SENATE No. 1114

The Commonwealth of Massachusetts

PRESENTED BY:

Rebecca L. Rausch

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act enhancing access to abortion care.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	
Rebecca L. Rausch	Norfolk, Worcester and Middlesex	
Jason M. Lewis	Fifth Middlesex	2/9/2023
Vanna Howard	17th Middlesex	2/28/2023
Manny Cruz	7th Essex	3/29/2023
Mike Connolly	26th Middlesex	5/23/2023
Robyn K. Kennedy	First Worcester	7/10/2023
Susan L. Moran	Plymouth and Barnstable	7/27/2023
Brendan P. Crighton	Third Essex	8/8/2023
Thomas M. Stanley	9th Middlesex	8/8/2023
Carmine Lawrence Gentile	13th Middlesex	9/29/2023
Sal N. DiDomenico	Middlesex and Suffolk	11/2/2023
Michelle L. Ciccolo	15th Middlesex	11/3/2023
Margaret R. Scarsdale	1st Middlesex	11/3/2023
Sally P. Kerans	13th Essex	11/7/2023
Jack Patrick Lewis	7th Middlesex	11/8/2023
Joanne M. Comerford	Hampshire, Franklin and Worcester	11/21/2023
Natalie M. Higgins	4th Worcester	2/5/2024
Sean Garballey	23rd Middlesex	2/5/2024

Berkshire, Hampden,	Franklin	and
Hampshire		

Paul W. Mark

4/8/2024

SENATE No. 1114

By Ms. Rausch, a petition (accompanied by bill, Senate, No. 1114) of Rebecca L. Rausch, Jason M. Lewis and Vanna Howard for legislation to enhance access to abortion care. The Judiciary.

The Commonwealth of Alassachusetts

In the One Hundred and Ninety-Third General Court (2023-2024)

An Act enhancing access to abortion care.

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

- SECTION 1. Chapter 112 of the General Laws, as appearing in the 2020 Official Edition,
- 2 is hereby amended in section 12F by striking out, in lines 14 and 15, the words "have come in
- 3 contact with" and inserting in place thereof the following words:- be at risk of contracting; and
- 4 further amended by inserting after the word "diagnosis", in line 18, the following word:-,
- 5 prevention; and further amended by striking out the third paragraph.
- 6 SECTION 2. Said chapter 112, as so appearing, is hereby further amended in section 12I
- 7 by adding at the end thereof the following sentence:- No conscientious objection shall be valid if
- 8 an abortion is required to preserve the life of a pregnant person and no medical staff other than
- 9 the objector are available to perform or support the performance of the abortion.
- SECTION 3. Said chapter 112, as so appearing, is hereby further amended in section 12K
- by striking out the word "12R" and inserting in place thereof the following word:- 12R.4; and
- 12 further amended by adding the following definitions:-

13 "Abortion-related care", a medically appropriate service complementary to the 14 performance of an abortion. 15 "Provider", a licensed health care professional who, acting within their scope of practice, 16 may lawfully perform an abortion or provide abortion-related care. 17 "Provider facility", a structure in which a provider performs abortions or provides 18 abortion-related care. 19 SECTION 4. Said chapter 112, as so appearing, is hereby further amended in section 12L 20 by inserting after each instance of the word "abortion" the following words:- or abortion-related 21 care; and further amended by striking the word "is" and inserting in place thereof the word:- are. 22 SECTION 5. Said chapter 112, as so appearing, is hereby further amended in section 23 12M by striking the words "physician, physician assistant, nurse practitioner or nurse midwife" 24 and inserting in place thereof the following word:- provider. 25 SECTION 6. Said chapter 112, as so appearing and as amended by Chapter 127 of the 26 Acts of 2022, is hereby further amended in section 12N by striking the word "physician" in each 27 instance and inserting in place thereof the following word:- provider. 28 SECTION 7. Said chapter 112, as amended by Chapter 127 of the Acts of 2022, is hereby further amended in section $12N\frac{1}{2}$ by striking the word "physician" in each instance and inserting 29 30 in place thereof the following word:- provider. 31 SECTION 8. Section 12O of said chapter 112, as so appearing, is hereby repealed. 32 SECTION 9. Said chapter 112, as so appearing, is hereby further amended in section 12P

33

by striking the second sentence.

SECTION 10. Said chapter 112, as so appearing, is hereby further amended in section 12Q by striking the words "performed by a physician, physician assistant, certified nurse practitioner or certified nurse midwife".

SECTION 11. Said chapter 112, as so appearing, is hereby further amended by striking out section 12R and inserting in place thereof the following sections:-

Section 12R. A provider must obtain a pregnant person's written informed consent prior to performing an abortion in a multilingual form prescribed by the commissioner of the department of public health, and the pregnant person must execute said informed consent form prior to receiving an abortion, except: (1) in an emergency, when an abortion is required to preserve the health of the pregnant person, in which case the provider may perform the abortion without an executed informed consent form; or (2) when a pregnant person is incapacitated due to vegetative state, and said pregnant person was incapacitated prior to and at all times during the pregnancy, and another person serves as legally valid health care proxy for the pregnant person, in which case the health care proxy must execute the informed consent form. A pregnant person's signature on the consent form shall not be deemed invalid due to the pregnant person's age. No waiting period shall be imposed between the execution of the consent form and the performance of the abortion. Providers shall maintain executed informed consent forms for a period of time and in a manner consistent with retention of other medical records.

(b) The consent form and any other forms or related documents shall be confidential and shall not be released to any person other than the patient, the person whose consent is validly obtained pursuant to this section or any other applicable state or federal law, or the provider who performed the abortion, except by the patient's written informed consent or proper judicial order.

Section 12R.1. (a) No pregnant person shall be required, as a precondition to receiving health-related information, health services or medical care, to: (i) wait for any period of time, beyond the standard of care or as may be operationally necessary, after executing the informed consent form required by this chapter to initiate an abortion or abortion-related care; (ii) undergo an ultrasound inconsistent with the standard of care; (iii) review, see, or hear the results of an ultrasound; (iv) appear at a provider facility for purposes of receiving an abortion or abortion-related care more frequently or for a longer duration than is consistent with the standard of care; or (v) receive counseling or information in any format or medium that is medically inaccurate, medically unnecessary, or misleading.

- (b) Provider facilities shall not be required to: (i) affiliate in any way with, or be constructed within a specified distance of, a hospital, as defined in section 52 of chapter 111; (ii) construct or maintain medically unnecessary physical structures, sizes, or spaces; (iii) hire only providers with admitting privileges at a hospital, as defined in section 52 of chapter 111; or (iv) comply with any other medically unnecessary physical or operational standards or requirements. Provider facilities shall be required to comply or substantially comply with the licensure requirements for clinics providing ambulatory surgery, consistent with section 51 of chapter 111, only if the provider facility otherwise operates as a free standing ambulatory surgical center.
- (c) The attorney general shall enforce this section, provided that nothing herein shall preclude a private right of action asserting violations thereof. All actions must be commenced within ten years after the cause of action accrues.

Section 12R.2. (a) The department of public health shall publish on its website and in print copy a listing of provider facilities opting to be included on said listing. The listing shall be updated annually, or more frequently as required or requested by a provider or provider facility.

- (b) The department of public health shall engage in a culturally competent and linguistically diverse public education campaign to educate providers and the public about so-called crisis pregnancy centers and pregnancy resource centers, including without limitation the lack of medical services or licensed medical professionals at said centers and the availability of licensed medical and family planning services across the commonwealth.
- (c) The department of veterans services shall, in consultation with the department of public health, provide information to veterans residing in the commonwealth and their families regarding available abortion services and support for obtaining those services, including without limitation financial assistance provided pursuant to chapter 118E.

Section 12R.3. A person may not provide ultrasound services pertaining to a possible or actual pregnancy except under the supervision of a provider or other licensed health care professional who, acting within their scope of practice, provides medical care for people who are pregnant or may become pregnant.

Section 12R.4. A health care professional working in a school based health center shall keep confidential any abortion-related information or care provided to a patient at the center.