

ISSUE ADVISORY: Guide to State Reproductive Rights Legislation as of Feb. 27, 2015

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The main web page from which this information is drawn is [RH Reality Check](#). Note, companion bills are listed under the same version in the House/Senate.

[The Guttmacher Institute](#) also maintains an up-to-date database on legislation introduced and acted upon in the states, and you can receive their free quarterly newsletter electronically. There is an invaluable website, [State & Local Government on the Net](#), from whose webpages you can locate information about your state's current bills and legislative activities.

Arizona

[SB 1318](#) – removes the provision permitting the purchase and payment for a separate optional rider, which is now available for a person to buy as separate from their insurance and covers abortion

"[HB 2467](#) would require all ultrasounds performed at crisis pregnancy centers to be performed by a licensed or certified health-care provider whose scope of practice includes performing ultrasounds."

"[HB 2456](#) would amend Arizona's parental consent statute. Under the new provision, parental consent or judicial authorization would not be required if the attending physician receives informed written consent of the minor and determines that the minor is mentally and physically competent to give consent."

"[HB 2455](#) would amend Arizona's parental consent statute. Under the new provision (Section N), parental consent or judicial authorization would not be required if a physician or counselor provides pregnancy information and counseling in a manner that will be understood by the minor."

[HB 2435](#) – "include rape or incest as an exception to the requirement that the provisions of the statute be fulfilled before a woman's consent to abortion will be

considered “voluntary and informed”; remove the 24-hour waiting period for medication abortion; remove the requirement that an ultrasound must be performed 24 hours prior to an abortion (the ultrasound requirement remains); include rape or incest as an exception to the requirement that an ultrasound be performed prior to an abortion."

"[HB 2227](#) would require that pregnancy-related information provided to a woman by a crisis pregnancy center (CPC) be scientifically accurate and evidence-based."

"[SB 1431](#) would permit a religious employer to require an insurance company to provide a plan without coverage of objectionable contraceptive devices upon submission of an affidavit stating its objections. However, SB 1431 would require the religious employer to provide written notice to prospective plan subscribers that the religious employer refuses to cover all FDA-approved contraceptive methods for religious reasons. Contraception prescribed for a reason other than to prevent an unintended pregnancy is excluded from the provision of the law. (SB 1431 would replace the phrase “for contraceptive, abortifacient, abortion, or sterilization purposes” with “to prevent an unintended pregnancy.”)... would require pharmacists to properly fill valid prescription orders presented to the pharmacy by or for a customer. If the pharmacy is unable to fill the prescription, the pharmacist must make every effort to obtain a timely order, transfer the prescription to another local pharmacy of the customer’s choice, or return the unfilled prescription and refer the customer to another local pharmacy with timely access to the drug or device prescribed."

[HB 2638](#) – "Current law permits the director of the Department of Health to inspect an abortion clinic at any time during regular business hours if there is reasonable cause to believe the clinic is not adhering to licensing requirements or any other law or rule concerning abortion. HB 2638 would eliminate this provision."

"[HB 2665](#) would amend Arizona’s informed consent law, (A.R.S. §§ 36-2153 & 36-2156) to (1) include rape or incest as an exception to the requirement that the provisions of the statute be fulfilled before a woman’s consent to abortion will be considered “voluntary and informed”; and (2) include rape or incest as an exception to the requirement that an ultrasound be performed prior to an abortion."

Arkansas

"[SB 53](#) would prohibit dispensing abortion-inducing drugs (i.e., mifepristone-misoprostol or any other chemical regimen) by anyone other than a physician and would require that the woman and physician both be present in the same room when the drugs are administered."

"[HB 1076](#) would prohibit dispensing abortion-inducing drugs (mifepristone-misoprostol regimen) by anyone other than a physician and would require that the woman and physician both be present in the same room when the drugs are administered."

Colorado

[Women's Health Protection Act](#), [House Bill HB-1128](#), is a piece of Targeted Regulation of Abortion Providers (TRAP) legislation which would require abortion clinics to meet a set of standards, much like a hospital, to obtain its annual license. The clinic would need to employ at least one doctor with admitting privileges at a hospital within the state and within 30 miles of the clinic.

"[HB 1041](#) would prohibit abortion after the point of conception" with few exceptions.

"[HB 1112](#) would prohibit a person from denying or depriving an infant of nourishment with the intent to cause or allow the death of the infant for any reason."

"[HB 1162](#) would prohibit a person from knowingly performing an abortion knowing that the abortion is sought based on the sex of the child; using force or threat of force for the purpose of coercing a sex-selection abortion; soliciting or accepting funds for the performance of a sex-selection abortion; or transporting a woman into Colorado for the purposes of obtaining a sex-selection abortion."

[HB 1194](#) – "would use \$5 million from the state's general fund to continue a program that helps improve access to long-acting reversible contraceptives among low-income women"

Connecticut

[HB 5220](#) – "To establish parental notification requirements for abortion procedures performed on persons who are less than eighteen years of age."

[HB 5216](#) – would require parental notification of abortion procedures performed on minors.

Florida

"[HB 247](#) is an omnibus bill containing multiple abortion restrictions including medication abortion ban; “termination of pregnancy” ban; informed consent requirements; standard of care requirements; insurance coverage ban and related provisions."

"[SB 724](#) would amend Florida’s informed consent law to add a requirement that a physician performing an abortion must satisfy all of the informed consent requirements 24 hours prior to the abortion and must do so while physically present in the same room as the patient."

"[HB 633](#) would amend Florida’s informed consent law to add a requirement that a physician performing an abortion must satisfy all of the informed consent requirements 24 hours prior to the abortion and must do so while physically present in the same room as the patient."

"[SB 920](#) would require that a physician performing or inducing an abortion must have active admitting privileges at a licensed hospital in this state that is located 30 miles or less from the location at which the abortion is performed or induced and provide obstetrical or gynecological health care services."

Georgia

[SB 39](#) – "would ban abortion after the second trimester unless the physician and two consulting physicians certify the abortion is necessary in their best clinical judgment to preserve the life or health of the woman."

Idaho

"[H 88](#) would prohibit dispensing abortion-inducing drugs unless the physician: Has the ability to assess the duration of the pregnancy accurately in accordance with the applicable standard of care for medical practice in the state; Has determined that the pregnancy is not ectopic; Has the ability to provide surgical intervention; Is able to assure patient access to medical facilities equipped to provide blood transfusions and

resuscitation, if necessary on a twenty-four (24) hour basis; Has examined in person the woman to whom the abortifacient is administered to determine the medical appropriateness of such administration and has determined that the abortifacient is sufficiently safe for use in the gestational age at which it will be administered; and has complied with Idaho's informed consent provisions (Idaho Code § 18-609.)"

"[S 1094](#) would require that a physician performing an abortion have admitting privileges at a hospital located within 20 (twenty) miles of where the surgical abortion is performed."

"[S 1102](#) would require that a physician performing an abortion have admitting privileges at a hospital located within 30 miles of where the surgical abortion is performed."

Indiana

[SB 334](#) – "would [ban](#) a physician from performing an abortion if the provider knows the pregnant woman is seeking to terminate the pregnancy due to the sex of the fetus or because of a diagnosis of Down syndrome or any other disability."

"[HB 1228](#) would prohibit a person from performing or attempting to perform an abortion if the person knows that the pregnant woman is seeking an abortion because of the sex of the fetus or a diagnosis or potential diagnosis of Down Syndrome or any other disability."

"[HB 1546](#) would prohibit knowingly or intentionally aiding or assisting an unemancipated minor in obtaining an abortion without the consent required by Indiana law."

Iowa

[SF 12](#) – "The bill would mandate that a woman seeking abortion care wait 72 hours after her first visit to a provider, have an ultrasound, and undergo forced counseling with state-published materials prior to having the abortion."

[SF 11](#) – "would ban the use of telemedicine to provide abortion care. The bill prohibits dispensing abortion-inducing drugs by anyone other than a physician and would require that the physician comply with all federal regulations relating to abortion-inducing drugs."

[SF 44](#) – "bans so-called sex-selective abortions. The bill would require a physician to certify that an abortion is not being performed because of the sex or gender of the fetus."

[SF 55](#) – "would prohibit health insurance plans, purchased through the state's health-care exchange created under the Affordable Care Act, from funding plans that include coverage for abortion care. The bill includes an exemption for plans that cover abortion care if a woman's life is threatened due to pregnancy."

"[HF 58](#) would require that prior to performing an abortion, a physician must certify in the woman's medical record that the woman has undergone an ultrasound imaging of the fetus; that the woman has been given the opportunity to view the ultrasound image of the fetus; and that the woman has been given the option of hearing a description of the ultrasound image and hearing the heartbeat of the fetus."

Kansas

"Kansas legislators are expected to introduce [a bill that would outlaw a common medical procedure](#), effectively banning abortion in the state past 14 weeks' gestation, or even earlier... The bill would prohibit doctors from using clamps, forceps, scissors, or similar medical implements to dismember a fetus during an abortion procedure... Depending on the language of the bill, it could ban all surgical abortions in the state past 14 weeks' gestation, or ban abortions even earlier in pregnancy."

"[A bill to ban abortions when a fetal heartbeat is detected](#) is expected to be introduced."

"[SB 95](#) would prohibit a person from performing, or attempting to perform, a 'dismemberment abortion' unless (1) it is necessary to preserve the life of the pregnant woman; or (2) a continuation of the pregnancy will cause a substantial and irreversible physical impairment of a major bodily function of the pregnant woman."

"[HB 2187](#) would prohibit a person from performing, or attempting to perform, a 'dismemberment abortion' unless (1) it is necessary to preserve the life of the pregnant woman; or (2) a continuation of the pregnancy will cause a substantial and irreversible physical impairment of a major bodily function of the pregnant woman."

Kentucky

[SB 4](#) passed the State Senate – "would [update the state's current counseling law](#), which requires a licensed nurse, physician, physician assistant, or social worker to tell a woman about risks of and alternatives to abortion at least 24 hours before receiving the abortion."

"[HB 393](#) would ban abortions at 20 weeks post-fertilization unless, in the physician's reasonable medical judgment, an abortion is necessary to avert the woman's death or a serious risk of substantial and irreversible physical impairment of a major bodily function, other than a psychological condition."

Maryland

"[SB 158](#), introduced in January by state Sen. Bryan Simonaire (R-Anne Arundel), wouldn't require that an ultrasound be performed, but it would require that when one is performed the pregnant person be given the opportunity to view the images."

[SB 511](#) would ban abortion procedures after 20 weeks.

[HB 492](#) – "would make abortion illegal after 20 weeks due to the stated belief that a fetus can feel pain starting at that time."

Michigan

A bill was introduced into the State Senate, [SB 27](#), that increases physicians' reporting requirements and has the potential to increase harassment of providers within the state. It would also add "allergic response" and "anesthesia-related complications" to the list of complications that abortion providers must report to the state.

Minnesota

"[SF 800](#) would bar Medicaid and other public health programs in the state from covering abortion services—policies that would have an outsized impact on low-income women."

[HF 607](#) – "would bar Medicaid and other public health programs in the state from covering abortion services—policies that would have an outsized impact on low-income women."

"[SF 794](#) would require free-standing reproductive health facilities that perform ten or more abortions each month to be licensed in the same way as outpatient surgical centers, and would allow the state to inspect those facilities with no notice."

[HF 606](#) – "would require free-standing reproductive health facilities that perform ten or more abortions each month to be licensed in the same way as outpatient surgical centers, and would allow the state to inspect those facilities with no notice."

"[HF 734](#), would require a prescribing physician be physically present when abortion drugs are administered."

[HF 1165](#) – "would require most employers in the state to include all FDA-approved contraceptives in their health insurance plans at no additional cost to employees"

Mississippi

Personhood bill – [HB 1309](#) – would redefine "person" to include "every human being from the moment of fertilization." It has been referred to the house judiciary.

"[SB 2138](#) would require a 72-hour waiting period in three areas of Mississippi law: (1) informed consent; (2) forced ultrasound; and (3) parental consent."

"[HB 318](#) would instruct the Department of Health and Human Services and the State Department of Health to develop programs that would educate members of communities of color about preventing teen pregnancy and sexually transmitted diseases; provide medically accurate information about contraceptives; and promote communication among families about preventing teen pregnancy and sexually transmitted diseases."

"[HB 1338](#) would amend Mississippi's wrongful death statute so that a cause of action for wrongful death would include "unborn child.""

Missouri

"[HB 353](#) would change the laws regarding sex education in public schools, establish the Compassionate Assistance for Rape Emergencies (CARE) Act and the Birth Control Protection Act, require the development of a women's health-care program, and

establish procedures for pharmacies dispensing prescriptions and over-the-counter medicines in certain situations."

[HB 814](#) – Two-Parent Written Notification Requirement – would prohibit a physician from performing or inducing an abortion upon a minor with written consent of the minor and one parent or legal guardian. The parent/legal guardian would have to notify any other custodial parent.

HB 774 – Two-Parent Written Notification Requirement – identical to HB 814

[SB 306](#) – Prohibits use of public funds for abortions

[HB 670](#) – "change the requirement that abstinence be presented as the preferred choice of behavior... require any course materials and instruction relating to human sexuality and sexually transmitted diseases to also be based on peer-reviewed projects that have been demonstrated to influence healthy behavior and be age appropriate... repeal the provision requiring that students be presented with the latest medically factual information regarding the possible side effects and health benefits of all forms of contraceptives and information on contraceptives and pregnancy in a manner consistent with the provisions of the federal Abstinence Education Law, and replace those provisions with a requirement that students must be presented with the latest medically factual information about the health benefits and side effects of all contraceptives and barrier methods as a means to prevent pregnancy and reduce the risk of contracting infections and other diseases... repeal the provisions prohibiting a school district or charter school from providing abortion services or allowing a provider of abortion services to present materials or instruction relating to human sexuality or sexually transmitted diseases to its students."

[SB 302](#) – Informed consent for out-of-state abortion referrals – abortion providers would need to provide to a woman they refer to an out-of-state abortion clinic the printed materials developed by the Dept. of Health under Missouri's informed consent law (Mo. Rev. State. 188.027)

[HB 610](#) – funding restrictions for abortion services – any individual or entity is prohibited from entering into a Title X contract with any abortion facility or with an individual, organization, or entity that "encourages" a woman to have an abortion or provides required counseling for an abortion

[HB 611](#) – reporting for Title X family planning agencies - would require an organization, institution, or facility that performed or assisted in performing an abortion that was not necessary to save the life of the mother or that encouraged or counseled a woman to have an abortion that was not necessary to save her life, to make an annual accounting of any and all funds received pursuant to Title X.

[HB 439](#) – abortion ban for sex selection and genetic abnormalities - prohibits a person from intentionally performing or attempting to perform an abortion with the knowledge that the pregnant woman was seeking the abortion solely due to the sex of the unborn child or because the unborn child has been diagnosed with a genetic abnormality or a potential for a genetic abnormality.

[HB 427](#) – regarding family planning funding prioritization and clinic inspections - requires that the Department of Health and Senior Services do an annual on-site inspection and investigation of any ambulatory surgical center operated for the purpose of performing or inducing any second or third trimester abortions or five or more first trimester abortions per month

Would also reprioritize the distribution of public funds for family planning and reproductive health care in an effort to direct money away from abortion clinics

[HB 432](#) – Missouri Conscience Protection Bill of 2015 - allows medical professionals and health-care institutions to refuse to participate in medical procedures or research that violate their conscience, including surgical and medication abortions, contraception, assisted reproduction, human cloning, and human embryonic stem-cell research

[HB 351](#) – " The bill would require entities like crisis pregnancy centers (CPCs) to provide written notice of whether they provide contraceptive drugs or devices that are approved by the FDA, an onsite consultation with a specified medical practitioner, adoption services or referral for adoption services, and abortion services or referral for abortion services."

New Hampshire

"[HB 403](#) would repeal current New Hampshire law that allows for a buffer zone of up to 25 feet around abortion clinics."

"[HB 629](#) would require the department of health and human services to keep an annual statistical report of each induced termination of pregnancy and submit each report to the general court. The report would also be made available to the public." The report would contain confidential information about the patient and facility.

"[HB 560](#) would include the term “fetus” in the definition of “another” for the purpose of first and second degree murder, manslaughter, negligent homicide, and causing or aiding suicide. This would not apply to women seeking medical procedures or abortions."

"[HB 595](#) would ban abortions after 21 weeks and 5 days post-fertilization unless it is necessary to save the life of the mother, avert serious bodily injury to the mother, or it is necessary to preserve the life of the child."

"[HB 194](#) would give constitutional rights to eggs, embryos, and fetuses."

"[HB 677](#) would strip all state and federal public funds to any costs, services or utilities for abortions, abortion referrals and abortion counseling. The bill seeks to ensure that all public funds are not used to subsidize abortions directly or indirectly. This includes ensuring that no federal family planning funds be appropriated or dispersed to individuals, organizations, entities, or affiliates of those that perform, induce, refer for, or counsel on behalf of elective abortions."

***Bill killed by House

"[HB 670](#) would allow health care providers, institutions, and payers to decline to counsel, advise, provide, perform, assist, or participate in providing or performing health care services that violate their consciences. Such health care services may include, but are not limited to, abortion, artificial birth control, artificial insemination, assisted reproduction, human embryonic stem-cell research, fetal experimentation, human cloning, and sterilization. “Conscience” refers to the religious, moral, or ethical principles held by a health care provider, health care institution, or a health care payer."

New Mexico

"[HB 390](#) would amend the existing Partial-Birth Abortion Ban in New Mexico to include a ban on late-term abortions. It prohibits abortions after 20 weeks, unless the life and

the health of the mother is at risk, or the pregnancy was a result of sexual abuse, rape or incest."

"[HB 391](#) would require physicians to provide notice of a planned abortion procedure of a non-emancipated minor to one parent or guardian at least 48 hours prior to the procedure."

North Dakota

"[SB 2275](#) would prohibit forcing or a coercing a victim of human trafficking to obtain an abortion."

Ohio

[HB 69](#) – "would outlaw abortion after a heartbeat can be detected in the fetus. That can happen as early as six weeks into a pregnancy, a time before many people are aware they're pregnant." Violation of the law would be a fifth-degree felony for the physician and they would risk up to a year in prison and a \$2,500 fine.

Oklahoma

"[HB 1721](#) would make it unlawful for any person to purposely perform or attempt to perform a "dismemberment abortion" and thereby kill an "unborn child" unless it is necessary to prevent serious health risk to the pregnant woman."

"[SB 642](#) would require a physician who performs an abortion on a child under the age of fourteen to preserve the fetal tissue extracted during the abortion in accordance with rules promulgated by the State Board of Health. The physician would be required to submit the tissue to the State Department of Health."

"[SB 606](#) would amend Oklahoma's Heartbeat Informed Consent Act. The bill would require a person who intends to perform an abortion on a pregnant woman to determine if there is the presence of a fetal heartbeat according to standard medical practice."

"[HB 1409](#) would amend Oklahoma's informed consent law (63 O.S. 1-738.2 &1-738.3). It would increase the time for voluntary and informed consent prior to an abortion from 24 hours to 72 hours. All of the informed consent requirements would have to be satisfied 72 hours before the abortion is performed."

Oregon

A bill was introduced this month into the House, [HB 2388](#), that would ban abortion at 20 weeks, but would allow physicians to perform abortions past 20 weeks if there was a medical emergency.

A bill was introduced into the Senate, SB 108, which would ban sex-selective abortions during the third trimester.

Pennsylvania

"[SB 292](#) would allow health-care professionals and institutions to refuse to provide prescriptions for contraceptives and abortifacients or participate in health-care services that violate their conscience, and would immunize health-care professionals and institutions from civil and criminal liability based on their refusal to provide prescriptions or participate in health-care services that violate their conscience."

South Carolina

Wednesday, February 11th, a bill ([HB 3114](#)) banning abortions after 20 weeks passed the State House of Representatives.

Two 20-week bans were introduced in the State Senate earlier in the year, both titled the "Pain-Capable Unborn Child Protection Act." Neither include exceptions for rape, incest, or fetal abnormalities. Doctors who perform abortions would face steep penalties of up to \$10,000 and up to 3 years in prison.

South Dakota

[HB 1230](#) – "would make it illegal for any physician to "knowingly behead a living unborn child with the intent of endangering the life or health of the child.""

Tennessee

[SB 13](#) – "revives and reenacts the informed consent statute for abortion that was in effect prior to Planned Parenthood of Middle Tennessee."

"[The bill](#) requires physicians to 'orally' inform women seeking an abortion of six pieces of information and requires that the woman 'sign a consent form acknowledging that she has been informed by her attending physician.'"

"Rep. Susan Lynn (R-Mt. Juliet) is reportedly preparing to introduce [bills designed to tighten the state's abortion regulations.](#)"

[SB 50](#) – " requires a medical or surgical abortion to be performed in a licensed ambulatory surgical treatment center." The bill is in committee.

[SB 716](#) – "would require facilities or physicians' offices where abortions that possess a 'significant risk' are performed to be licensed as ambulatory surgical treatment centers, and require such offices to convert into mini-hospitals."

"[SB 775](#) would require a physician to perform an obstetric ultrasound between 24 to 72 hours prior to a woman giving her informed consent to have an abortion."

[HB 948](#) -"would require facilities or physicians' offices where abortions that possess a "significant risk" are performed to be licensed as ambulatory surgical treatment centers, and require such offices to convert into mini-hospitals."

[HB 1368](#) – "This bill would require facilities or physicians' offices where more than 50 abortions are performed in a calendar year to be licensed as ambulatory surgical treatment centers, and require such offices to convert into mini-hospitals."

[SB 1280](#) – "This bill would require facilities or physicians' offices where more than 50 abortions are performed in a calendar year to be licensed as ambulatory surgical treatment centers, and require such offices to convert into mini-hospitals."

"[HB 977](#) would amend Tennessee's abortion reporting law (Tenn. Code § 39-15-203) to require physicians to maintain for five years a record of each abortion."

"[SB 1222](#) would amend Tennessee's abortion reporting law (Tenn. Code § 39-15-203) to require physicians to maintain for five years a record of each abortion."

[HB 989](#) establishes informed consent rules, listing 6 different things a doctor must tell a woman about to receive an abortion. There would also be a 2 day waiting period.

[SB 1190](#) establishes informed consent rules, listing 6 different things a doctor must tell a woman about to receive an abortion. There would also be a 2 day waiting period.

Texas

"[HB 708](#) would remove from the Texas Woman's Right to Know Act (passed in 2003 (SB 835) and amended in 2011 (HB 15)) the provision which requires an abortion provider to inform a woman seeking abortion that induced abortions increase the risk of breast cancer."

[HB 723](#) – " Current law requires the court to appoint a guardian ad litem for the minor. HB 723 would prohibit the court from appointing that guardian ad litem to serve as the minor's attorney. It would also prohibit the court from appointing the minor's attorney to be guardian ad litem for the minor."

[HB 709](#) – " HB 709 would eliminate the provision in the Woman's Right to Know Act (HB 15) that requires a 24-hour waiting period before an abortion can be performed, or a two-hour waiting period if the woman certifies that she lives 100 miles or more from the nearest abortion provider."

"[SB 477](#) would prohibit abortion providers (like Planned Parenthood) or their affiliates from providing sex education or family planning instruction or instructional materials for use in human sexuality or family planning instruction in a public school"

"[HB 1210](#) would exempt a health-care professional from penalties for violation of Texas's informed consent law or medication abortion restriction law as those laws apply to a specific patient if in the professional's good faith professional judgment, compliance with those laws in that patient's case would be inconsistent with accepted, evidence-based medical practices and ethical standards."

"[SB 575](#) would amend the Insurance Code to prohibit a qualified health plan offered through a health benefit exchange, as administered by the federal government or created under the Affordable Care Act, from providing coverage for an abortion unless the abortion is necessary to prevent death or a serious risk of substantial and irreversible physical impairment of a major bodily function, other than a psychological or emotional condition."

"[HB 1435](#) would amend the Insurance Code to prohibit a qualified health plan offered through a health benefit exchange, as administered by the federal government or created under the Affordable Care Act, from providing coverage for an abortion unless the abortion is necessary to prevent death or a serious risk of substantial and irreversible physical impairment of a major bodily function, other than a psychological or emotional condition."

Virginia

There was a bill introduced into the House, [HB 1456](#), which would allow child-protective services to investigate private property if there is a complaint that a pregnant person is using certain substances that would "render the woman's unborn child abused or neglected."

[HB 2321](#) - "Pain-Capable Unborn Child Protection Act," that would outlaw abortion after 20 weeks post-fertilization, except for when the pregnant person's life is at risk.
FAILED TO PASS

A "[personhood](#)" [resolution](#) was [introduced](#) into the State House that states "the life of the human person commences at conception, also known as fertilization."

"[HB 1541](#) would define the term "birth control" to mean "contraceptive methods that are approved by the U.S. Food and Drug Administration." The bill would also clarify that birth control is not considered abortion for purposes of Virginia's criminal code, Title 18.2."

"[HB 1524](#) would amend Virginia's informed consent law (Va. Code § 18.2-76), to repeal the forced ultrasound requirement. The bill would also remove the requirement that a patient be provided a list of public and private agencies that provide ultrasound imaging for free."

"[SB 920](#) would amend Virginia's informed consent law (Va. Code § 18.2-76) to remove the specific time frame for performance of a pre-abortion ultrasound. Current law requires the ultrasound take place at least 24 hours prior to the abortion or at least two hours prior if the woman lives at least 100 miles from the facility where the abortion is to be performed. SB 920 would simply require that the ultrasound take place before the abortion."

"[SB 1277](#) would require health insurance policies issued or renewed on or after July 1, 2015, to include coverage for any prescribed drug, device, or product approved by the FDA for use as a contraceptive."

Washington

[SB 5289](#) would require notification to parents or guardians in cases of abortion.

[HB 1687](#) would declare the right to life begins at the moment the "individual comes into being." – Personhood legislation

"[HB 1493](#) would require physicians to notify a parent or guardian of a minor seeking an abortion 48 hours prior to the procedure, unless there was a medical emergency. If both parents have died or are otherwise unavailable to the physician within at least 24 hours, notification of the woman's guardian is sufficient. The patient may seek judicial bypass if she wishes to not allow the notification of a parent or guardian."

West Virginia

State House of Representatives passed a "[Pain-Capable Unborn Child Protection Act](#)," ([HB 2153](#)) which is a 20-week abortion ban. Abortions will be allowed when the pregnant person's health is at a serious risk.

"The West Virginia legislature also introduced [SB 236](#), which would [ban all health insurance plans](#) offered through the Affordable Care Act exchange from including coverage of 'elective' abortions."

[HB 2371](#) – "would amend West Virginia's parental notification law to permit the court to appoint a guardian ad litem for the interests of the "unborn child" should a pregnant minor wish to waive West Virginia's parental notification requirements by petitioning a circuit court located in the jurisdiction in which the minor resides or in which the abortion is to be performed."

[HB 2440](#) – "would prohibit a qualified health plan offered through an exchange established by the state from including elective abortion coverage." Elective abortion is considered in the bill as an abortion for any reason other than to prevent the death of the mother.

[HB 2568](#) – "would prohibit performing or inducing an abortion unless the physician first makes a determination of the probable post-fertilization age of the fetus, except in cases of a medical emergency. The bill would ban abortions at 20 weeks post-fertilization unless, in the physician's reasonable medical judgment, an abortion is necessary to avert the woman's death or a serious risk of substantial and irreversible physical impairment of a major bodily function, other than a psychological condition."