



April 2, 2021

ENGROSSED HOUSE BILL No. 1577

DIGEST OF HB 1577 (Updated March 31, 2021 3:43 pm - DI 104)

Citations Affected: IC 16-18; IC 16-34.

Synopsis: Abortion matters. Adds mental health providers to the list of persons who may not be required to participate in specified procedures and practices concerning abortion or aborted remains if the mental health provider objects to such procedures and practices on the basis of ethical, moral, or religious belief. Provides that an abortion inducing drug may not be dispensed, prescribed, or given to a woman after eight weeks of postfertilization age. Requires a physician to dispense the abortion inducing drug in person and have the pregnant woman consume the drug in the presence of the physician. Removes FDA guidelines from a provision concerning manufacturer instruction sheets and patient agreement forms pertaining to abortion inducing drugs. Requires an ultrasound image of a pregnant woman's fetus to be provided: (1) to a pregnant woman for her to keep; and (2) at no cost or charge to the pregnant woman; in the event of fetal ultrasound imaging. Requires certain information concerning the reversal of specified abortion inducing drugs to be provided to a pregnant woman in certain instances. Requires a specified report to identify the: (1)

(Continued next page)

Effective: July 1, 2021.

Mayfield, King, Davis

(SENATE SPONSORS — BROWN L, HOUCHIN, ROGERS, GASKILL)

January 14, 2021, read first time and referred to Committee on Public Health.
February 15, 2021, amended, reported — Do Pass.
February 17, 2021, read second time, ordered engrossed. Engrossed.
February 22, 2021, read third time, passed. Yeas 67, nays 29.

SENATE ACTION

March 8, 2021, read first time and referred to Committee on Health and Provider Services.
April 1, 2021, amended, reported favorably — Do Pass.

EH 1577—LS 7427/DI 123



Digest Continued

facility; and (2) city or town; where required information concerning an abortion was provided. Requires specified individuals to include, or to ensure the inclusion of, a copy of a pregnant woman's ultrasound report in the applicable patient file. Prohibits an abortion clinic from receiving an annual license renewal if ultrasound reports are not included in a pregnant woman's patient file. Provides that the written parental consent for purposes of abortion laws concerning an unemancipated pregnant woman less than 18 years of age must be notarized. Prohibits the state department of health from renewing an abortion clinic's license if noncompliance discovered during an annual inspection is not remedied. Prohibits the use of telemedicine to provide any abortion, including the writing or filling of a prescription for any purpose that is intended to result in an abortion. Defines certain terms. Makes conforming amendments.

EH 1577—LS 7427/DI 123



April 2, 2021

First Regular Session of the 122nd General Assembly (2021)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2020 Regular Session of the General Assembly.

ENGROSSED HOUSE BILL No. 1577

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

1 SECTION 1. IC 16-18-2-225.8 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 225.8. "Mental health
3 provider", for purposes of IC 16-36-1.5 and **IC 16-34-1-4**, has the
4 meaning set forth in IC 16-36-1.5-2.

5 SECTION 2. IC 16-18-2-267 IS AMENDED TO READ AS
6 FOLLOWS [EFFECTIVE JULY 1, 2021]: Sec. 267. "Parental
7 consent", for purposes of IC 16-34, means the **notarized** written
8 consent of the parent or legal guardian of an unemancipated pregnant
9 woman less than eighteen (18) years of age to the performance of an
10 abortion on the minor pregnant woman **or for the final disposition of**
11 **the aborted fetus by interment in compliance with IC 23-14-54 or**
12 **cremation through a licensee (as defined in IC 25-15-2-19) and in**
13 **compliance with IC 23-14-31.**

14 SECTION 3. IC 16-34-1-4, AS AMENDED BY P.L.72-2019,
15 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
16 JULY 1, 2021]: Sec. 4. No:
17 (1) physician;

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- 1 (2) nurse;
 2 (3) physician assistant;
 3 (4) pharmacist; ~~or~~
 4 (5) employee or member of the staff of a hospital or other facility
 5 in which an abortion may be performed; **or**
 6 **(6) mental health provider;**

7 shall be required to perform an abortion, to prescribe, administer, or
 8 dispense an abortion inducing drug, **to provide advice or counsel to**
 9 **a pregnant woman concerning medical procedures resulting in, or**
 10 **intended to result in, an abortion, or** to assist or participate in ~~the~~
 11 medical procedures resulting in, or intended to result in an abortion, **or**
 12 **to handle or dispose of aborted remains,** if that individual objects to
 13 such procedures on ethical, moral, or religious grounds.

14 SECTION 4. IC 16-34-2-1, AS AMENDED BY P.L.93-2019,
 15 SECTION 3, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 16 JULY 1, 2021]: Sec. 1. (a) Abortion shall in all instances be a criminal
 17 act, except when performed under the following circumstances:

18 (1) Except as prohibited in IC 16-34-4, during the first trimester
 19 of pregnancy for reasons based upon the professional, medical
 20 judgment of the pregnant woman's physician if:

21 (A) the abortion is performed by the physician;

22 (B) the woman submitting to the abortion has filed her consent
 23 with her physician. However, if in the judgment of the
 24 physician the abortion is necessary to preserve the life of the
 25 woman, her consent is not required; and

26 (C) the woman submitting to the abortion has filed with her
 27 physician the written consent of her parent or legal guardian
 28 if required under section 4 of this chapter.

29 However, an abortion inducing drug may not be dispensed,
 30 prescribed, administered, or otherwise given to a pregnant woman
 31 after ~~nine (9) weeks~~ **eight (8) weeks** of postfertilization age.
 32 ~~unless the Food and Drug Administration has approved the~~
 33 ~~abortion inducing drug to be used for abortions later than nine (9)~~
 34 ~~weeks of postfertilization age.~~ **A physician must dispense the**
 35 **abortion inducing drug in person and have the pregnant**
 36 **woman consume the drug in the presence of the physician.** A
 37 physician shall examine a pregnant woman in person before
 38 prescribing or dispensing an abortion inducing drug. ~~In~~
 39 ~~accordance with FDA guidelines;~~ The physician shall provide the
 40 pregnant woman with a copy of the manufacturer's instruction
 41 sheets and require that the pregnant woman sign the
 42 manufacturer's patient agreement form. **A physician shall also**



1 provide, orally and in writing, along with other discharge
 2 information, the following statement: "Some evidence
 3 suggests that the effects of Mifepristone may be avoided,
 4 ceased, or reversed if the second pill, Misoprostol, has not
 5 been taken. Immediately contact the following for more
 6 information at (insert applicable abortion inducing drug
 7 reversal Internet web site and corresponding hotline
 8 number)." The physician shall retain a copy of the signed patient
 9 agreement form, and the signed physician's agreement form
 10 required by the manufacturer, in the patient's file. As used in this
 11 subdivision, "in person" does not include the use of telehealth or
 12 telemedicine services.

13 (2) Except as prohibited by IC 16-34-4, after the first trimester of
 14 pregnancy and before the earlier of viability of the fetus or twenty
 15 (20) weeks of postfertilization age, for reasons based upon the
 16 professional, medical judgment of the pregnant woman's
 17 physician if:

18 (A) all the circumstances and provisions required for legal
 19 abortion during the first trimester are present and adhered to;
 20 and

21 (B) the abortion is performed in a hospital or ambulatory
 22 outpatient surgical center (as defined in IC 16-18-2-14).

23 (3) Except as provided in subsection (b) or as prohibited by
 24 IC 16-34-4, at the earlier of viability of the fetus or twenty (20)
 25 weeks of postfertilization age and any time after, for reasons
 26 based upon the professional, medical judgment of the pregnant
 27 woman's physician if:

28 (A) all the circumstances and provisions required for legal
 29 abortion before the earlier of viability of the fetus or twenty
 30 (20) weeks of postfertilization age are present and adhered to;

31 (B) the abortion is performed in compliance with section 3 of
 32 this chapter; and

33 (C) before the abortion the attending physician shall certify in
 34 writing to the hospital in which the abortion is to be
 35 performed, that in the attending physician's professional,
 36 medical judgment, after proper examination and review of the
 37 woman's history, the abortion is necessary to prevent a
 38 substantial permanent impairment of the life or physical health
 39 of the pregnant woman. All facts and reasons supporting the
 40 certification shall be set forth by the physician in writing and
 41 attached to the certificate.

42 (b) A person may not knowingly or intentionally perform a partial



1 birth abortion unless a physician reasonably believes that:

2 (1) performing the partial birth abortion is necessary to save the
3 mother's life; and

4 (2) no other medical procedure is sufficient to save the mother's
5 life.

6 (c) A person may not knowingly or intentionally perform a
7 dismemberment abortion unless reasonable medical judgment dictates
8 that performing the dismemberment abortion is necessary:

9 (1) to prevent any serious health risk to the mother; or

10 (2) to save the mother's life.

11 **(d) Telehealth and telemedicine may not be used to provide any**
12 **abortion, including the writing or filling of a prescription for any**
13 **purpose that is intended to result in an abortion.**

14 SECTION 5. IC 16-34-2-1.1, AS AMENDED BY P.L.77-2020,
15 SECTION 1, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
16 JULY 1, 2021]: Sec. 1.1. (a) An abortion shall not be performed except
17 with the voluntary and informed consent of the pregnant woman upon
18 whom the abortion is to be performed. Except in the case of a medical
19 emergency, consent to an abortion is voluntary and informed only if the
20 following conditions are met:

21 (1) At least eighteen (18) hours before the abortion and in the
22 private, not group, presence of the pregnant woman, the physician
23 who is to perform the abortion, the referring physician or a
24 physician assistant (as defined in IC 25-27.5-2-10), an advanced
25 practice registered nurse (as defined in IC 25-23-1-1(b)), or a
26 certified nurse midwife (as defined in IC 34-18-2-6.5) to whom
27 the responsibility has been delegated by the physician who is to
28 perform the abortion or the referring physician has informed the
29 pregnant woman orally and in writing of the following:

30 (A) The name of the physician performing the abortion, the
31 physician's medical license number, and an emergency
32 telephone number where the physician or the physician's
33 designee may be contacted on a twenty-four (24) hour a day,
34 seven (7) day a week basis.

35 (B) That follow-up care by the physician or the physician's
36 designee (if the designee is licensed under IC 25-22.5) is
37 available on an appropriate and timely basis when clinically
38 necessary.

39 (C) The nature of the proposed procedure or information
40 concerning the abortion inducing drug **that includes the**
41 **following statement: "Some evidence suggests that effects**
42 **of Mifepristone may be avoided, ceased, or reversed if the**



- 1 **second pill, Misoprostol, has not been taken. Immediately**
 2 **contact the following for more information at (insert**
 3 **applicable abortion inducing drug reversal Internet web**
 4 **site and corresponding hotline number)."**
 5 (D) Objective scientific information of the risks of and
 6 alternatives to the procedure or the use of an abortion inducing
 7 drug, including:
 8 (i) the risk of infection and hemorrhage;
 9 (ii) the potential danger to a subsequent pregnancy; and
 10 (iii) the potential danger of infertility.
 11 (E) That human physical life begins when a human ovum is
 12 fertilized by a human sperm.
 13 (F) The probable gestational age of the fetus at the time the
 14 abortion is to be performed, including:
 15 (i) a picture of a fetus;
 16 (ii) the dimensions of a fetus; and
 17 (iii) relevant information on the potential survival of an
 18 unborn fetus;
 19 at this stage of development.
 20 (G) That objective scientific information shows that a fetus
 21 can feel pain at or before twenty (20) weeks of postfertilization
 22 age.
 23 (H) The medical risks associated with carrying the fetus to
 24 term.
 25 (I) The availability of fetal ultrasound imaging and
 26 auscultation of fetal heart tone services to enable the pregnant
 27 woman to view the image and hear the heartbeat of the fetus
 28 and how to obtain access to these services.
 29 (J) That the pregnancy of a child less than fifteen (15) years of
 30 age may constitute child abuse under Indiana law if the act
 31 included an adult and must be reported to the department of
 32 child services or the local law enforcement agency under
 33 IC 31-33-5.
 34 (K) That Indiana does not allow a fetus to be aborted solely
 35 because of the fetus's race, color, national origin, ancestry, sex,
 36 or diagnosis or potential diagnosis of the fetus having Down
 37 syndrome or any other disability.
 38 (2) At least eighteen (18) hours before the abortion, the pregnant
 39 woman will be informed orally and in writing of the following:
 40 (A) That medical assistance benefits may be available for
 41 prenatal care, childbirth, and neonatal care from the county
 42 office of the division of family resources.



- 1 (B) That the father of the unborn fetus is legally required to
 2 assist in the support of the child. In the case of rape, the
 3 information required under this clause may be omitted.
- 4 (C) That adoption alternatives are available and that adoptive
 5 parents may legally pay the costs of prenatal care, childbirth,
 6 and neonatal care.
- 7 (D) That there are physical risks to the pregnant woman in
 8 having an abortion, both during the abortion procedure and
 9 after.
- 10 (E) That Indiana has enacted the safe haven law under
 11 IC 31-34-2.5.
- 12 (F) The:
- 13 (i) Internet web site address of the state department of
 14 health's web site; and
- 15 (ii) description of the information that will be provided on
 16 the web site and that are;
 17 described in section 1.5 of this chapter.
- 18 (G) For the facility in which the abortion is to be performed,
 19 an emergency telephone number that is available and
 20 answered on a twenty-four (24) hour a day, seven (7) day a
 21 week basis.
- 22 (H) On a form developed by the state department and as
 23 described in IC 16-34-3, that the pregnant woman has a right
 24 to determine the final disposition of the remains of the aborted
 25 fetus.
- 26 (I) On a form developed by the state department, that the
 27 pregnant woman has a right, after a surgical abortion, to:
- 28 (i) dispose of the remains of the aborted fetus by interment
 29 in compliance with IC 23-14-54, or cremation through a
 30 licensee (as defined in IC 25-15-2-19) and in compliance
 31 with IC 23-14-31; or
- 32 (ii) have the health care facility or abortion clinic dispose of
 33 the remains of the aborted fetus by interment in compliance
 34 with IC 23-14-54, or cremation through a licensee (as
 35 defined in IC 25-15-2-19) and in compliance with
 36 IC 23-14-31, and ask which method of disposition will be
 37 used by the health care facility or abortion clinic.
- 38 (J) On a form developed by the state department:
- 39 (i) that a pregnant woman, after an abortion induced by an
 40 abortion inducing drug, will expel an aborted fetus; and
- 41 (ii) the disposition policy of the health care facility or the
 42 abortion clinic concerning the disposition of the aborted



1 fetus. The disposition policy must allow the pregnant
 2 woman to return the aborted fetus to the health care facility
 3 or abortion clinic for disposition by interment in compliance
 4 with IC 23-14-54, or cremation through a licensee (as
 5 defined in IC 25-15-2-19) and in compliance with
 6 IC 23-14-31.

7 (K) On a form developed by the state department, information
 8 concerning any counseling that is available to a pregnant
 9 woman after having an abortion.

10 The state department shall develop and distribute the forms
 11 required by clauses (H) through (K).

12 (3) The pregnant woman certifies in writing, on a form developed
 13 by the state department, before the abortion is performed, that:

14 (A) the information required by subdivisions (1) and (2) has
 15 been provided to the pregnant woman;

16 (B) the pregnant woman has been offered by the provider the
 17 opportunity to view the fetal ultrasound imaging and hear the
 18 auscultation of the fetal heart tone if the fetal heart tone is
 19 audible and that the woman has:

20 (i) viewed or refused to view the offered fetal ultrasound
 21 imaging; and

22 (ii) listened to or refused to listen to the offered auscultation
 23 of the fetal heart tone if the fetal heart tone is audible; and

24 (C) the pregnant woman has been given a written copy of the
 25 printed materials described in section 1.5 of this chapter.

26 (4) At least eighteen (18) hours before the abortion and in the
 27 presence of the pregnant woman, the physician who is to perform
 28 the abortion, the referring physician or a physician assistant (as
 29 defined in IC 25-27.5-2-10), an advanced practice registered
 30 nurse (as defined in IC 25-23-1-1(b)), or a certified nurse midwife
 31 (as defined in IC 34-18-2-6.5) to whom the responsibility has
 32 been delegated by the physician who is to perform the abortion or
 33 the referring physician has provided the pregnant woman with a
 34 color copy of the informed consent brochure described in section
 35 1.5 of this chapter by printing the informed consent brochure from
 36 the state department's Internet web site and including the
 37 following information on the back cover of the brochure:

38 (A) The name of the physician performing the abortion and the
 39 physician's medical license number.

40 (B) An emergency telephone number where the physician or
 41 the physician's designee may be contacted twenty-four (24)
 42 hours a day, seven (7) days a week.



- 1 (C) A statement that follow-up care by the physician or the
 2 physician's designee who is licensed under IC 25-22.5 is
 3 available on an appropriate and timely basis when clinically
 4 necessary.
- 5 (5) At least eighteen (18) hours before an abortion is performed
 6 and at the same time that the pregnant woman receives the
 7 information required by subdivision (1), the provider shall
 8 perform, and the pregnant woman shall view, the fetal ultrasound
 9 imaging and hear the auscultation of the fetal heart tone if the
 10 fetal heart tone is audible unless the pregnant woman certifies in
 11 writing, on a form developed by the state department, before the
 12 abortion is performed, that the pregnant woman:
- 13 (A) does not want to view the fetal ultrasound imaging; and
 14 (B) does not want to listen to the auscultation of the fetal heart
 15 tone if the fetal heart tone is audible.
- 16 **A pregnant woman must be advised, prior to the pregnant**
 17 **woman's decision concerning fetal ultrasound imaging, that**
 18 **an ultrasound image of the fetus will be provided to the**
 19 **pregnant woman to keep at no charge to the pregnant woman**
 20 **if the fetal ultrasound is performed.**
- 21 (b) This subsection applies to a pregnant woman whose unborn
 22 child has been diagnosed with a lethal fetal anomaly. The requirements
 23 of this subsection are in addition to the other requirements of this
 24 section. At least eighteen (18) hours before an abortion is performed on
 25 the pregnant woman, the physician who will perform the abortion shall:
- 26 (1) orally and in person, inform the pregnant woman of the
 27 availability of perinatal hospice services; and
 28 (2) provide the pregnant woman copies of the perinatal hospice
 29 brochure developed by the state department under IC 16-25-4.5-4
 30 and the list of perinatal hospice providers and programs
 31 developed under IC 16-25-4.5-5, by printing the perinatal hospice
 32 brochure and list of perinatal hospice providers from the state
 33 department's Internet web site.
- 34 (c) If a pregnant woman described in subsection (b) chooses to have
 35 an abortion rather than continuing the pregnancy in perinatal hospice
 36 care, the pregnant woman shall certify in writing, on a form developed
 37 by the state department under IC 16-25-4.5-6, at least eighteen (18)
 38 hours before the abortion is performed, that the pregnant woman has
 39 been provided the information described in subsection (b) in the
 40 manner required by subsection (b).
- 41 **(d) For any abortion performed under this article, the physician**
 42 **who is to perform the abortion, the referring physician or a**



1 **physician assistant (as defined in IC 25-27.5-2-10), an advanced**
 2 **practice registered nurse (as defined in IC 25-23-1-1(b)), or a**
 3 **certified nurse midwife (as defined in IC 34-18-2-6.5) to whom the**
 4 **responsibility has been delegated by the physician who is to**
 5 **perform the abortion or the referring physician shall include, or**
 6 **ensure the inclusion of, a copy of a pregnant woman's ultrasound**
 7 **report in the pregnant woman's patient file.**

8 SECTION 6. IC 16-34-2-4, AS AMENDED BY P.L.173-2017,
 9 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
 10 JULY 1, 2021]: Sec. 4. (a) No physician shall perform an abortion on
 11 an unemancipated pregnant minor less than eighteen (18) years of age
 12 without first having obtained from one (1) of the parents, a legal
 13 guardian, or a custodian accompanying the unemancipated pregnant
 14 minor:

- 15 (1) the **notarized** written consent of the parent, legal guardian, or
 16 custodian of the unemancipated pregnant minor;
 17 (2) government issued proof of identification of the parent or the
 18 legal guardian or custodian of the unemancipated pregnant minor;
 19 and
 20 (3) some evidence, which may include identification or other
 21 written documentation that provides an articulable basis for a
 22 reasonably prudent person to believe that the person is the parent
 23 or legal guardian or custodian of the unemancipated pregnant
 24 minor.

25 The physician shall keep records of the documents required under this
 26 subsection in the unemancipated pregnant minor's medical file for at
 27 least seven (7) years.

28 (b) A minor:

- 29 (1) who objects to having to obtain the written consent of her
 30 parent or legal guardian or custodian under this section; or
 31 (2) whose parent or legal guardian or custodian refuses to consent
 32 to an abortion;

33 may petition, on her own behalf or by next friend, the juvenile court in
 34 the county in which the pregnant minor resides or in which the abortion
 35 is to be performed, for a waiver of the parental consent requirement
 36 under subsection (a) and the parental notification requirement under
 37 subsection (d). A next friend may not be a physician or provider of
 38 abortion services, representative of the physician or provider, or other
 39 person that may receive a direct financial benefit from the performance
 40 of an abortion.

41 (c) A physician who feels that compliance with the parental consent
 42 requirement in subsection (a) would have an adverse effect on the



1 welfare of the pregnant minor or on her pregnancy may petition the
2 juvenile court within twenty-four (24) hours of the abortion request for
3 a waiver of the parental consent requirement under subsection (a) and
4 the parental notification requirement under subsection (d).

5 (d) Unless the juvenile court finds that it is in the best interests of
6 an unemancipated pregnant minor to obtain an abortion without
7 parental notification following a hearing on a petition filed under
8 subsection (b) or (c), a parent, legal guardian, or custodian of a
9 pregnant unemancipated minor is entitled to receive notice of the
10 emancipated minor's intent to obtain an abortion before the abortion is
11 performed on the unemancipated pregnant minor. The attorney
12 representing the unemancipated pregnant minor shall serve the notice
13 required by this subsection by certified mail or by personal service and
14 provide the court with documentation of the attorney's good faith effort
15 to serve the notice, including any return receipt for a certified mailing.
16 The court shall retain the documentation provided in the confidential
17 records of the waiver proceedings held under this section.

18 (e) The juvenile court must rule on a petition filed by a pregnant
19 minor under subsection (b) or by her physician under subsection (c)
20 within forty-eight (48) hours of the filing of the petition. Before ruling
21 on the petition, the court shall consider the concerns expressed by the
22 pregnant minor and her physician. The requirement of parental consent
23 under this section shall be waived by the juvenile court if the court
24 finds that the minor is mature enough to make the abortion decision
25 independently or that an abortion would be in the minor's best interests.
26 The juvenile court shall waive the requirement of parental notification
27 under subsection (d) if the court finds that obtaining an abortion
28 without parental notification is in the best interests of the
29 unemancipated pregnant minor. If the juvenile court does not find that
30 obtaining an abortion without parental notification is in the best
31 interests of the unemancipated pregnant minor, the court shall, subject
32 to an appeal under subsection (g), order the attorney representing the
33 unemancipated pregnant minor to serve the notice required under
34 subsection (d).

35 (f) Unless the juvenile court finds that the pregnant minor is already
36 represented by an attorney, the juvenile court shall appoint an attorney
37 to represent the pregnant minor in a waiver proceeding brought by the
38 minor under subsection (b) and on any appeals. The cost of legal
39 representation appointed for the minor under this section shall be paid
40 by the county.

41 (g) A minor or the minor's physician who desires to appeal an
42 adverse judgment of the juvenile court in a waiver proceeding under



1 subsection (b) or (c) is entitled to an expedited appeal, under rules to
2 be adopted by the supreme court.

3 (h) All records of the juvenile court and of the supreme court or the
4 court of appeals that are made as a result of proceedings conducted
5 under this section are confidential.

6 (i) A minor who initiates legal proceedings under this section is
7 exempt from the payment of filing fees.

8 (j) This section does not apply where there is an emergency need for
9 a medical procedure to be performed to avert the pregnant minor's
10 death or a substantial and irreversible impairment of a major bodily
11 function of the pregnant minor, and the attending physician certifies
12 this in writing.

13 (k) A physician receiving parental consent under subsection (a)
14 shall execute an affidavit for inclusion in the unemancipated pregnant
15 minor's medical record. The affidavit must contain the following
16 information:

17 (1) The physician's name.

18 (2) Certification that, to the physician's best information and
19 belief, a reasonable person under similar circumstances would
20 rely on the information provided by the unemancipated pregnant
21 minor and the unemancipated pregnant minor's parent or legal
22 guardian or custodian as sufficient evidence of identity and
23 relationship.

24 (3) The physician's signature.

25 (l) A person who, with intent to avoid the parental notification
26 requirements described in subsection (a), falsely claims to be the parent
27 or legal guardian or custodian of an unemancipated pregnant minor by:

28 (1) making a material misstatement while purportedly providing
29 the written consent described in subsection (a)(1); or

30 (2) providing false or fraudulent identification to meet the
31 requirement described in subsection (a)(2);

32 commits a Level 6 felony.

33 SECTION 7. IC 16-34-2-5, AS AMENDED BY P.L.205-2018,
34 SECTION 10, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
35 JULY 1, 2021]: Sec. 5. (a) Every health care provider who performs a
36 surgical abortion or provides, prescribes, administers, or dispenses an
37 abortion inducing drug for the purposes of inducing an abortion shall
38 report the performance of the abortion or the provision, prescribing,
39 administration, or dispensing of an abortion inducing drug on a form
40 drafted by the state department, the purpose and function of which shall
41 be the improvement of maternal health and life through the compilation
42 of relevant maternal life and health factors and data, and a further



1 purpose and function shall be to monitor all abortions performed in
 2 Indiana to assure the abortions are done only under the authorized
 3 provisions of the law. For each abortion performed and abortion
 4 inducing drug provided, prescribed, administered, or dispensed, the
 5 report shall include, among other things, the following:

- 6 (1) The age of the patient.
 7 (2) Whether a waiver of consent under section 4 of this chapter
 8 was obtained.
 9 (3) Whether a waiver of notification under section 4 of this
 10 chapter was obtained.
 11 (4) The date and location, **including the facility name and city**
 12 **or town, where the:**
 13 **(A) pregnant woman:**
 14 **(i) provided consent; and**
 15 **(ii) received all information;**
 16 **required under section 1.1 of this chapter; and**
 17 **(B) the abortion was performed or the abortion inducing drug**
 18 **was provided, prescribed, administered, or dispensed.**
 19 (5) The health care provider's full name and address, including the
 20 name of the physicians performing the abortion or providing,
 21 prescribing, administering, or dispensing the abortion inducing
 22 drug.
 23 (6) The city and county where the pregnancy termination
 24 occurred.
 25 (7) The age of the father, or the approximate age of the father if
 26 the father's age is unknown.
 27 (8) The patient's county and state of residence.
 28 (9) The marital status of the patient.
 29 (10) The educational level of the patient.
 30 (11) The race of the patient.
 31 (12) The ethnicity of the patient.
 32 (13) The number of the patient's previous live births.
 33 (14) The number of the patient's deceased children.
 34 (15) The number of the patient's spontaneous pregnancy
 35 terminations.
 36 (16) The number of the patient's previous induced terminations.
 37 (17) The date of the patient's last menses.
 38 (18) The physician's determination of the gestation of the fetus in
 39 weeks.
 40 (19) Whether the patient indicated that the patient was seeking an
 41 abortion as a result of being:
 42 (A) abused;



- 1 (B) coerced;
 2 (C) harassed; or
 3 (D) trafficked.
- 4 (20) The following information concerning the abortion or the
 5 provision, prescribing, administration, or dispensing of the
 6 abortion inducing drug:
 7 (A) The postfertilization age of the fetus (in weeks).
 8 (B) The manner in which the postfertilization age was
 9 determined.
 10 (C) The gender of the fetus, if detectable.
 11 (D) Whether the fetus has been diagnosed with or has a
 12 potential diagnosis of having Down syndrome or any other
 13 disability.
 14 (E) If after the earlier of the time the fetus obtains viability or
 15 the time the postfertilization age of the fetus is at least twenty
 16 (20) weeks, the medical reason for the performance of the
 17 abortion or the provision, prescribing, administration, or
 18 dispensing of the abortion inducing drug.
- 19 (21) For a surgical abortion, the medical procedure used for the
 20 abortion and, if the fetus was viable or had a postfertilization age
 21 of at least twenty (20) weeks:
 22 (A) whether the procedure, in the reasonable judgment of the
 23 health care provider, gave the fetus the best opportunity to
 24 survive;
 25 (B) the basis for the determination that the pregnant woman
 26 had a condition described in this chapter that required the
 27 abortion to avert the death of or serious impairment to the
 28 pregnant woman; and
 29 (C) the name of the second doctor present, as required under
 30 IC 16-34-2-3(a)(3).
- 31 (22) For a nonsurgical abortion, the precise drugs provided,
 32 prescribed, administered, or dispensed, and the means of delivery
 33 of the drugs to the patient.
- 34 (23) For a nonsurgical abortion, that the manufacturer's
 35 instructions were provided to the patient and that the patient
 36 signed the patient agreement.
- 37 (24) For an early pre-viability termination, the medical indication
 38 by diagnosis code for the fetus and the mother.
- 39 (25) The mother's obstetrical history, including dates of other
 40 abortions, if any.
- 41 (26) Any preexisting medical conditions of the patient that may
 42 complicate the abortion.



1 (27) The results of pathological examinations if performed.

2 (28) For a surgical abortion, whether the fetus was delivered
3 alive, and if so, how long the fetus lived.

4 (29) Records of all maternal deaths occurring at the location
5 where the abortion was performed or the abortion inducing drug
6 was provided, prescribed, administered, or dispensed.

7 (30) The date the form was transmitted to the state department
8 and, if applicable, separately to the department of child services.

9 (b) The health care provider shall complete the form provided for in
10 subsection (a) and shall transmit the completed form to the state
11 department, in the manner specified on the form, within thirty (30) days
12 after the date of each abortion. However, if an abortion is for a female
13 who is less than sixteen (16) years of age, the health care provider shall
14 transmit the form to the state department of health and separately to the
15 department of child services within three (3) days after the abortion is
16 performed.

17 (c) The dates supplied on the form may not be redacted for any
18 reason before the form is transmitted as provided in this section.

19 (d) Each failure to complete or timely transmit a form, as required
20 under this section, for each abortion performed or abortion inducing
21 drug that was provided, prescribed, administered, or dispensed, is a
22 Class B misdemeanor.

23 (e) Not later than June 30 of each year, the state department shall
24 compile a public report providing the following:

25 (1) Statistics for the previous calendar year from the information
26 submitted under this section.

27 (2) Statistics for previous calendar years compiled by the state
28 department under this subsection, with updated information for
29 the calendar year that was submitted to the state department after
30 the compilation of the statistics.

31 The state department shall ensure that no identifying information of a
32 pregnant woman is contained in the report.

33 (f) The state department shall:

34 (1) summarize aggregate data from all data submitted under this
35 section; and

36 (2) submit the data, before July 1 of each year, to the United
37 States Centers for Disease Control and Prevention for its inclusion
38 in the annual Vital Statistics Report.

39 SECTION 8. IC 16-34-5 IS ADDED TO THE INDIANA CODE AS
40 A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY
41 1, 2021]:

42 **Chapter 5. Miscellaneous Provisions**



1 **Sec. 1. (a) The state department shall consider the results of an**
2 **abortion clinic inspection when making a determination**
3 **concerning the renewal of an abortion clinic license.**

4 **(b) The state department may not renew the license of an**
5 **abortion clinic until any noncompliance discovered during the**
6 **course of an inspection is remedied in a manner prescribed by the**
7 **state department under 410 IAC 26-2-8.**

8 **Sec. 2. (a) During the course of an abortion clinic's annual**
9 **inspection, the state department shall randomly select and review**
10 **patient files to ensure compliance with inspection form**
11 **requirements and IC 16-34-2-1.1(d). The number of files selected**
12 **and reviewed under this subsection shall be consistent with**
13 **applicable administrative state department provisions concerning**
14 **patient file inspections.**

15 **(b) An abortion clinic's failure to comply with IC 16-34-2-1.1(d)**
16 **shall constitute an inspection violation for purposes of section 1(b)**
17 **of this chapter.**



COMMITTEE REPORT

Mr. Speaker: Your Committee on Public Health, to which was referred House Bill 1577, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

Replace the effective dates in SECTIONS 1 through 9 with "[EFFECTIVE JULY 1, 2021]".

Page 2, line 11, delete "fetus." and insert **"fetus by interment in compliance with IC 23-14-54 or cremation through a licensee (as defined in IC 25-15-2-19) and in compliance with IC 23-14-31."**

Page 3, line 3, after "performed;" insert **"or"**.

Page 3, line 4, delete "provider; or" and insert **"provider;"**.

Page 3, delete lines 5 through 6.

Page 3, line 32, strike "nine (9) weeks" and insert **"eight (8) weeks"**.

Page 3, line 35, after "age." insert **"A physician must dispense the abortion inducing drug in person and have the pregnant woman consume the drug in the presence of the physician."**

Page 3, line 40, after "form." insert **"A physician shall also provide, orally and in writing, along with other applicable information, the following statement: "Some evidence suggests that the effects of an abortion inducing drug can be avoided, ceased, or reversed if the second dose of the abortion inducing drug has not been taken. (Insert applicable abortion inducing drug reversal web site and corresponding hotline number)."**

Page 5, line 27, delete "drug. Information provided" and insert **"drug that includes the following statement: "Some evidence suggests that mifepristone effects may be avoided, ceased, or reversed if the misoprostol has not been taken." (Insert applicable abortion inducing drug reversal Internet web site and corresponding hotline number)."**

Page 5, delete lines 28 through 35.

Page 16, delete lines 9 through 14 and insert **"used to provide any abortion, including the writing or filling of a prescription for any purpose that is intended to result in an abortion."**

Re-number all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1577 as introduced.)

BARRETT

EH 1577—LS 7427/DI 123



Committee Vote: yeas 9, nays 3.

COMMITTEE REPORT

Madam President: The Senate Committee on Health and Provider Services, to which was referred House Bill No. 1577, has had the same under consideration and begs leave to report the same back to the Senate with the recommendation that said bill be AMENDED as follows:

Page 3, line 1, delete "applicable" and insert "**discharge**".

Page 3, line 3, delete "an abortion inducing drug can" and insert "**Mifepristone may**".

Page 3, line 4, delete "dose of the abortion" and insert "**pill, Misoprostol,**".

Page 3, line 5, delete "inducing drug".

Page 3, line 5, delete "(Insert" and insert "**Immediately contact the following for more information at (insert**".

Page 3, line 6, after "reversal" insert "**Internet**".

Page 3, line 7, after "number)." insert """".

Page 4, between lines 9 and 10, begin a new paragraph and insert:

"(d) Telehealth and telemedicine may not be used to provide any abortion, including the writing or filling of a prescription for any purpose that is intended to result in an abortion."

Page 4, line 38, delete "mifepristone effects" and insert "**effects of Mifespristone**".

Page 4, line 39, delete "misoprostol" and insert "**second pill, Misoprostol,**".

Page 4, line 39, delete "taken." (Insert" and insert "**taken. Immediately contact the following for more information at (insert**".

Page 4, line 41, after "number)." insert """".

Page 15, line 5, after "with" insert "**inspection form requirements and**".

Page 15, delete lines 12 through 17.

Renumber all SECTIONS consecutively.

and when so amended that said bill do pass.

(Reference is to HB 1577 as printed February 15, 2021.)



CHARBONNEAU, Chairperson

Committee Vote: Yeas 7, Nays 4.

