

Chapter 4

H.B. No. 13

1 AN ACT
2 relating to reporting requirements by certain physicians and health
3 care facilities for abortion complications; authorizing a civil
4 penalty.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

6 SECTION 1. Subchapter A, Chapter 171, Health and Safety
7 Code, is amended by adding Section 171.006 to read as follows:

8 Sec. 171.006. ABORTION COMPLICATION REPORTING
9 REQUIREMENTS; CIVIL PENALTY. (a) In this section "abortion
10 complication" means any harmful event or adverse outcome with
11 respect to a patient related to an abortion that is performed on the
12 patient and that is diagnosed or treated by a health care
13 practitioner or at a health care facility and includes:

- 14 (1) shock;
15 (2) uterine perforation;
16 (3) cervical laceration;
17 (4) hemorrhage;
18 (5) aspiration or allergic response;
19 (6) infection;
20 (7) sepsis;
21 (8) death of the patient;
22 (9) incomplete abortion;
23 (10) damage to the uterus; or
24 (11) an infant born alive after the abortion.

1 (b) The reporting requirements of this section apply only
2 to:

3 (1) a physician who:

4 (A) performs at an abortion facility an abortion
5 that results in an abortion complication diagnosed or treated by
6 that physician; or

7 (B) diagnoses or treats at an abortion facility
8 an abortion complication that is the result of an abortion
9 performed by another physician at the facility; or

10 (2) a health care facility that is a hospital,
11 abortion facility, freestanding emergency medical care facility,
12 or health care facility that provides emergency medical care, as
13 defined by Section 773.003.

14 (c) A physician described by Subsection (b)(1) shall
15 electronically submit to the commission in the form and manner
16 prescribed by commission rule a report on each abortion
17 complication diagnosed or treated by that physician not later than
18 the end of the third business day after the date on which the
19 complication is diagnosed or treated. Each health care facility
20 described by Subsection (b)(2) shall electronically submit to the
21 commission in the form and manner prescribed by commission rule a
22 report on each abortion complication diagnosed or treated at the
23 facility not later than the 30th day after the date on which the
24 complication is diagnosed or treatment is provided for the
25 complication.

26 (d) The commission shall develop a form for reporting an
27 abortion complication under Subsection (c) and publish the form on

1 the commission's Internet website. The executive commissioner by
2 rule may adopt procedures to reduce duplication in reporting under
3 this section.

4 (e) A report under this section may not identify by any
5 means the physician performing an abortion, other than a physician
6 described by Subsection (b)(1), or the patient on whom the abortion
7 was performed.

8 (f) A report under this section must identify the name of
9 the physician submitting the report or the name and type of health
10 care facility submitting the report and must include, if known, for
11 each abortion complication:

12 (1) the date of the abortion that caused or may have
13 caused the complication;

14 (2) the type of abortion that caused or may have caused
15 the complication;

16 (3) the gestational age of the fetus at the time the
17 abortion was performed;

18 (4) the name and type of the facility in which the
19 abortion was performed;

20 (5) the date the complication was diagnosed or
21 treated;

22 (6) the name and type of any facility other than the
23 reporting facility in which the complication was diagnosed or
24 treated;

25 (7) a description of the complication;

26 (8) the patient's year of birth, race, marital status,
27 and state and county of residence;

1 (9) the date of the first day of the patient's last
2 menstrual period that occurred before the date of the abortion that
3 caused or may have caused the complication;

4 (10) the number of previous live births of the
5 patient; and

6 (11) the number of previous induced abortions of the
7 patient.

8 (g) Except as provided by Section 245.023, all information
9 and records held by the commission under this section are
10 confidential and are not open records for the purposes of Chapter
11 552, Government Code. That information may not be released or made
12 public on subpoena or otherwise, except release may be made:

13 (1) for statistical purposes, but only if a person,
14 patient, or health care facility is not identified;

15 (2) with the consent of each person, patient, and
16 facility identified in the information released;

17 (3) to medical personnel, appropriate state agencies,
18 or county and district courts to enforce this chapter; or

19 (4) to appropriate state licensing boards to enforce
20 state licensing laws.

21 (h) A report submitted under this section must include the
22 most specific, accurate, and complete reporting for the highest
23 level of specificity.

24 (i) The commission shall develop and publish on the
25 commission's Internet website an annual report that aggregates on a
26 statewide basis each abortion complication required to be reported
27 under Subsection (f) for the previous calendar year. The annual

1 report may not include any duplicative data.

2 (j) A physician described by Subsection (b)(1) or health
3 care facility that violates this section is subject to a civil
4 penalty of \$500 for each violation. The attorney general, at the
5 request of the commission or appropriate licensing agency, may file
6 an action to recover a civil penalty assessed under this subsection
7 and may recover attorney's fees and costs incurred in bringing the
8 action. Each day of a continuing violation constitutes a separate
9 ground for recovery.

10 (k) The third separate violation of this section
11 constitutes cause for the revocation or suspension of a physician's
12 or health care facility's license, permit, registration,
13 certificate, or other authority or for other disciplinary action
14 against the physician or facility by the appropriate licensing
15 agency.

16 (1) The commission shall notify the Texas Medical Board of
17 any violations of this section by a physician.

18 SECTION 2. Not later than January 1, 2018:


19 (1) the Health and Human Services Commission shall
20 develop the forms required by Section 171.006, Health and Safety
21 Code, as added by this Act; and

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

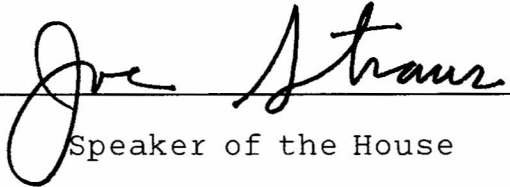
25 SECTION 3. The Health and Human Services Commission shall
26 establish an electronic reporting system for purposes of Section
27 171.006, Health and Safety Code, as added by this Act, as soon as

1 practicable after the effective date of this Act.

2 SECTION 4. This Act takes effect immediately if it receives
3 a vote of two-thirds of all the members elected to each house, as
4 provided by Section 39, Article III, Texas Constitution. If this
5 Act does not receive the vote necessary for immediate effect, this
6 Act takes effect on the 91st day after the last day of the
7 legislative session.

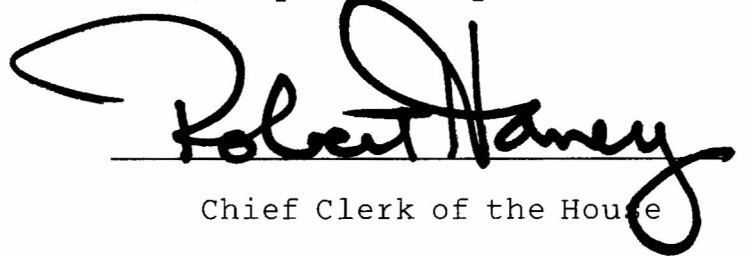


President of the Senate



Speaker of the House

I certify that H.B. No. 13 was passed by the House on July 28, 2017, by the following vote: Yeas 94, Nays 45, 1 present, not voting.



Chief Clerk of the House

I certify that H.B. No. 13 was passed by the Senate on August 11, 2017, by the following vote: Yeas 22, Nays 9.



Secretary of the Senate


APPROVED: 8-15-2017

Date



Governor

FILED IN THE OFFICE OF THE
SECRETARY OF STATE
4 PM O'CLOCK



AUG 15 2017
Secretary of State

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATURE 1st CALLED SESSION - 2017

August 3, 2017

TO: Honorable Charles Schwertner, Chair, Senate Committee on Health & Human Services

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB13 by Capriglione (Relating to reporting requirements by certain physicians and health care facilities for abortion complications; authorizing a civil penalty.), **As Engrossed**

No significant fiscal implication to the State is anticipated.

The bill would require health care facilities and physicians to report certain abortion complications to the Health and Human Services Commission (HHSC). HHSC would be required to develop a form and an electronic system for reporting abortion complications, following certain criteria, by January 1, 2018. HHSC would be required to develop and publish an annual report that aggregates each abortion complication on a statewide basis. Physicians and facilities that fail to comply with reporting requirements would be subject to a civil penalty of \$500 for each violation and at the request of HHSC, the Attorney General would be permitted to file an action to recover the penalty. Physicians and facilities that commit three separate violations could be subject to disciplinary action or the revoking of their license, permit, registration, certificate, or other authority. HHSC would be required to notify the Texas Medical Board of any violation committed by a physician. The executive commissioner of HHSC would be required to adopt any rules necessary to implement provisions of the bill by January 1, 2018. The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on the 91st day after the last day of the legislative session.

It is assumed the provisions of the bill can be implemented within the existing resources of HHSC, DSHS, the Office of Attorney General, and any regulatory agency.

Local Government Impact

There could be costs associated with reporting for local hospitals; however, the fiscal impact cannot be determined at this time.

Source Agencies: 212 Office of Court Administration, Texas Judicial Council, 302 Office of the Attorney General, 503 Texas Medical Board, 529 Health and Human Services Commission, 537 State Health Services, Department of

LBB Staff: UP, RGU, AG, LR, JGA, KCA

LEGISLATIVE BUDGET BOARD
Austin, Texas

FISCAL NOTE, 85TH LEGISLATURE 1st CALLED SESSION - 2017

July 21, 2017

TO: Honorable Byron Cook, Chair, House Committee on State Affairs

FROM: Ursula Parks, Director, Legislative Budget Board

IN RE: HB13 by Capriglione (Relating to reporting requirements by certain physicians and health care facilities for abortion complications; authorizing a civil penalty.), **As Introduced**

No significant fiscal implication to the State is anticipated.

The bill would require health care facilities and physicians to report certain abortion complications to the Health and Human Services Commission (HHSC). HHSC would be required to develop a form and an electronic system for reporting abortion complications, following certain criteria, by January 1, 2018. HHSC would be required to develop and publish an annual report that aggregates each abortion complication on a statewide basis. Physicians and facilities that fail to comply with reporting requirements would be subject to a civil penalty of \$500 for each violation and at the request of HHSC, the Attorney General would be permitted to file an action to recover the penalty. Physicians and facilities that commit three separate violations could be subject to disciplinary action or the revoking of their license, permit, registration, certificate, or other authority. HHSC would be required to notify the Texas Medical Board of any violation committed by a physician. The executive commissioner of the Health and Human Services Commission (HHSC) would be required to adopt any rules necessary to implement provisions of the bill by January 1, 2018. The bill would take effect immediately upon a two-thirds vote from all members of each house or, if such a vote is not received, on the 91st day after the last day of the legislative session.

It is assumed the provisions of the bill can be implemented within the existing resources of HHSC, DSHS, the Office of Attorney General, and any regulatory agency.

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