a measure (H 7611) to amend its partial-birth abortion ban and provide penalties based on AUL model language.
- **South Carolina** considered a measure (H 4538) to defund the abortion industry and advance women's health including on AUL model language.
- **South Carolina** considered ultrasound requirements (H 4629) based on AUL model legislation.
- **Tennessee** considered ultrasound requirements (H 1459 and S 1769) including AUL model language.
- **Washington** considered a prohibition on sex-selection abortion (S 6612) including AUL model language.

Legal Recognition and Protection of the Unborn:

- **Hawaii** considered a measure (H 2763) based on AUL model language mandating medically appropriate life-saving and life-sustaining medical care and treatment to all born alive infants.

- **Mississippi** considered measures (H 531, S 2546 and S 2115) based on AUL's *Unborn Infants Dignity Act* model language.
- **New Hampshire** considered a measure to provide protection for infants born alive (H 1627) based on AUL model language.
- **New Mexico** considered a measure (H 275) requiring medical care for infants born alive including AUL model language.
- **South Carolina** considered a measure (H 4759) based on AUL's *Unborn Infants Dignity Act*.

Notable Trends in 2016:

Abortion:

- In 2016, **43 states considered over 360 measures related to abortion**. The continued strong interest in abortion-related measures is of particular interest given that it is an election year and some states (including Texas) were not in regular session.
- While 2016 abortion-related measures were overwhelmingly life-affirming **there was a noticeable continued increase in measures seeking to undermine existing state law and policies regulating or limiting abortion**. States considered at least 40 measures undermining existing life-affirming laws or supporting the so-called "right" to abortion.
- Significant abortion-related measures in 2016 included **efforts to ensure tax dollars do not pay for abortion or abortion providers, 20 week (five month) abortion limitations, prohibitions on abortions based on sex, race or genetic abnormality, prohibitions on dismemberment abortions, ultrasound requirements, and support for abortion alternatives**.

Legal Recognition and Protection of the Unborn:

- At least 34 states considered over 90 measures providing legal recognition of and protection for unborn and newly born children and deceased unborn infants in contexts other than abortion.
- Undoubtedly sparked by the attention drawn last summer to the industry that harvests the body parts of aborted children, states considered measures to provide for the dignified treatment of the bodies of deceased infants, including to prohibit the sale, transfer, use and/or donation of fetal remains, and regulations regarding experimentation on deceased unborn infants.

Healthcare Freedom of Conscience:

- More states (five) considered measures to coerce healthcare professionals into providing care that may violate their consciences than considered measures protecting conscience (two).

Other Life-Related Measures Enacted in 2016:

- **Alaska** enacted appropriations measures that provide no funds may be expended for an abortion that is not a “mandatory service” required under Alaska law.
- **Alabama** enacted a measure providing that the Department of health may not issue or renew a health center license to an abortion clinic within 2,000 feet of a K-8 public school.
- Alabama enacted a prohibition on dismemberment abortions.
- **Arkansas** enacted appropriations measures including language that no funds appropriated to any public school may be used for abortions or abortion referrals.
- **Arizona** enacted a measure to allow the Health Care Cost Containment System to exclude any individual or entity that has (among other things) failed to segregate taxpayer dollars from abortion.
- Arizona enacted a measure regarding chemical abortion that would require compliance with the final printed label as of December 31, 2015. The measure was subsequently repealed in light of the changed Food and Drug Administration (FDA) protocol.
- Arizona enacted a measure to prohibit: the use of a human fetus or embryo resulting from abortion in animal or human research, experimentation on a fetus or embryo intended to be aborted, offering or performing an abortion solely for the purpose of research, and selling baby body parts.
- Arizona enacted a measure to prohibit payroll deductions from the compensation of State officers or employees made to abortion providers.
- **California** adopted a measure mandating “comprehensive sex education” including that “instruction on pregnancy shall include an objective discussion on all legally available pregnancy outcomes including...abortion.”
- The California House and Senate adopted pro-abortion resolutions.
- **Florida** enacted a measure to provide for annual inspections of abortion facilities, to require that abortionists have admitting privileges, to require abortion clinics to have written patient transfer agreements with a local hospital, to prohibit the

- sale, donation or transfer of fetal remains obtained from an abortion, and elevating the violation of fetal remains laws to a first degree misdemeanor.
- **Georgia** enacted a measure requiring the juvenile court clerk report on judicial bypass statistics.
 - Georgia established the Positive Alternatives for Pregnancy and Parenting Grant Program to promote healthy pregnancies and childbirth by awarding grants to nonprofit organizations that provide pregnancy support services.
 - The **Hawaii** Senate adopted a pro-abortion resolution.
 - **Iowa** enacted an appropriations measure including language that “Iowans support reducing the number of abortions performed in our state” and that the appropriated funds “shall not be used for abortions.”
 - **Idaho** enacted a measure requiring informed consent on the right to view ultrasound images as well as the online publication of locations that provide ultrasounds free of charge.
 - **Illinois** enacted a measure that amends the *Wrongful Death Act* to provide that an action may be brought within 5 years from the date of death for the intentional homicide of an unborn child, among other crimes.
 - Illinois enacted a measure to gut its conscience-protecting law and require that health care providers, including pro-life pregnancy resource centers, provide information on where to obtain abortions.
 - **Kansas** enacted a measure to tier its family planning funds, prioritizing state, county and local health departments and comprehensive care providers.
 - **Kentucky** enacted legislation loosening the meaning of “individual, private setting” that describes the conditions under which informed consent must be given to include “real-time visual telehealth services...”
 - **Louisiana** extended the reflection period before a woman may undergo an abortion from 24 to 72 hours, with an exception if the woman certifies that she lives 150 miles or more away.
 - Louisiana enacted legislation that prohibits the performance of an abortion and any attempt to perform an abortion when a pregnant woman seeks the abortion after 20 weeks because of a genetic abnormality of the unborn child. Prior to 20 weeks, the law requires information be given on available resources prior to an abortion when a pregnant woman is aware of the abnormality.

- Louisiana enacted legislation that prohibits “gestational carrier contract” from requiring abortion for any reason, including prenatal diagnosis or reduction of multiples.
- Louisiana enacted a requirement that physicians performing abortions be board-certified or enrolled in a residency program for obstetrics and gynecology or family medicine.
- Louisiana enacted the Parental Rights for Disposition of Fetal Remains, which requires that prior to the final disposition of a miscarried child a health facility must notify the patient of their right to arrange for final disposition of the child and the availability of a chaplain or counseling services.
- Louisiana enacted a measure prohibiting entities that perform abortions from receiving public funds for any purpose.
- Louisiana enacted legislation that requires burial or cremation of remains resulting from an abortion and prohibits the buying and selling of a human fetus or embryo or their parts.
- The Louisiana House and Senate adopted resolutions commending Louisiana’s pregnancy resource centers, adoption agencies, maternity homes, and pro-life citizens and recognizing a “Pro-Life Day” at the state capitol.
- The Louisiana House adopted a resolution urging the Department of Health and Hospitals to study whether the effects of abortion inducing drugs can be reversed.
- The Louisiana House adopted a resolution requesting the Department of Children and Family Services convene a consortium of emergency care facilities designated in the Safe Haven Law and create and maintain a registry of such facilities.
- **Michigan** enacted a measure to increase penalties for the assault of a pregnant woman by a person who knows that the individual is pregnant.
- Michigan enacted a measure making it a criminal offense to intentionally coerce a pregnant woman to have an abortion against her will.
- Michigan enacted an appropriations measure that includes language requiring penalties for a school official or employee that refers a pupil for abortion or assists a pupil in obtaining an abortion.
- **Missouri** appropriated funding for alternatives to abortion.
- **Mississippi** enacted a prohibition on dismemberment abortions.

- Mississippi enacted a measure that prohibits the Division of Medicaid from authorizing payment of part or all of the cost of services rendered by an entity that performs abortions or is affiliate with such an entity.
- **North Carolina** enacted a measure prohibiting the sale of the remains of a miscarried or aborted unborn child and requiring written informed consent to allow research on a miscarried baby.
- The **New Jersey** Senate passed a pro-abortion resolution.
- The **New Mexico** Senate adopted a resolution requesting the formation of a working group, expressly composed of Planned Parenthood the ACLU and other abortion advocacy groups, to study strategies for expanded provision of long-acting reversible contraceptives (which include IUDs that are acknowledged to work by preventing the implantation of an already-developing human embryo).
- **Ohio** enacted legislation requiring the Ohio Department of Health to ensure that funding is not used to perform or promote elective abortions or contract with any entity that performs or promotes elective abortions or is affiliated with such an entity.
- **Oklahoma** enacted *The Humanity of the Unborn Child Act and Fund*, which requires the Department of Health to develop, update, and maintain information on agencies and services available to assist a woman through pregnancy, upon childbirth, and while the child is in development (including adoption agencies).
- The Oklahoma House adopted a resolution declaring “Rose Day” as a reminder “that the fight to save the unborn will continue until all methods of the taking of innocent life have been eliminated.”
- **South Carolina** enacted the Pain Capable Unborn Child Act, a prohibition on abortions after 20 weeks (five months).
- South Carolina enacted a measure that prohibits the State Health Plan from offering abortion coverage and prohibiting employer contributions to the State Health Insurance Plan from reimbursing for abortion; that requires abortion clinics report on the number of physicians without admitting privileges and a summary of abortions with aftercare needs that exceeds what is customarily provided; and that requires the development of fetal pain awareness materials.
- **South Dakota** enacted legislation requiring the Department of Health to include on its public website information regarding the inspection of an abortion facility — including the date, result, and details of any required corrective action — no later than 45 days after the inspection.

- South Dakota enacted legislation that informed consent must include information on the possibility of discontinuing drug-induced abortion and requiring the Department of Health to include such information on its website.
- South Dakota enacted legislation prohibiting the sale of fetal body parts.
- South Dakota enacted a prohibition on abortion after 20 weeks (five months) based on fetal pain.
- **Tennessee** enacted a requirement that physicians report on the final disposition of aborted children (with an exception for chemical abortion and where the expulsion of the aborted baby does not occur at the clinic). The measure also prohibits anything of value, including “any reimbursements” for costs.
- Tennessee amended existing law to require written consent of the mother for any medical experiments, research or photography of an aborted fetus. The measure includes an exception for the purpose of capturing images that are reasonably believed to depict evidence of a violation of state or federal law.
- **Utah** enacted legislation requiring an anesthetic or analgesic must be administered to an unborn child in an abortion after 20 weeks gestation.
- **Wisconsin** enacted a measure to tier its family planning funding and prohibiting entities that receive family planning funding from subgranting to abortion providers or affiliates of abortion providers. The measure also includes a conscience protection for refusal to offer “family planning services.”
- Wisconsin enacted a measure requiring that abortion providers bill the actual acquisition cost of prescription drugs.
- **West Virginia** enacted (overriding the Governor’s veto) a measure to prohibit dismemberment abortions.

Abortion-Related Measures Vetoed in 2016:

- A measure that was passed by the **Oklahoma** Legislature and that was vetoed by the Governor would have prohibited any physician performing abortions from obtaining or renewing a license to practice medicine in the state.
- A vetoed **Pennsylvania** budget would have included funding for alternatives to abortion.
- A **Virginia** measure that would have prohibited contracting with abortion providers was vetoed by the Governor.

- The **West Virginia** Governor’s veto of a measure to prohibit dismemberment abortions was overridden.

Issue-Specific Information:

Abortion

In 2016, 43 states considered over 360 measures related to abortion. The continued strong interest in abortion-related measures is of particular interest given that it is an election year and some states (including Texas) were not in regular session. While the measures considered were overwhelmingly life-affirming there was a noticeable continued increase in measures seeking to undermine existing state law and policies regulating or limiting abortion. States considered at least 40 measures undermining existing life-affirming laws or supporting the so-called “right” to abortion.

Significant abortion-related measures in 2016 included efforts to ensure tax dollars do not pay for abortion or abortion providers, 20 week (five month) abortion limitations, prohibitions on abortions based on sex, race or genetic abnormality, prohibitions on dismemberment abortions, ultrasound requirements, and support for abortion alternatives.

Abortion Prohibition and Limitations:

At least 28 states including Alabama, Alaska, Hawaii, Idaho, Illinois, Indiana, Iowa, Kentucky, Louisiana, Maryland, Michigan, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New Mexico, New York, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Utah, Virginia, West Virginia, and Washington considered measures to prohibit or limit abortion.

20 Week (Five Month) Limitations:

At least 10 states considered measures to limit abortion at 20 weeks (i.e., five months) gestation: Illinois, Kentucky, Maryland, New Hampshire, New Jersey, New Mexico, Pennsylvania, South Carolina, South Dakota, Virginia.

South Carolina and South Dakota both enacted 20 week abortion prohibitions.

Measures introduced in Illinois and New Hampshire were largely based on AUL’s late-term abortion ban, the *Women’s Health Defense Act*.

Additionally, in Iowa a measure was introduced that would limit abortion relative to the size of the fetus, prohibiting abortion when the fetus reaches 350 grams or more.

Viability bans:

Alaska and New Hampshire considered measures to prohibit abortion after viability.

Bans on Abortion Based on Sex, Race, or Genetic Abnormality:

At least 11 states considered measures to ban abortions based on the child's sex, race, and/or diagnosed genetic abnormality: Hawaii, Illinois, Indiana, Louisiana, Missouri, New Hampshire, Oklahoma, Oregon, Rhode Island, West Virginia and Washington.

Indiana enacted legislation to prevent prenatal discrimination on the basis of race, sex, or diagnosis of disability. The law, partially-based on AUL model language, also requires perinatal hospice information be provided to a woman whose unborn child has been diagnosed with a lethal fetal anomaly.

Louisiana enacted legislation that prohibits the performance of an abortion and any attempt to perform an abortion when a pregnant woman seeks the abortion after 20 weeks because of a genetic abnormality of the unborn child. Prior to 20 weeks, the law requires information be given on available resources prior to an abortion when a pregnant woman is aware of the abnormality.

Both chambers of the Oklahoma legislature passed a measure partially-based on AUL model language to prohibit abortions based on Down Syndrome or genetic abnormalities. Illinois, Missouri, New Hampshire, and Washington considered nondiscrimination measures at least partially-based on AUL model language.

“Heartbeat” Bans:

At least three states considered measures prohibiting an abortion when an unborn child has a heartbeat: Alabama, Indiana, and Oklahoma

Partial-Birth Abortion Bans:

In Rhode Island, measures partially-based on AUL model language were introduced that would amend and revise definitions and penalties to the partial-birth abortion ban.

Dismemberment Bans:

At least 17 states including Alabama, Idaho, Kentucky, Louisiana, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, South Carolina, Utah, and West Virginia considered measures prohibiting “dismemberment” abortions. Alabama, Louisiana, Mississippi and West Virginia enacted dismemberment prohibitions.

Surrogacy:

Louisiana enacted legislation that prohibits “gestational carrier contract” from requiring abortion for any reason, including prenatal diagnosis or reduction of multiples.

Abortion Facility Regulation and Other Abortion Provider Requirements:

Abortion Facility Regulations:

At least 7 states including Alabama, Colorado, Florida, Illinois, Kentucky, New Hampshire, and Tennessee considered measures regulating abortion facilities.

Alabama enacted legislation providing that the Department of Public Health may not issue or renew a health center license to an abortion clinic within 2,000 feet of a K-8 public school.

Florida enacted legislation requiring annual inspections and prompt investigations of abortion facilities. The law also requires that clinics have written patient transfer agreements with a local hospital.

In Colorado, the *Women's Health Protection Act*, based on AUL model language, was introduced.

The Kentucky Senate passed a measure that would require abortion facilities to meet ambulatory surgical center standards. Florida and Tennessee considered measures similarly requiring abortion facilities meet ambulatory surgical center standards.

Illinois and New Hampshire considered measures to require licensing of abortion facilities.

A measure was introduced in Tennessee that would require abortion facilities to maintain financial records, available for inspection on request.

Conversely, Arizona considered legislation to repeal its inspection requirements for abortion facilities.

Individual Provider Requirements:

At least 6 states including Florida, Louisiana, Oklahoma, Kentucky, Kansas, South Dakota considered measures delineating qualifications for individual abortion providers.

Florida enacted a requirement that a physician performing or inducing an abortion have active admitting privileges at a hospital within a reasonable proximity of the clinic.

Louisiana enacted a requirement that physicians performing abortions be board-certified or enrolled in a residency program for obstetrics and gynecology or family medicine.

A measure that was passed by the Oklahoma Legislature and that was vetoed by the Governor would have prohibited any physician performing abortions from obtaining or renewing a license to practice medicine in the state.

A bill was introduced in Kansas to require doctors who perform abortions to disclose that information to new and existing patients.

A South Dakota bill introduced to regulate midwives included a prohibition on performing or assisting in abortion.

Conversely, in Arizona, a bill was introduced to remove the prohibition against allowing nurses to perform abortions.

Abortion Reporting:

At least 8 states including Illinois, Michigan, Minnesota, New Hampshire, South Carolina, South Dakota, Tennessee, and Wyoming, related to abortion reporting.

South Carolina enacted a requirement that abortion clinics report on the number of physicians without admitting privileges and a summary of abortions with aftercare needs that exceeds what is customarily provided.

South Dakota enacted legislation requiring the Department of Health to include on its public website information regarding the inspection of an abortion facility — including the date, result, and details of any required corrective action—no later than 45 days after the inspection.

Conversely, a bill was introduced in Minnesota that would repeal abortion-reporting requirements.

Abortion Inducing Drugs and “Webcam” Abortions:

At least 4 states including Arizona, Iowa, New Hampshire and Utah considered measures regulating the provision of abortion-inducing drugs and/or the practice of so-called “webcam” abortions.

Arizona enacted, but subsequently repealed, a requirement that abortion drugs be dispensed in compliance with the final printed label as of December 31, 2015.

New Hampshire considered the *Abortion Inducing Drugs Safety Act*, based on AUL model language.

The Utah House passed a prohibition on “telehealth” prescription of abortion drugs.

Iowa introduced legislation that would require a physician prescribing chemical abortion comply with federal regulations and in a clinic or hospital with the capacity to provide surgical intervention.

Conversely, a measure was introduced in Arizona to repeal prohibition on telemedicine abortion. Kansas considered a measure to allow an abortion “telehealth consultation.”

Informed Consent and Informed Consent Enhancements:

More than two decades after the U.S. Supreme Court approved informed consent laws for abortion in *Planned Parenthood v. Casey*, states continue to consider measures ensuring that women receive all relevant information about abortion, its risks, and its alternatives.

Information About Chemical Abortion Reversal:

South Dakota enacted legislation that informed consent must include information on the possibility of discontinuing drug-induced abortion and requiring the Department of Health to include such information on its website.

Arizona amended its informed consent regarding chemical abortion reversal to tell a woman that mifepristone alone is not always effective to end a pregnancy and that she should consult a physician if she would like more information.

A bill was introduced in California that would require abortion facilities to post public notice that “it may be possible to reverse the effects of the abortion pill. If you change your mind after taking the abortion pill, time is of the essence. For more information call Abortion Pill Reversal Hotline at...”

General Informed Consent:

At least 6 states, including Alabama, Colorado, Indiana, Kentucky, Missouri and Virginia, considered measures related to informed consent for abortion.

Alabama and Indiana considered measures requiring, along with general informed consent, that an abortion provider to provide a conflict of interest disclaimer: a written and oral statement divulging the abortion provider’s gross income from the previous fiscal year as well as the percentage of that income which was obtained from the performance of abortions. The statement must also include the monetary loss to the abortion provider which would result from the woman’s decision to carry the pregnancy to term.

A bill was introduced in Kentucky to allow an action for personal injury and emotional distress as a result of an abortion being performed without complete medical information or informed consent.

Missouri considered a measure to require women still receive Missouri’s informed consent materials when being referred to out-of-state abortion providers.

In Virginia, a measure was introduced to ensure informed consent includes information regarding abortion's risks to future fertility such as preterm birth and placenta previa in future pregnancies.

Measures to Repeal or Weaken Informed Consent Requirements:

Kentucky enacted legislation loosening the meaning of "individual, private setting" that describes the conditions under which informed consent must be given to include "real-time visual telehealth services..."

In Arizona a bill was introduced to add a rape and incest exception to all provisions of informed consent.

Virginia considered measures that would allow the bypass of all informed consent requirements.

Reflection Periods:

Louisiana extended the reflection period before a woman may undergo an abortion from 24 to 72 hours, with an exception if the woman certifies that she lives 150 miles or more away.

Indiana considered a measure to extend its reflection period from 24 to 48 hours.

Anti-Coercion Measures:

Michigan enacted legislation making it a criminal offense to intentionally coerce a pregnant woman to have an abortion against her will.

In Rhode Island a measure was introduced that would require clinics to post signs informing women that it is unlawful to perform an abortion against her will and that consent must be freely given and voluntary.

Informed Consent Concerning Prenatal Diagnosis:

At least four states, including Hawaii, Illinois, Indiana, Louisiana, considered legislation related to the provision of information about perinatal hospice or other resources.

Indiana enacted legislation partially-based on AUL model language that requires perinatal hospice information be provided to a woman whose unborn child has been diagnosed with a lethal fetal anomaly.

Louisiana enacted legislation requiring that prior to 20 weeks, a woman be provided with information on resources prior to an abortion when a pregnant woman is aware of a genetic abnormality of the unborn child.

Illinois considered a measure, partially-based on AUL model language, to require perinatal hospice information to be provided to a woman whose unborn child has been diagnosed with a lethal fetal anomaly.

Hawaii introduced measures that would have required counseling to women who have received a prenatal diagnosis that their child has a disability.

Informed Consent Concerning Fetal Pain:

South Carolina enacted a measure requiring the development of fetal pain awareness materials.

Utah enacted legislation requiring an anesthetic or analgesic must be administered to an unborn child in an abortion after 20 weeks gestation.

Informed Consent on Disposal of Fetal Remains:

At least 5 states including Idaho, Louisiana, Mississippi, Missouri, and South Carolina considered informed consent to include that a woman has the right to determine how the fetal remains are disposed.

Idaho enacted the *Unborn Infants Dignity Act* partially-based on AUL model language, which requires in every instance of fetal death involving miscarriage or stillbirth, the mother be notified that she has the right to direct the receipt and disposition of her deceased unborn infants remains. Mississippi and South Carolina considered similar measures based on AUL model language.

Louisiana enacted the Parental Rights for Disposition of Fetal Remains, which requires that prior to the final disposition of a miscarried child a health facility must notify the patient of their right to arrange for final disposition of the child and the availability of a chaplain or counseling services.

A bill introduced in Missouri would require as part of informed consent that a physician presents a woman with materials explaining that she has the right to determine the final disposition for the aborted fetus, provide available options, and information regarding counseling that is available post-abortion.

Informed Consent for Research on Fetal Remains:

At least 4 states, Idaho, New Jersey, North Carolina, and Tennessee, considered measures requiring informed consent for research on fetal remains.

Idaho enacted a measure requiring written consent from the mother for research on the bodily remains of an unborn infant whose death occurred as the result of miscarriage or stillbirth.

North Carolina enacted a measure requiring written informed consent to allow research on a miscarried baby.

Tennessee enacted legislation amending existing law to require the written consent of the mother for any medical experiments, research or photography of an aborted fetus. The law makes an exception for the purpose of capturing images that are reasonably believed to depict evidence of a violation of state or federal law.

New Jersey considered a measure requiring written consent for fetal tissue donation.

Ultrasound Requirements:

At least 10 states, including Alabama, Colorado, Idaho, Illinois, Kentucky, Maryland, New Jersey, Rhode Island, South Carolina, and Tennessee considered ultrasound requirements.

Idaho enacted legislation requiring informed consent at least 24 hours prior to an abortion includes the right to view ultrasound images and requires the online publication of locations that provide ultrasounds free of charge.

South Carolina and Tennessee considered measures based on AUL's *Ultrasound Right to Know* model language. In Illinois, a bill incorporating some AUL model language was introduced that would require offering an ultrasound after 8 weeks gestation.

Measures to Repeal or Weaken Ultrasound Requirements:

Virginia considered measures to repeal the state's ultrasound requirement.

Parental Involvement and Minors:

At least 5 states including Georgia, Indiana, Missouri, New Jersey, and West Virginia considered parental notification or parental consent requirements for abortion and/or sought to amend current parental involvement laws to enhance protections for minors.

Georgia enacted a law requiring that the juvenile court clerk report on judicial bypass statistics. The reports made to the Administrative Office of the Courts shall be held confidential and are not subject to disclosure. The AOC shall provide only aggregated statistics.

Indiana and Missouri considered measures at least partially-based on AUL's parental involvement enhancements model.

Missouri and West Virginia considered measures that would prohibit transporting a minor across a state line with the intent to obtain an abortion without the required parental consent.

In New Jersey, measures were introduced proposing a constitutional amendment that would overturn the New Jersey Supreme Court's decision in *Planned Parenthood of Central NJ v. Farmer* (2000) and permit the Legislature to provide that a parent shall receive notice before his or her unemancipated minor or incompetent child undergoes any medical or surgical procedure or treatment relating to pregnancy.

West Virginia considered legislation allowing a court considering a judicial bypass request to appoint a guardian ad litem for the interests of the unborn child.

Conversely, measures were introduced in Arizona to gut its parental involvement law, bypassing parental consent and judicial authorization.

Abortion Funding:

At least 27 states considered measures related to federal and state funding of abortion and/or abortion providers: Alaska, Arkansas, Arizona, Florida, Illinois, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Michigan, Minnesota, Mississippi, Missouri, Nebraska, New Hampshire, New Jersey, New York, Ohio, Oklahoma, Pennsylvania, South Carolina, Virginia, Washington, West Virginia, and Wisconsin.

Alaska enacted measures specifically providing that no Medicaid appropriations may be expended for abortion that is not a "mandatory services" required under Alaska law.

Arkansas enacted appropriations bills providing that no funds shall be used for abortion referral in public schools or for abortion services.

Arizona enacted legislation allowing the Health Care Cost Containment System to exclude any individual or entity that has (among other things) failed to segregate taxpayer dollars from abortions, submitted a claim for a procedure performed in association with an abortion in violation of federal or state law, failed to comply with mandatory reporting of sexual abuse, assault, trafficking or statutory rape. Arizona also enacted legislation prohibiting payroll deductions from the compensation of State officers or employees made to abortion providers.

Florida enacted legislation restricting state agencies, local governmental entities, and Medicaid managed care plans from contracting with, or expending funds for the benefit of, an organization that owns, operates, or is affiliated with one or more clinics that perform abortions.

Iowa enacted appropriations for health and human services that includes "Iowans support reducing the number of abortions performed in our state. Funds appropriated under this section shall not be used for abortions..."

Kansas enacted a measure to tier its family planning funds, prioritizing state, county and local health departments and comprehensive care providers.

Louisiana enacted a measure prohibiting entities that perform abortions from receiving public funds for any purpose.

Michigan enacted appropriations measure that includes a prohibition on contracting or subcontracting with an organization that provides elective abortions, abortion counseling or abortion referrals.

Mississippi enacted legislation prohibiting the Division of Medicaid from authorizing payment of part or all of the costs of care and services by an entity that performs abortions, maintains an abortion facility, or is affiliated with such an entity.

Ohio enacted legislation requiring the Ohio Department of Health to ensure that funding is not used to perform or promote elective abortions or contract with any entity that performs or promotes elective abortions or is affiliated with such an entity.

Virginia's enacted budget includes language prohibiting family planning funds from paying for abortion, or assisting or encouraging abortion. Another measure that would have prohibited contracting with abortion providers was vetoed by the Governor.

Wisconsin enacted a measure to tier its family planning funding and prohibiting entities that receive family planning funding from subcontracting to abortion providers or affiliates of abortion providers. The measure also includes a conscience protection for refusal to offer "family planning services." Wisconsin also enacted a measure requiring that abortion providers bill the actual acquisition cost of prescription drugs.

Mississippi and South Carolina considered measures to defund the abortion industry based on AUL model language.

New Hampshire considered a resolution based on AUL model language, calling for investigation and defunding of abortion providers.

Insurance Coverage of Abortion:

At least 5 states considered measures regarding insurance coverage of abortions within the health insurance Exchanges (required under the federal healthcare law), through private insurance, and/or for government employees: California, Minnesota, Rhode Island, South Carolina, and West Virginia.

South Carolina enacted a measure prohibiting the State Health Plan from offering abortion coverage and prohibiting employer contributions to the State Health Insurance Plan from reimbursing for abortion.

California considered legislation to provide that a health care service plan is not required to include abortion as a covered benefit and would prohibit the Director of Managed

Health Care from denying a license, or disciplining a licensee, on the basis that the plan excludes coverage for abortions.

Minnesota considered a measure prohibiting state-sponsored health programs from funding abortion.

Rhode Island considered legislation to ensure that individuals and small business employers have the choice of participating in at least one health plan that excludes abortion coverage.

West Virginia considered measures that would prohibit exchange plans from offer abortion coverage, as well as prohibiting any insurance health plans from providing abortion coverage except by an optional separate supplemental coverage.

Conversely, 5 states considered measures to repeal prohibitions on insurance coverage for abortions within the Exchanges, through private insurance, and/or for government employees: Illinois, Kansas, Michigan, Rhode Island and Virginia.

Illinois also considered a measure that would require health insurance providers to send confidential communications for “sensitive health services,” including abortion, to requested alternative addresses or emails.

Abortion Alternatives/Pregnancy Resource Centers:

At least 11 states considered measures supporting alternatives to abortion and the life-affirming work of pregnancy resource centers: California, Florida, Georgia, Indiana, Kentucky, Louisiana, Nebraska, Oklahoma, Oregon, Missouri, and Pennsylvania.

The Georgia House adopted a resolution, based on AUL model language, honoring the life-affirming work of pregnancy resource centers. A similar resolution was introduced in the Georgia Senate.

Georgia established a “Positive Alternatives for Pregnancy and Parenting Grant Program” to promote healthy pregnancies and childbirth.

The Louisiana House and Senate adopted resolutions to commend Louisiana’s pregnancy resource centers, adoption agencies, maternity homes, and pro-life citizens.

The Louisiana House adopted a resolution requesting the Department of Children and Family Services to convene a consortium of emergency care facilities designated in the Safe Have Law and Safe Haven stakeholder groups and to create and maintain a registry of Safe Haven emergency care facilities.

Oklahoma enacted *The Humanity of the Unborn Child Act and Fund*, which requires the Department of Health to develop, update, and maintain information on agencies and services available to assist a woman through pregnancy, upon childbirth, and while the

child is in development (including adoption agencies). The comprehensive list of public and private agencies shall include a description of services offered and information on how to contact. In addition to promoting alternatives to abortion, the law also requires the Department of Health to develop and make available materials on fetal development.

Missouri included funding for alternatives to abortion in its appropriations. A vetoed Pennsylvania budget would have included funding for alternatives to abortion.

In California, a bill was introduced that would require abortion facilities to post public notice that “if you are considering continuing your pregnancy, nonprofit pregnancy centers can provide services at no cost to you that may include, consultation, pregnancy testing, ultrasound services, support groups, parenting programs, material assistance, STD or STI testing. To find a center near you, call 1-800-712-HELP”

Florida considered a measure that would require the creation and management of a statewide list of attorneys that provide volunteer adoption services. Indiana considered measures that would establish an interim study committee on adoption promotion and support. Kentucky considered a measure that would require the Cabinet for Health and Family Services to publish a list of certified adoptive homes and require that list be provided to a woman seeking an abortion. In Oregon, a measure was introduced to establish a grant program for a Pregnant Women’s Assistance Fund, to encourage carrying pregnancies to term.

Nebraska considered a measure to create “Choose Life” license plates.

Conversely, at least two states, Arizona and Wisconsin, considered measures aimed at undermining or stigmatizing the work of pregnancy resource centers.

State Constitutional Amendments:

At least 6 states including Alabama, Georgia, Iowa, Missouri, New Hampshire and New Jersey considered abortion-related amendments to their state constitutions.

State Freedom of Choice Acts (FOCA) and Pro-Abortion Resolutions:

Legislators in at least 8 states including Arizona, California, Hawaii, Michigan, Missouri, New Jersey, Rhode Island, and Wisconsin considered state *Freedom of Choice Acts* (FOCA) or resolutions protecting or supporting a legal “right” to abortion.

The California House and Senate adopted pro-abortion resolutions affirming Planned Parenthood and claiming that *Roe v. Wade* is the “cornerstone of women’s ability to control their reproductive lives...”

The Hawaii Senate adopted a resolution affirming the “right to access reproductive healthcare services without fear” and professing “support for Planned Parenthood health

centers” describing the abortion provider as having a “mission to safeguard and provide access to a fundamental human right.”

State FACE (Freedom of Access to Abortion Clinics):

A *Freedom of Access to Clinic Entrances* measure was introduced in Pennsylvania.

“Personhood” Measures and Life-Related Resolutions:

At least 6 states considered measures related to the “personhood” of the unborn child or other measures and resolutions supporting the sanctity of human life: Alabama, Colorado, Florida, Maryland, Missouri, Oklahoma, Rhode Island and Virginia.

The Oklahoma House adopted a resolution declaring “Rose Day” as a reminder “that the fight to save the unborn will continue until all methods of the taking of innocent life have been eliminated.”

Education/Schools

Alaska and Minnesota considered measures to prohibit employees or representatives of abortion providers from distributing materials or instruction at public schools.

In Mississippi, a measure was introduced to require that “any discussion of abortion” in school curriculum “must be presented from the medical perspective of the potential longer-term and short-term hazards presented to patients.”

In West Virginia, a measure was introduced that would require high schools to teach about fetal development.

Michigan enacted a bill that includes requiring penalties for a school official or employee who refers a pupil for an abortion or assists a pupil in obtaining an abortion. West Virginia considered a measure similarly prohibiting school employees from counseling, referring, transporting or assisting students to obtain an abortion.

Bills were introduced in Missouri to eliminate the prohibition on abortion providers providing sex-education in schools.

“Emergency Contraception”

At least 9 states considered measures related to so-called “emergency contraception”—drugs and devices that have known post-fertilization (i.e., life-ending) mechanisms of action, but are labeled as “contraception” by the Food and Drug Administration (FDA): California, Hawaii, Illinois, Kansas, Missouri, New Mexico, New York, Virginia, and Wyoming.

California enacted legislation requiring “comprehensive sex education” to include information about so-called emergency contraception, as well as “instruction on pregnancy shall include an objective discussion on all legally available pregnancy outcomes, including...abortion.”

New Mexico adopted a resolution requesting the formation of a working group, expressly composed of Planned Parenthood the ACLU and other abortion advocacy groups, to study strategies for expanded provision of long-acting reversible contraceptives (which include IUDs that are acknowledged to work by preventing the implantation of an already-developing human embryo).

The Illinois legislature passed a bill requiring all individual and group health policy plans to provide coverage for all FDA-approved contraceptive drugs. The bill has been sent to the Governor.

The New York Assembly passed a measure to require all health insurance policies include coverage for all FDA-approved contraceptive drugs and voluntary sterilization.

California considered a bill requiring that all contraception, including emergency contraception, be made available to incarcerated persons who are capable of becoming pregnant.

Hawaii introduced measures to permit pharmacists to prescribe any contraceptive to a patient who is at least 18, even without a previous prescription from a physician, and would require all insurers to reimburse.

In New York, a bill would require any pharmacy that does not sell “emergency contraception” to post signs at or adjacent to each counter at which prescription drugs are sold indicating that it is not sold at the pharmacy.

A bill was introduced in Virginia to declare that FDA-approved birth control shall not be considered abortion.

In Wyoming, a measure was introduced to require the department of health to provide long acting reversible contraceptives, including IUDs with known life-ending effects.

Conversely, Kansas considered a measure that would require that KanCare health plans to include contraceptives “but not abortion or abortifacients.” Missouri considered a measure to prohibit pharmacies from providing “emergency contraception” over-the-counter.

Legal Recognition and Protection of the Unborn and Newly Born

Legal Recognition and Protection of the Unborn:

At least 34 states considered over 90 measures providing legal recognition of and protection for unborn and newly born children and deceased unborn infants in contexts other than abortion. Undoubtedly sparked by the attention drawn last summer to the industry that harvests the body parts of aborted children, states considered measures to provide for the dignified treatment of the bodies of deceased infants, including to prohibit the sale, transfer, use and/or donation of fetal remains, and regulations regarding experimentation on deceased unborn infants.

Fetal Homicide and Assault:

At least 8 states considered measures related to fetal assault or homicide: Colorado, Hawaii, Iowa, Michigan, New Jersey, Ohio, Pennsylvania, and Rhode Island.

Michigan enacted legislation that increases penalties for assault of pregnant woman by a person who knows that she is pregnant.

Wrongful Death:

Illinois enacted a measure that amends the *Wrongful Death Act* to provide that an action may be brought within 5 years from the date of death for the intentional homicide of an unborn child, among other crimes.

Wrongful Birth and Wrongful Life Lawsuits:

New Jersey considered measures to eliminate lawsuits on grounds of “wrongful birth” or “wrongful life” for failure to suggest or advise a person to undergo an abortion or genetic testing.

Born-Alive Infant Protection (BAIPA):

At least 5 states considered measures protecting babies born alive during abortions: Colorado, Hawaii, New Hampshire, New Mexico, and West Virginia.

Hawaii, New Hampshire, and New Mexico considered measures based on AUL’s *Born Alive Infant Protection Act*.

Fetal Death Certificates, Certificates of Stillbirth, and Disposal of Fetal Remains:

At least 14 states considered measures regarding the disposal of fetal remains: Alabama, Colorado, Florida, Idaho, Kentucky, Louisiana, Mississippi, Missouri, Nebraska, Ohio, South Carolina, Tennessee, Virginia, and Wisconsin.

Alabama and Idaho enacted legislation partially-based on AUL's *Unborn Infants Dignity Act*.

Florida enacted legislation that elevates the violation of disposition of fetal remains laws to a first degree misdemeanor. Louisiana enacted legislation that requires burial or cremation of remains resulting from an abortion. Tennessee enacted legislation requiring a physician to report on the final disposition of each aborted baby.

Mississippi and South Carolina considered measures based on AUL's *Unborn Infants Dignity Act*.

Colorado considered a measure that would provide enforcement authority to the Attorney General over unlawful transfers of aborted fetal tissue and requiring that the Attorney General "shall investigate any alleged violations..."

Missouri considered measures to require certification that fetal tissue is disposed of in accordance with the law.

In Pennsylvania, a measure was introduced to redefine "decedent" whose body or part may be the source of an anatomical gift to exclude an aborted baby.

In Illinois, a bill was introduced to amend the Anatomical Gift Act to provide that the term "decedent" includes an aborted fetus and that no part of a deceased fetus upon who an abortion has been performed may be used for any purpose specified in the Act.

Prohibitions on the Sale, Transfer, Use and/or Donation of Fetal Remains:

At least 21 states considered measures to prohibit the sale, transfer, and/or donation of fetal remains or regarding penalties for violations of existing laws: Alabama, Arizona, Delaware, Florida, Georgia, Idaho, Indiana, Iowa, Kentucky, Louisiana, Mississippi, Nebraska, New Jersey, New York, North Carolina, Oklahoma, South Carolina, South Dakota, Virginia, Wisconsin and Wyoming.

Alabama and Idaho enacted legislation partially-based on AUL's *Unborn Infants Dignity Act*, prohibiting the sale of the bodily remains of a deceased unborn infant. Mississippi and South Carolina considered similar measures based on AUL model language.

Arizona enacted legislation that prohibits the sale of aborted fetal parts.

North Carolina enacted a measure prohibiting the sale of the remains of a miscarried or aborted unborn child.

Florida enacted legislation to prohibit the sale and donation of fetal remains from an abortion.

Indiana enacted legislation that makes it a felony to receive, sell, or transfer aborted fetal tissue except for proper medical disposal.

Louisiana enacted legislation that prohibits buying, selling, or any other transfer of the intact body or organs, tissues or cells obtained from a human embryo or fetus whose death was caused by an induced abortion.

South Dakota enacted legislation prohibiting the sale of fetal body parts.

Kentucky Senate passed a bill that would make it a class c felony for anyone to sell or make a charge for all our part of an aborted fetus.

Fetal Experimentation:

At least 11 states considered measures to regarding fetal experimentation: Alabama, Arizona, Idaho, Indiana, Mississippi, Missouri, New Jersey, South Carolina, South Dakota, Wisconsin and Wyoming.

Alabama and Idaho enacted legislation partially-based on AUL's *Unborn Infants Dignity Act*, prohibiting experimentation on aborted infants. Mississippi and South Carolina considered similar measures based on AUL model language.

Arizona enacted legislation that prohibits the use of human fetus or embryo resulting from an abortion in animal or human research, experimentation, or study, or for transplantation. The law prohibits experimentation on a human fetus or embryo intended to be aborted and further prohibits offering or performing an abortion for sole purpose is research, experimentation or transplantation.

South Dakota enacted legislation prohibiting research on aborted fetal tissue.

Substance Abuse by Pregnant Women:

At least 5 states considered measures relating to the use of narcotics or controlled substances while pregnant: Alabama, Mississippi, Missouri, New Jersey, and Virginia.

Alabama enacted legislation that clarifies it is not a violation of the Alabama Child Abuse Act if the responsible person was the mother of the unborn child and she was taking the controlled substance pursuant to a lawful prescription or under the direction/recommendation of a health care provider.

Mississippi considered a measure creating the offense of chemical endangerment of a child of fetus that mandates prosecutors offer substance abuse treatment programs as an alternative to prosecution.

Healthcare Freedom of Conscience

Protective Measures:

A bill was introduced in Alabama to protect conscience rights of healthcare providers not to participate in abortion, human cloning, human embryonic stem cell research and sterilization.

Wisconsin enacted a measure that includes a conscience protection for refusal to offer “family planning services.”

Coercive Measures:

Illinois enacted a measure to gut its conscience-protecting law and require that healthcare providers, including pro-life pregnancy resource centers, provide information on where to obtain abortions. AUL and AUL Action had led efforts against the bill, which had been successfully stalled after passing the Illinois Senate for over a year before it was passed by the House and signed by the Governor.

Michigan considered measures to weaken the state’s conscience protecting laws.

At least two states including Missouri and Michigan considered measures that would require healthcare professionals and institutions providing care to victims of sexual assault to offer and to dispense so-called “emergency contraception,” which includes drugs and devices with known post-fertilization (*i.e.*, life-ending) mechanisms of action.

Measures were introduced in Missouri and New Jersey to force pharmacies to dispense so-called “emergency contraception.”