As Passed by the Senate

131st General Assembly

Regular Session 2015-2016

Sub. S. B. No. 254

Senator Uecker

Cosponsors: Senators Hite, Jordan, Burke, Beagle, Coley, Faber, Eklund, Hackett, Hottinger, Hughes, Oelslager, Patton

A BILL

То	amend sections 2317.56, 3701.341, and 3701.79	1
	and to enact sections 3728.01, 3728.02, 3728.03,	2
	3728.04, 3728.05, 3728.09, 3728.10, 3728.11,	3
	3728.12, 3728.13, 3728.14, 3728.15, 3728.95,	4
	3728.99, and 4717.271 of the Revised Code	5
	regarding final disposition of fetal remains	6
	from surgical abortions.	7

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 2317.56, 3701.341, and 3701.79 be	8
amended and sections 3728.01, 3728.02, 3728.03, 3728.04,	9
3728.05, 3728.09, 3728.10, 3728.11, 3728.12, 3728.13, 3728.14,	10
3728.15, 3728.95, 3728.99, and 4717.271 of the Revised Code be	11
enacted to read as follows:	12
Sec. 2317.56. (A) As used in this section:	13
(1) "Medical emergency" has the same meaning as in section	14
2919.16 of the Revised Code.	15
(2) "Medical necessity" means a medical condition of a	16
pregnant woman that, in the reasonable judgment of the physician	17

who is accending the woman, so complicates the pregnancy that it	10
necessitates the immediate performance or inducement of an	19
abortion.	20
(3) "Probable gestational age of the embryo or fetus"	21
means the gestational age that, in the judgment of a physician,	22
is, with reasonable probability, the gestational age of the	23
embryo or fetus at the time that the physician informs a	24
pregnant woman pursuant to division (B)(1)(b) of this section.	25
(B) Except when there is a medical emergency or medical	26
necessity, an abortion shall be performed or induced only if all	27
of the following conditions are satisfied:	28
(1) At least twenty-four hours prior to the performance or	29
inducement of the abortion, a physician meets with the pregnant	30
woman in person in an individual, private setting and gives her	31
an adequate opportunity to ask questions about the abortion that	32
will be performed or induced. At this meeting, the physician	33
shall inform the pregnant woman, verbally or, if she is hearing	34
impaired, by other means of communication, of all of the	35
following:	36
(a) The nature and purpose of the particular abortion	37
procedure to be used and the medical risks associated with that	38
procedure;	39
(b) The probable gestational age of the embryo or fetus;	40
(c) The medical risks associated with the pregnant woman	41
carrying the pregnancy to term.	42
The meeting need not occur at the facility where the	43
abortion is to be performed or induced, and the physician	44
involved in the meeting need not be affiliated with that	45
facility or with the physician who is scheduled to perform or	46

74

75

induce the abortion. 47 (2) At least twenty-four hours prior to the performance or 48 inducement of the abortion, the physician who is to perform or 49 induce the abortion or the physician's agent does each of the 50 following in person, by telephone, by certified mail, return 51 receipt requested, or by regular mail evidenced by a certificate 52 of mailing: 53 (a) Inform the pregnant woman of the name of the physician 54 who is scheduled to perform or induce the abortion; 55 (b) Give the pregnant woman copies of the published 56 materials described in division (C) of this section; 57 (c) Inform the pregnant woman that the materials given 58 pursuant to division (B)(2)(b) of this section are published by 59 the state and that they describe the embryo or fetus and list 60 agencies that offer alternatives to abortion. The pregnant woman 61 may choose to examine or not to examine the materials. A 62 physician or an agent of a physician may choose to be 63 disassociated from the materials and may choose to comment or 64 not comment on the materials. 65 (3) If it has been determined that the unborn human 66 individual the pregnant woman is carrying has a detectable 67 heartbeat, the physician who is to perform or induce the 68 abortion shall comply with the informed consent requirements in 69 70 section 2919.192 of the Revised Code in addition to complying with the informed consent requirements in divisions (B)(1), (2), 71 (4), and (5) of this section. 72

(4) Prior to the performance or inducement of the

abortion, the pregnant woman signs a form consenting to the

abortion and certifies both all of the following on that form:

104

(a) She has received the information and materials	76
described in divisions (B)(1) and (2) of this section, and her	77
questions about the abortion that will be performed or induced	78
have been answered in a satisfactory manner.	79
(b) She consents to the particular abortion voluntarily,	80
knowingly, intelligently, and without coercion by any person,	81
and she is not under the influence of any drug of abuse or	82
alcohol.	83
(c) If the abortion will be performed or induced	84
surgically and she desires to exercise the rights under section	85
3728.03 of the Revised Code, she has completed the disposition	86
<u>determination under section 3728.04 of the Revised Code.</u>	87
The form shall contain the name and contact information of	88
the physician who provided to the pregnant woman the information	89
described in division (B)(1) of this section.	90
(5) Prior to the performance or inducement of the	91
abortion, the physician who is scheduled to perform or induce	92
the abortion or the physician's agent receives a copy of the	93
pregnant woman's signed form on which she consents to the	94
abortion and that includes the certification required by	95
division (B)(4) of this section.	96
(C) The department of health shall publish in English and	97
in Spanish, in a typeface large enough to be clearly legible,	98
and in an easily comprehensible format, the following materials	99
on the department's web site:	100
(1) Materials that inform the pregnant woman about family	101
planning information, of publicly funded agencies that are	102
available to assist in family planning, and of public and	103
avarrable to abothe in ramitly pramming, and or public and	103

private agencies and services that are available to assist her

through the pregnancy, upon childbirth, and while the child is 105 dependent, including, but not limited to, adoption agencies. The 106 materials shall be geographically indexed; include a 107 comprehensive list of the available agencies, a description of 108 the services offered by the agencies, and the telephone numbers 109 and addresses of the agencies; and inform the pregnant woman 110 about available medical assistance benefits for prenatal care, 111 childbirth, and neonatal care and about the support obligations 112 of the father of a child who is born alive. The department shall 113 ensure that the materials described in division (C)(1) of this 114 section are comprehensive and do not directly or indirectly 115 promote, exclude, or discourage the use of any agency or service 116 described in this division. 117

(2) Materials that inform the pregnant woman of the 118 probable anatomical and physiological characteristics of the 119 zygote, blastocyte, embryo, or fetus at two-week gestational 120 increments for the first sixteen weeks of pregnancy and at four-121 week gestational increments from the seventeenth week of 122 pregnancy to full term, including any relevant information 123 regarding the time at which the fetus possibly would be viable. 124 The department shall cause these materials to be published only 125 after it consults with the Ohio state medical association and 126 the Ohio section of the American college of obstetricians and 127 gynecologists relative to the probable anatomical and 128 physiological characteristics of a zygote, blastocyte, embryo, 129 or fetus at the various gestational increments. The materials 130 shall use language that is understandable by the average person 131 who is not medically trained, shall be objective and 132 nonjudgmental, and shall include only accurate scientific 133 information about the zygote, blastocyte, embryo, or fetus at 134 the various gestational increments. If the materials use a 135

pictorial, photographic, or other depiction to provide	136
information regarding the zygote, blastocyte, embryo, or fetus,	137
the materials shall include, in a conspicuous manner, a scale or	138
other explanation that is understandable by the average person	139
and that can be used to determine the actual size of the zygote,	140
blastocyte, embryo, or fetus at a particular gestational	141
increment as contrasted with the depicted size of the zygote,	142
blastocyte, embryo, or fetus at that gestational increment.	143

- (D) Upon the submission of a request to the department of
 health by any person, hospital, physician, or medical facility

 for one copy of the materials published in accordance with

 division (C) of this section, the department shall make the
 requested copy of the materials available to the person,

 hospital, physician, or medical facility that requested the
 copy.
- (E) If a medical emergency or medical necessity compels 151 the performance or inducement of an abortion, the physician who 152 will perform or induce the abortion, prior to its performance or 153 inducement if possible, shall inform the pregnant woman of the 154 medical indications supporting the physician's judgment that an 155 immediate abortion is necessary. Any physician who performs or 156 induces an abortion without the prior satisfaction of the 157 conditions specified in division (B) of this section because of 158 a medical emergency or medical necessity shall enter the reasons 159 for the conclusion that a medical emergency or medical necessity 160 exists in the medical record of the pregnant woman. 161
- (F) If the conditions specified in division (B) of this

 section are satisfied, consent to an abortion shall be presumed

 to be valid and effective.

 162
 - (G) The performance or inducement of an abortion without

192

193

194

the prior satisfaction of the conditions specified in division	166
(B) of this section does not constitute, and shall not be	167
construed as constituting, a violation of division (A) of	168
section 2919.12 of the Revised Code. The failure of a physician	169
to satisfy the conditions of division (B) of this section prior	170
to performing or inducing an abortion upon a pregnant woman may	171
be the basis of both of the following:	172
(1) A civil action for compensatory and exemplary damages	173
as described in division (H) of this section;	174
(2) Disciplinary action under section 4731.22 of the	175
Revised Code.	176
(H)(1) Subject to divisions (H)(2) and (3) of this	177
section, any physician who performs or induces an abortion with	178
actual knowledge that the conditions specified in division (B)	179
of this section have not been satisfied or with a heedless	180
indifference as to whether those conditions have been satisfied	181
is liable in compensatory and exemplary damages in a civil	182
action to any person, or the representative of the estate of any	183
person, who sustains injury, death, or loss to person or	184
property as a result of the failure to satisfy those conditions.	185
In the civil action, the court additionally may enter any	186
injunctive or other equitable relief that it considers	187
appropriate.	188
(2) The following shall be affirmative defenses in a civil	189
action authorized by division (H)(1) of this section:	190

(a) The physician performed or induced the abortion under

(b) The physician made a good faith effort to satisfy the

the circumstances described in division (E) of this section.

conditions specified in division (B) of this section.

(3) An employer or other principal is not liable in	195
damages in a civil action authorized by division (H)(1) of this	196
section on the basis of the doctrine of respondeat superior	197
unless either of the following applies:	198
(a) The employer or other principal had actual knowledge	199
or, by the exercise of reasonable diligence, should have known	200
that an employee or agent performed or induced an abortion with	201
actual knowledge that the conditions specified in division (B)	202
of this section had not been satisfied or with a heedless	203
indifference as to whether those conditions had been satisfied.	204
(b) The employer or other principal negligently failed to	205
secure the compliance of an employee or agent with division (B)	206
of this section.	207
(4) Notwithstanding division (E) of section 2919.12 of the	208
Revised Code, the civil action authorized by division (H)(1) of	209
this section shall be the exclusive civil remedy for persons, or	210
the representatives of estates of persons, who allegedly sustain	211
injury, death, or loss to person or property as a result of a	212
failure to satisfy the conditions specified in division (B) of	213
this section.	214
(I) The department of job and family services shall	215
prepare and conduct a public information program to inform women	216
of all available governmental programs and agencies that provide	217
services or assistance for family planning, prenatal care, child	218
care, or alternatives to abortion.	219
Sec. 3701.341. (A) The director of health, pursuant to	220
Chapter 119. and consistent with Chapter 3728. and section	221
2317.56 of the Revised Code, shall adopt rules relating to	222
abortions and the following subjects:	223

(1) Post-abortion procedures to protect the health of the	224
pregnant woman;	225
(2) Pathological reports;	226
(3) Humane disposition of the product of human conception;	227
(4) Counseling.	228
(B) The director of health shall implement the rules and	229
shall apply to the court of common pleas for temporary or	230
permanent injunctions restraining a violation or threatened	231
violation of the rules. This action is an additional remedy not	232
dependent on the adequacy of the remedy at law.	233
Sec. 3701.79. (A) As used in this section:	234
(1) "Abortion" has the same meaning as in section 2919.11	235
of the Revised Code.	236
(2) "Abortion report" means a form completed pursuant to	237
division (C) of this section.	238
(3) "Ambulatory surgical facility" has the same meaning as	239
in section 3702.30 of the Revised Code.	240
(4) "Department" means the department of health.	241
(5) "Hospital" means any building, structure, institution,	242
or place devoted primarily to the maintenance and operation of	243
facilities for the diagnosis, treatment, and medical or surgical	244
care for three or more unrelated individuals suffering from	245
illness, disease, injury, or deformity, and regularly making	246
available at least clinical laboratory services, diagnostic x-	247
ray services, treatment facilities for surgery or obstetrical	248
care, or other definitive medical treatment. "Hospital" does not	249
include a "home" as defined in section 3721.01 of the Revised	250

Code.	251
(6) "Physician's office" means an office or portion of an	252
office that is used to provide medical or surgical services to	253
the physician's patients. "Physician's office" does not mean an	254
ambulatory surgical facility, a hospital, or a hospital	255
emergency department.	256
(7) "Postabortion care" means care given after the uterus	257
has been evacuated by abortion.	258
(B) The department shall be responsible for collecting and	259
collating abortion data reported to the department as required	260
by this section.	261
(C) The attending physician shall complete an individual	262
abortion report for each abortion the physician performs upon a	263
woman. The report shall be confidential and shall not contain	264
the woman's name. The report shall include, but is not limited	265
to, all of the following, insofar as the patient makes the data	266
available that is not within the physician's knowledge:	267
(1) Patient number;	268
(2) The name and address of the facility in which the	269
abortion was performed, and whether the facility is a hospital,	270
ambulatory surgical facility, physician's office, or other	271
facility;	272
(3) The date of the abortion;	273
(4) If a surgical abortion, the method of final	274
disposition of the fetal remains under Chapter 3728. of the	275
Revised Code;	276
(5) All of the following regarding the woman on whom the	277
abortion was performed:	278

301

(10) (11) Signature of attending physician.

(D) The physician who completed the abortion report under

division (C) of this section shall submit the abortion report to	302
the department within fifteen days after the woman is	303
discharged.	304
(E) The appropriate vital records report or certificate	305
shall be made out after the twentieth week of gestation.	306
(F) A copy of the abortion report shall be made part of	307
the medical record of the patient of the facility in which the	308
abortion was performed.	309
(G) Each hospital shall file monthly and annual reports	310
listing the total number of women who have undergone a post-	311
twelve-week-gestation abortion and received postabortion care.	312
The annual report shall be filed following the conclusion of the	313
state's fiscal year. Each report shall be filed within thirty	314
days after the end of the applicable reporting period.	315
(H) Each case in which a physician treats a post abortion	316
complication shall be reported on a postabortion complication	317
form. The report shall be made upon a form prescribed by the	318
department, shall be signed by the attending physician, and	319
shall be confidential.	320
(I)(1) Not later than the first day of October of each	321
year, the department shall issue an annual report of the	322
abortion data reported to the department for the previous	323
calendar year as required by this section. The annual report	324
shall include at least the following information:	325
(a) The total number of induced abortions;	326
(b) The number of abortions performed on Ohio and out-of-	327
state residents;	328
(c) The number of abortions performed, sorted by each of	329

the following:	330
(i) The age of the woman on whom the abortion was	331
performed, using the following categories: under fifteen years	332
of age, fifteen to nineteen years of age, twenty to twenty-four	333
years of age, twenty-five to twenty-nine years of age, thirty to	334
thirty-four years of age, thirty-five to thirty-nine years of	335
age, forty to forty-four years of age, forty-five years of age	336
or older;	337
(ii) The race and Hispanic ethnicity of the woman on whom	338
the abortion was performed;	339
(iii) The education level of the woman on whom the	340
abortion was performed, using the following categories or their	341
equivalents: less than ninth grade, ninth through twelfth grade,	342
one or more years of college;	343
(iv) The marital status of the woman on whom the abortion	344
was performed;	345
(v) The number of living children of the woman on whom the	346
abortion was performed, using the following categories: none,	347
one, or two or more;	348
(vi) The number of weeks of gestation of the woman at the	349
time the abortion was performed, using the following categories:	350
less than nine weeks, nine to twelve weeks, thirteen to nineteen	351
weeks, or twenty weeks or more;	352
(vii) The county in which the abortion was performed;	353
(viii) The type of abortion procedure performed;	354
(ix) The number of abortions previously performed on the	355
woman on whom the abortion was performed;	356

(x) The type of facility in which the abortion was	357
performed;	358
(xi) For Ohio residents, the county of residence of the	359
woman on whom the abortion was performed.	360
(2) The report also shall indicate the number and type of	361
the abortion complications reported to the department either on	362
the abortion report required under division (C) of this section	363
or the postabortion complication report required under division	364
(H) of this section.	365
(3) In addition to the annual report required under	366
division (I)(1) of this section, the department shall make	367
available, on request, the number of abortions performed by zip	368
code of residence.	369
(J) The director of health shall implement this section	370
and shall apply to the court of common pleas for temporary or	371
permanent injunctions restraining a violation or threatened	372
violation of its requirements. This action is an additional	373
remedy not dependent on the adequacy of the remedy at law.	374
Sec. 3728.01. As used in this chapter:	375
(A) "Abortion facility" means any of the following in_	376
which abortions are induced or performed:	377
(1) Ambulatory surgical facility as defined in section	378
3702.30 of the Revised Code;	379
(2) Any other facility in which abortion is legally	380
provided.	381
(B) "Cremation" has the same meaning as in section 4717.01	382
of the Revised Code.	383

(C) "Fetal remains" means the entire fetus or any of its	384
parts removed from the pregnant woman's uterus by an abortion,	385
irrespective of the duration of the pregnancy.	386
(D) "Interment" means the burial or entombment of fetal	387
remains.	388
Sec. 3728.02. (A) Final disposition of fetal remains from	389
a surgical abortion at an abortion facility shall be by	390
<pre>cremation or interment.</pre>	391
(B) The cremation of fetal remains under division (A) of	392
this section shall be in a crematory facility, in compliance	393
with Chapter 4717. of the Revised Code.	394
(C) As used in this section, "crematory facility" has the	395
same meaning as in section 4717.01 of the Revised Code.	396
Sec. 3728.03. A pregnant woman who has a surgical abortion	397
has the right to determine both of the following regarding the	398
<pre>fetal remains:</pre>	399
(A) Whether the final disposition shall be by cremation or	400
<pre>interment;</pre>	401
(B) The location for the final disposition.	402
Sec. 3728.04. (A) (1) If a pregnant woman desires to	403
exercise the rights under section 3728.03 of the Revised Code,	404
she shall make the determination in writing using a form	405
prescribed by the director of health under division (C) of	406
section 3728.14 of the Revised Code. The determination must	407
<pre>clearly indicate both of the following:</pre>	408
(a) Whether the final disposition will be by cremation or	409
<pre>interment;</pre>	410

(b) Whether the final disposition will be at a location_	411
other than one provided by the abortion facility.	412
(2) If a pregnant woman does not desire to exercise the	413
rights under section 3728.03 of the Revised Code, the abortion	414
facility shall determine whether final disposition shall be by	415
cremation or interment.	416
(B) (1) A pregnant woman who is under eighteen years of	417
age, unmarried, and unemancipated shall obtain parental consent	418
from one of the person's parents, guardian, or custodian to the	419
final disposition determination she makes under division (A)(1)	420
of this section. The consent shall be made in writing using a	421
form prescribed by the director under division (B) of section	422
3728.14 of the Revised Code.	423
(2) The consent under division (B)(1) of this section is	424
not required for a pregnant woman exercising her rights under	425
section 3728.03 of the Revised Code if an order authorizing	426
consent to the abortion was issued under section 2151.85 of the	427
Revised Code.	428
Sec. 3728.05. An abortion facility may not release fetal	429
remains from a surgical abortion, or arrange for the cremation	430
or interment of such fetal remains, until it obtains a final	431
disposition determination made, and if applicable, the consent	432
made, under section 3728.04 of the Revised Code.	433
Sec. 3728.09. (A) Except as provided in division (B) of	434
this section, an abortion facility shall pay for and provide for	435
the cremation or interment of the fetal remains from a surgical	436
abortion performed at that facility.	437
(B) If the disposition determination made under division	438
(A) (1) of section 3728.04 of the Revised Code identifies a	439

<u>location for final disposition other than one provided by the</u>	440
abortion facility, the pregnant woman is responsible for the	441
costs related to the final disposition of the fetal remains at	442
the chosen location.	443
Sec. 3728.10. An abortion facility shall document in the	444
pregnant woman's medical record the final disposition	445
determination made, and if applicable, the consent made, under	446
section 3728.04 of the Revised Code.	447
Sec. 3728.11. An abortion facility shall maintain	448
evidentiary documentation demonstrating the date and method of	449
the disposition of fetal remains from surgical abortions	450
performed or induced in the facility.	451
Sec. 3728.12. An abortion facility shall have written	452
policies and procedures regarding cremation or interment of	453
fetal remains from surgical abortions performed or induced in	454
the facility.	455
Sec. 3728.13. An abortion facility shall develop and	456
maintain a written list of locations at which it provides or	457
arranges for the final disposition of fetal remains from	458
surgical abortions.	459
Sec. 3728.14. Not later than ninety days after the	460
effective date of this section, the director of health, in	461
accordance with Chapter 119. of the Revised Code, shall adopt	462
rules necessary to carry out sections 3728.01 to 3728.13 of the	463
Revised Code, including rules that prescribe the following:	464
(A) The method in which pregnant women who seek surgical	465
abortions are informed of the following:	466
(1) The right to determine final disposition of fetal	467
remains under section 3728.03 of the Revised Code;	468

(2) The available options for locations and methods for	469
the disposition of fetal remains.	470
(B) The notification form for final disposition	471
determinations and the consent form for purposes of section	472
3728.04 of the Revised Code.	473
(C) (1) A detachable supplemental form to the form	474
described in division (B)(4) of section 2317.56 of the Revised	475
<pre>Code that meets the following requirements:</pre>	476
(a) Indicates whether the pregnant woman has indicated a	477
preference as to the method of disposition of the fetal remains	478
and the preferred method selected;	479
(b) Indicates whether the pregnant woman has indicated a	480
preference as to the location of disposition of the fetal	481
<pre>remains;</pre>	482
(c) Provides for the signature of the physician who is to	483
perform or induce the abortion;	484
(d) Provides for a medical identification number for the	485
pregnant woman but does not provide for the pregnant woman's	486
<pre>printed name or signature.</pre>	487
(2) If a medical emergency or medical necessity prevents	488
the pregnant woman from completing the detachable supplemental	489
form, procedures to complete that form a reasonable time after	490
the medical emergency or medical necessity has ended.	491
Sec. 3728.15. Notwithstanding any conflicting provision of	492
the Revised Code or procedure of an agency or board, a person	493
who buries or cremates fetal remains from a surgical abortion is	494
not liable for or subject to damages in any civil action,	495
prosecution in any criminal proceeding, or professional	496

disciplinary action related to the disposal of fetal remains, if	497
that person does all of the following:	498
(A) Acts in good faith compliance with this chapter and,	499
if applicable, section 4717.271 of the Revised Code;	500
(B) Receives a copy of a properly executed detachable	501
supplemental form described in division (C)(1) of section	502
3728.14 of the Revised Code;	503
(C) Acts in furtherance of the final disposition of the	504
<pre>fetal remains.</pre>	505
Sec. 3728.95. A pregnant woman who has a surgical	506
abortion, the fetal remains from which are not disposed of in	507
compliance with this chapter, is not guilty of committing,	508
attempting to commit, complicity in the commission of, or	509
conspiracy in the commission of a violation of section 3728.99	510
of the Revised Code.	511
Sec. 3728.99. (A) No person shall fail to comply with	512
section 3728.02, 3728.05, 3728.10, or 3728.11 of the Revised	513
Code.	514
(B) Whoever knowingly violates division (A) of this	515
section is guilty of failure to dispose of fetal remains	516
humanely, a misdemeanor of the first degree.	517
Sec. 4717.271. The operator of a crematory facility that	518
cremates fetal remains for an abortion facility under Chapter	519
3728. of the Revised Code shall not do either of the following:	520
(A) Dispose of the cremated fetal remains anywhere other	521
than in a grave, crypt, or niche;	522
(B) Arrange for the transfer or disposal of the cremated	523
fetal remains anywhere other than in a grave, crypt, or niche.	524

Sub. S. B. No. 254 As Passed by the Senate	Page 20
Section 2. That existing sections 2317.56, 3701.341, and	525
3701.79 of the Revised Code are hereby repealed.	526
Section 3. Neither of the following shall apply until	527
rules are adopted under section 3728.14 of the Revised Code:	528
(A) The prohibition under section 3728.99 of the Revised	529
Code;	530
(B) The prohibitions under section 4717.271 of the Revised	531
Code.	532