

HOUSE No. 4821

The Commonwealth of Massachusetts

HOUSE OF REPRESENTATIVES, June 2, 2022.

The committee on Public Health to whom was referred the petition (accompanied by bill, Senate, No. 1470) of Jason M. Lewis, Jack Patrick Lewis, Christina A. Minicucci, Mike Connolly and other members of the General Court for legislation to require public universities to provide medication abortion, and the petition (accompanied by bill, House, No. 2399) of Lindsay N. Sabadosa and others relative to medical abortion or medication abortion at health centers at public institutions of higher education, reports recommending that the accompanying bill (House, No. 4821) ought to pass.

For the committee,

MARJORIE C. DECKER.

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**In the One Hundred and Ninety-Second General Court
(2021-2022)**

An Act to require public universities to provide medication abortion.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Chapter 15A of the General Laws is hereby amended by adding the
2 following 2 sections:-

3 Section 46. (a) As used in this section and section 47, the following words shall, unless
4 the context clearly requires otherwise, have the following meanings:-

5 “Institution”, a public institution of higher education, as listed in section 5 of this chapter.

6 “Medication abortion”, abortion provided by medication techniques.

7 “Medication abortion readiness”, each individual institution’s preparedness to provide
8 medication abortions to or assist students in obtaining medication abortions, including, but not
9 limited to, having in place equipment, protocols, patient educational materials, informational
10 websites, and training for staff. “Medication abortion readiness” does not include the provision
11 of medication abortions.

12 “Health center”, a clinic or health center providing primary health care services to
13 students operated by an institution.

14 (b) Each institution shall develop a medication abortion readiness plan for its students.

15 (1) No later than April 30, 2023, the department of public health shall issue guidance to
16 all institutions regarding the required contents of medication abortion readiness plans in
17 accordance with the varied capacities of institutions to provide services including, but not limited
18 to, directly providing medication abortions to students in a health center, providing referrals for
19 abortion care services not provided in the health center, or providing information to students
20 about obtaining a medication abortion. In developing the guidance, the department shall consider
21 factors including, but not limited to: whether the institution has an operational health center on
22 campus; the institution’s proximity to a hospital, clinic, or other facility which provides
23 medication abortion; availability, convenience, and cost of public transportation between the
24 institution and closest facility that provides medication abortion; and whether the institution
25 employs health care workers on campus.

26 (a) The department of public health shall create and maintain a list of clinics that are
27 licensed by the department to provide medication abortion. The list shall be made available to all
28 institutions.

29

30 (2) Institutions without a health center shall not be required to directly provide
31 medication abortion to students.

32 (3) Each institution shall submit to the department of public health its medication
33 abortion readiness plan by November 30, 2023.

34 (4) The department of public health shall determine whether plans are adequate in
35 proportion to each institution's capacity by January 31, 2024. The department shall provide
36 further guidance to institutions with plans deemed inadequate regarding remedial measures for
37 developing an adequate plan.

38 (5) The department of public health shall review medication abortion readiness plans on
39 an annual basis, taking into consideration any changes to the capacity of each institution to
40 provide services to students since the preceding approval of the plan.

41 Section 47. (a) There shall be established and set up on the books of the commonwealth a
42 separate fund to be known as the Public University Health Center Sexual and Reproductive
43 Health Preparation Fund, hereafter called "the fund," for the purpose of medication abortion
44 readiness. The fund shall be administered by the department of public health, in consultation
45 with the department of higher education. The fund shall be credited with: (i) revenue from
46 appropriations or other money authorized by the general court and specifically designated to be
47 credited to the fund; and (ii) funds from non-state entities, including, but not limited to gifts,
48 grants and donations from private entities and local and federal government agencies. Amounts
49 credited to the fund shall not be subject to further appropriation and any money remaining in the
50 fund at the end of a fiscal year shall not revert to the General Fund.

51 (b) The department of public health shall utilize fund moneys to do the following:

52 (1) Provide, subject to available funding, a grant to each health center to pay for the cost,
53 both direct and indirect, of medication abortion readiness. The department shall prioritize funds

54 to the University of Massachusetts and state universities and create a simple application process
55 for community colleges to apply for funding. Allowable expenses under these grants shall
56 include, but not be limited to, the following: (i) the purchase of equipment used in the provision
57 of medication abortions; (ii) facility and security upgrades; (iii) costs associated with enabling
58 the health center to deliver telehealth services; (iv) costs associated with training staff in the
59 provision of medication abortions; (v) staff cost reimbursement and clinical revenue offset while
60 staff are in trainings; and (vi) billing specialist consultation.

61 (2) Pay the costs of the department of public health, both direct and indirect, associated
62 with administration of the fund, including the costs of hiring staff.

63 (3) Maintain a system of financial reporting on all aspects of the fund.

64 (c) Each health center grantee shall, as a condition of receiving a grant award from the
65 fund, participate in an evaluation of its medication abortion readiness and its provision of
66 medication abortions.

67 (d) Nothing in this section or section 46 shall be interpreted as requiring a university or
68 college to utilize its general fund moneys or student fees for medication abortion readiness
69 before January 1, 2026.

70 (e) The department of public health, working with the health centers, shall assist and
71 advise on potential pathways for health centers to access public and private payers to provide
72 funding for ongoing costs of providing medication abortions.

73 SECTION 2. (a) On or before December 31, 2024, and on or before December 31 of each
74 year thereafter, the department of public health shall submit a report to the clerks of the house of

75 representatives and the senate, including, but not necessarily limited to, all of the following
76 information for each reporting period:

77 (i) an accounting of the medication abortion plans of all institutions, including, but not
78 limited to: a list of institutions that have submitted plans deemed adequate by the department, a
79 list of institutions that are actively developing a remedial plan, and a list of institutions that have
80 not submitted an adequate plan to the department.

81 (ii) the number of medication abortions provided at health centers, disaggregated, to the
82 extent possible, by the health center.

83 (iii) the total amount of funds granted by the department of public health to the institution
84 and its respective health center pursuant to section 46 of chapter 15A of the General Laws that is
85 expended on medication abortion readiness, as that term is defined in section 46 of said chapter
86 15A, and, separately, the total amount of any other funds expended on medication abortion
87 readiness and the source of those funds, disaggregated by function and, to the extent possible,
88 disaggregated by health center.

89 (iv) the total amount of funds expended on the provision of medication abortions and the
90 source of those funds, disaggregated by function and, to the extent possible, disaggregated by
91 health center.

92 (b) The reports required in subsection (a), and any associated data collection, shall be
93 conducted in accordance with state and federal privacy law, including, but not necessarily
94 limited to, section 70E of chapter 111 of the General Laws, the federal Family Educational
95 Rights and Privacy Act of 1974, 20 U.S.C. section 1232g, and the federal Health Insurance
96 Portability and Accountability Act of 1996, Public Law 104-191.

97 SECTION 3. Subsection (b) of section 46 of the General Laws shall take effect on June
98 30, 2024.