

1-1 By: Campbell, Perry S.B. No. 1602  
 1-2 (In the Senate - Filed March 9, 2017; March 21, 2017, read  
 1-3 first time and referred to Committee on Health & Human Services;  
 1-4 April 24, 2017, reported adversely, with favorable Committee  
 1-5 Substitute by the following vote: Yeas 6, Nays 3; April 24, 2017,  
 1-6 sent to printer.)

1-7 COMMITTEE VOTE

	Yea	Nay	Absent	PNV
1-8				
1-9	X			
1-10		X		
1-11	X			
1-12	X			
1-13	X			
1-14		X		
1-15	X			
1-16	X			
1-17		X		

1-18 COMMITTEE SUBSTITUTE FOR S.B. No. 1602 By: Kolchorst

1-19 A BILL TO BE ENTITLED  
 1-20 AN ACT

1-21 relating to reporting requirements by certain health care  
 1-22 facilities for abortion complications; authorizing a civil  
 1-23 penalty.

1-24 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:  
 1-25 SECTION 1. Subchapter A, Chapter 171, Health and Safety  
 1-26 Code, is amended by adding Section 171.006 to read as follows:

1-27 Sec. 171.006. ABORTION COMPLICATION REPORTING  
 1-28 REQUIREMENTS; CIVIL PENALTY. (a) In this section, "abortion  
 1-29 complication" means any harmful event or adverse outcome with  
 1-30 respect to a patient related to an abortion that is performed on the  
 1-31 patient and that is diagnosed or treated by a health care  
 1-32 practitioner or at a health care facility and includes:

- 1-33 (1) shock;
- 1-34 (2) uterine perforation;
- 1-35 (3) cervical laceration;
- 1-36 (4) hemorrhage;
- 1-37 (5) aspiration or allergic response;
- 1-38 (6) infection;
- 1-39 (7) sepsis;
- 1-40 (8) death of the patient;
- 1-41 (9) incomplete abortion;
- 1-42 (10) damage to the uterus; or
- 1-43 (11) an infant born alive after the abortion.

1-44 (b) The reporting requirements of this section apply only to  
 1-45 a health care facility that is a hospital, abortion facility,  
 1-46 freestanding emergency medical care facility, or health care  
 1-47 facility that provides emergency medical care, as defined by  
 1-48 Section 773.003.

1-49 (c) Each facility described by Subsection (b) shall submit  
 1-50 to the department in the form and manner prescribed by department  
 1-51 rule a quarterly report on each abortion complication diagnosed or  
 1-52 treated at the facility.

1-53 (d) The department shall develop a form for reporting an  
 1-54 abortion complication under Subsection (c) and publish the form on  
 1-55 the department's Internet website. The form must include  
 1-56 appropriate abortion complication diagnosis terminology that is  
 1-57 consistent with standard diagnosis terminology used in medical  
 1-58 practice.

1-59 (e) A report under this section may not identify by any  
 1-60 means the physician performing an abortion or the patient.

2-1 (f) A report under this section must identify the name and  
2-2 type of facility submitting the report and must include, if known,  
2-3 for each abortion complication:

2-4 (1) the date of the abortion that caused or may have  
2-5 caused the complication;

2-6 (2) the type of abortion that caused or may have caused  
2-7 the complication;

2-8 (3) the probable post-fertilization age of the unborn  
2-9 child when the abortion was performed;

2-10 (4) the name and type of the facility in which the  
2-11 abortion was performed;

2-12 (5) the date the complication was diagnosed or  
2-13 treated;

2-14 (6) the name and type of any facility other than the  
2-15 reporting facility in which the complication was diagnosed or  
2-16 treated;

2-17 (7) a description of the complication;

2-18 (8) the number of previous live births of the patient;

2-19 and

2-20 (9) the number of previous induced abortions of the  
2-21 patient.

2-22 (g) Except as provided by Section 245.023, all information  
2-23 and records held by the department under this section are  
2-24 confidential and are not open records for the purposes of Chapter  
2-25 552, Government Code. That information may not be released or made  
2-26 public on subpoena or otherwise, except that release may be made:

2-27 (1) for statistical purposes, but only if a person,  
2-28 patient, or facility is not identified;

2-29 (2) with the consent of each person, patient, and  
2-30 facility identified in the information released;

2-31 (3) to medical personnel, appropriate state agencies,  
2-32 or county and district courts to enforce this chapter; or

2-33 (4) to appropriate state licensing boards to enforce  
2-34 state licensing laws.

2-35 (h) A report submitted under this section must meet the  
2-36 federal reporting requirements that mandate the most specific,  
2-37 accurate, and complete coding and reporting for the highest level  
2-38 of specificity.

2-39 (i) The department shall develop and publish on the  
2-40 department's Internet website an annual report that aggregates on a  
2-41 statewide basis each abortion complication required to be reported  
2-42 under Subsection (f) for the previous calendar year.

2-43 (j) A facility that violates this section is subject to a  
2-44 civil penalty of \$500 for each violation. The attorney general, at  
2-45 the request of the department, may file an action to recover a civil  
2-46 penalty assessed under this subsection and may recover attorney's  
2-47 fees and costs incurred in bringing the action.

2-48 (k) The third separate violation of this section  
2-49 constitutes cause for the revocation or suspension of a facility's  
2-50 license, permit, registration, certificate, or other authority or  
2-51 for other disciplinary action against the facility by the  
2-52 department.

2-53 SECTION 2. Not later than January 1, 2018:

2-54 (1) the Department of State Health Services shall:

2-55 (A) develop the reporting forms required by  
2-56 Section 171.006, Health and Safety Code, as added by this Act; and

2-57 (B) if duplicate reporting requirements exist  
2-58 under state law, consolidate the reported information into a single  
2-59 form; and

2-60 (2) the executive commissioner of the Health and Human  
2-61 Services Commission shall adopt the rules necessary to implement  
2-62 Section 171.006, Health and Safety Code, as added by this Act.

2-63 SECTION 3. This Act takes effect September 1, 2017.

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