

HB 1502-FN – AS INTRODUCED

2014 SESSION

14-2005  
01/04

HOUSE BILL            ***1502-FN***

AN ACT                relative to induced termination of pregnancy statistics.

SPONSORS:            Rep. Souza, Hills 43; Rep. Notter, Hills 21; Rep. Peterson, Hills 21; Rep. LeBrun, Hills 32; Rep. Kappler, Rock 3; Rep. Baldasaro, Rock 5; Rep. G. Hopper, Hills 2; Rep. Berube, Straf 18

COMMITTEE:          Health, Human Services and Elderly Affairs

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ANALYSIS

This bill requires the department of health and human services to keep an annual statistical report of each induced termination of pregnancy performed and submit such report to the general court. The report shall also be available to the public.

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Explanation:          Matter added to current law appears in ***bold italics***.  
                                Matter removed from current law appears [~~in brackets and struck through~~]  
                                Matter which is either (a) all new or (b) repealed and reenacted appears in regular type.

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STATE OF NEW HAMPSHIRE

*In the Year of Our Lord Two Thousand Fourteen*

AN ACT                   relative to induced termination of pregnancy statistics.

*Be it Enacted by the Senate and House of Representatives in General Court convened:*

1           1 New Section; Annual Report Required. Amend RSA 126-A by inserting after section 4-h the  
2 following new section:

3           126-A:4-i Induced Termination of Pregnancy; Annual Report.

4           I. In this section:

5                   (a) “Facility” or “medical facility” means any public or private hospital, clinic, center,  
6 medical school, medical training institution, health care facility, physician’s office, infirmary,  
7 dispensary, ambulatory surgical treatment center, or other institution or location wherein medical  
8 care is provided to any person.

9                   (b) “Abortion clinic” means a facility, other than an accredited hospital, in which 5 or  
10 more first trimester abortions in any month or any second or third trimester abortions are  
11 performed.

12                   (c) “Induced termination of pregnancy” means the purposeful interruption of an  
13 intrauterine pregnancy with the intention other than to produce a live-born infant and which does  
14 not result in a live birth. This definition excludes management of prolonged retention of products of  
15 conception following fetal death.

16                   (d) “Non-surgical induction” means the administration of a medication or medications to  
17 induce a termination of pregnancy.

18                   (e) “Physician” means any person licensed to practice medicine under RSA 329.

19                   (f) “Procedure” means the process by which an induced termination of pregnancy occurs.

20           II. A report of each induced termination of pregnancy shall be made to the department on  
21 the most current form used for such purpose by the federal Centers for Disease Control and  
22 Prevention or on a form which is substantially similar to such form. The commissioner shall make  
23 such form available to facilities and medical facilities licensed under RSA 151, or abortion clinics as  
24 defined in subparagraph I(b).

25           III. The reports shall be completed by the licensed facility or abortion clinic and transmitted  
26 to the department within 5 days after the date of the procedure.

27           IV. The department shall prepare a comprehensive annual statistical report for the general  
28 court based upon the data gathered under this section. The information contained in the report shall  
29 be released by county, or by city or town; provided, that the release of any information shall not lead  
30 to any disclosures described in paragraph V. The report shall be available to the public 30 days after  
31 it is submitted to the general court.

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1           V.(a) Notwithstanding RSA 126:28 and except as otherwise provided in this section,  
2 information obtained by the department under this section may be used only for statistical purposes  
3 and such information shall not be released in a manner which would lead to or permit the  
4 identification of the person for whom the procedure was performed. Any releases of the information  
5 obtained shall not disclose or permit the identification of any person filing a report, the facility at  
6 which the procedure was performed, or the identity of any person licensed to practice medicine and  
7 surgery who submits a report to the department under this section, except as follows:

8                   (1) Information from reports provided, including information identifying such  
9 persons and facilities, may be disclosed to the state board of medicine upon request of the board for  
10 disciplinary action conducted by the board and may be disclosed to the attorney general upon a  
11 showing that a reasonable cause exists to believe that a violation of this section has occurred. Any  
12 information disclosed to the state board of medicine or the attorney general pursuant to this section  
13 shall be used solely for the purposes of a disciplinary action or criminal proceeding.

14                   (2) Information from reports shall be provided to the federal Centers for Disease  
15 Control and Prevention for the purposes of national statistical summaries provided these summaries  
16 occur at the state level only and do not lead to any other disclosures as stated in this section.

17                   (b) A violation of this section is a class A misdemeanor.

18           2 Effective Date. This act shall take effect July 1, 2014.

**HB 1502-FN - FISCAL NOTE**

AN ACT                    relative to induced termination of pregnancy statistics.

**FISCAL IMPACT:**

The Department of Health and Human Services states this bill, as introduced, will increase state expenditures by \$85,814 in FY 2015, \$86,387 in FY 2016, \$90,332 in FY 2017 and \$94,462 in FY 2018. The Judicial Branch, Department of Justice, and New Hampshire Association of Counties, state this bill, as introduced, will increase state and county expenditures by an indeterminable amount in FY 2015 and each year thereafter. There will be no fiscal impact on state, county, and local revenue, or local expenditures.

**METHODOLOGY:**

The Judicial Branch states this bill would require the Department of Health and Human Services to produce an annual statistical report of each induced termination of pregnancy. The report would be submitted to the legislature and made available to the public. The Branch states the only fiscal impact to the Judicial Branch would be as a result of proposed RSA 126-A:4-I,V(b) which makes violations of the section a class A misdemeanor. The Branch has no information on which to estimate the number of additional class A misdemeanor prosecutions that may result from the proposed bill. The Branch indicates the estimated average cost of processing a class A misdemeanor in the district division of the circuit court will be \$66.17 in FY 2015 and \$67.64 in FY 2016. These amounts do not include the cost of potential appeals. The Branch states the cost estimates for class A misdemeanors are based on studies of judicial and clerical weighted caseload time for processing the average case and these studies are now more than 8 years old. In addition, the Branch states there have been changes during that time span with respect to processing cases that could impact average processing times.

The Department of Health and Human Services states this bill requires the Department to compile, maintain, and report on induced termination of pregnancy statistics. The Department assumes the report may be used to:

- Identify characteristics of women who are at high risk of unintended pregnancy.
- Evaluate the effectiveness of programs for reducing teen pregnancies and unintended pregnancies among women of all ages.
- Calculate pregnancy rates based on the number of pregnancies ending in abortion in conjunction with birth data and fetal loss estimates.

- Monitor changes in clinical practice patterns related to abortion, such as changes in the types of procedures used, and weeks of gestation at the time of abortion, as suggested by the Centers for Disease Control and Prevention (CDC).

The Department states a full-time Planning Analyst would be needed to: design a form to record the data per CDC recommendations; create and test a Microsoft Access database; train personnel to accurately enter the data; compile the abortion data and maintain the database; and, prepare the annual statistical report for submission to the general court and possibly the federal government. The Department estimates the annual budget for this project will be as follows:

	<u>FY 2015</u>	<u>FY 2016</u>	<u>FY 2017</u>	<u>FY 2018</u>
Planning Analyst - LG 24	\$ 45,463	\$ 47,491	\$ 49,581	\$ 51,754
Benefits	\$ 26,387	\$ 27,918	\$ 29,534	\$ 31,244
Current Expenses	\$ 2,000	\$ 2,000	\$ 2,000	\$ 2,000
Equipment	\$ 3,500	\$ -	\$ -	\$ -
In State Travel	\$ 1,000	\$ 1,000	\$ 1,000	\$ 1,000
Office Rent	<u>\$ 7,464</u>	<u>\$ 7,978</u>	<u>\$ 8,217</u>	<u>\$ 8,464</u>
<b>Total:</b>	\$ 85,814	\$ 86,387	\$ 90,332	\$ 94,462

The Department of Justice states the criminal offense created by this bill would typically be prosecuted by a county attorney's office, but there would be some fiscal impact to the Department in instances when an appeal would be taken to the Supreme Court. The Department states the bill may also trigger a complaint to the applicable medical licensing board. There would be some fiscal impact to the Civil Bureau for client counseling services provided to the relevant board. If the Administrative Prosecutions Unit investigates and prosecutes a complaint filed before a licensing board for violations under the bill, the services of an assistant attorney general, an investigator and a paralegal would be needed for the investigation and prosecution. The Department is not able to determine how many cases may result from this bill and therefore cannot estimate the fiscal impact.

The New Hampshire Association of Counties states to the extent more individuals are charged, convicted, and sentenced to incarceration in a county correctional facility, county expenditures will increase. The Association is unable to determine the impact on number of individuals who will be charged, convicted or incarcerated as a result of this bill to determine an exact fiscal impact. The average annual cost to incarcerate an individual in a county correctional facility is approximately \$35,000. There is no impact on county revenue.

The Judicial Council states this bill will have no fiscal impact on the Council's expenditures. The Council assumes anyone charged with a crime in the context of a business or occupation

would likely be defended or indemnified by their insurer or employer and would not meet the eligibility requirements to qualify for the appointment of counsel at state expense.