1	State of Arkansas	As Engrossed: H2/20/19	
2	92nd General Assembly	A Bill	
3	Regular Session, 2019	HOUSE BILL 1453	
4			
5	By: Representatives Penzo, Lundstrum, Breaux, Brown, Christiansen, Coleman, C. Cooper, Crawford,		
6	Evans, Hollowell, Maddox, J. 1	Mayberry, Payton, Pilkington, Rye, B. Smith, Sullivan	
7	By: Senator K. Hammer		
8			
9		For An Act To Be Entitled	
10		REATE THE PERINATAL PALLIATIVE CARE	
11	INFORMATION	ACT; AND FOR OTHER PURPOSES.	
12			
13		C., b.4:41 o	
14	mo an	Subtitle	
15		EATE THE PERINATAL PALLIATIVE CARE	
16	INFUR	MATION ACT.	
17			
18 19	ספ זיי פאגרייפה פע ייטפ רו	NERAL ASSEMBLY OF THE STATE OF ARKANSAS:	
20	DE II ENACIED DI INE GI	NEAL ASSEMBLI OF THE STATE OF ARRANSAS:	
21	SECTION 1 Arkar	sas Code Title 20, Chapter 16, is amended to add an	
22	additional subchapter t		
23	-	) — Perinatal <i>Palliative Care</i> Information Act	
24	<u>babonapeor 2</u>	TOTALIGUE TUTTE CONTROL THE CO	
25	20-16-2001. Titl	e.	
26		hall be known and may be cited as the "Perinatal	
27	Palliative Care Informa		
28			
29	20-16-2002. Legi	slative findings and purpose.	
30	(a) The General	Assembly finds that:	
31	<u>(1) As dia</u>	gnosis of prenatal conditions improve, more lethal	
32	fetal anomalies are dia	gnosed earlier in pregnancy;	
33	(2)(A) Cur	rently, parents are often given minimal options.	
34	<u>(B)</u>	Parents must choose between terminating the pregnancy	
35	or simply waiting for t	he child to die;	
36	<u>(3) The ma</u>	jority of parents in situation as described in	

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1	subdivision (a)(2) of this section choose to terminate the pregnancy with		
2	only twenty percent (20%) of parents deciding to continue the pregnancy;		
3	(4) Studies indicate that choosing to terminate a pregnancy can		
4	pose severe long-term psychological risks for a woman including the risk of		
5	post-traumatic stress, depression, and anxiety;		
6	(5) Parents who choose to continue the pregnancy under a		
7	supportive, compassionate care of a perinatal palliative care team report		
8	being emotionally and spiritually prepared for the birth of a child; and		
9	(6) Studies reveal that when given the option, at least eighty		
10	to eighty-seven percent (80-87%) of parents choose to continue their		
11	pregnancies in a supportive environment of perinatal palliative care.		
12	(b) It is the purpose of this subchapter to:		
13	(1) Guarantee that a woman considering an abortion after a		
14	diagnosis of a lethal fetal anomaly is presented with information on the		
15	option of perinatal palliative care; and		
16	(2) Ensure that any abortion choice that a woman makes has been		
17	fully informed.		
18			
19	20-16-2003. Definitions.		
20	As used in this subchapter:		
21	(1)(A) "Abortion" means the act of using or prescribing any		
22	instrument, medicine, drug, or any other substance, device, or means with the		
23	intent to terminate the clinically diagnosable pregnancy of a woman, with		
24	knowledge that the termination by any of those means will with reasonable		
25	likelihood cause the death of the unborn child.		
26	(B) An act under subdivision (1)(A) of this section is not		
27	an abortion if the act is performed with the intent to:		
28	(i) Save the life or preserve the health of the		
29	unborn child;		
30	(ii) Remove a dead unborn child caused by		
31	spontaneous abortion; or		
32	(iii) Remove an ectopic pregnancy;		
33	(2) "Lethal fetal anomaly" means a fetal condition diagnosed		
34	before birth that will result in the death of the unborn child with		
35	reasonable certainty within three (3) months of the birth;		
36	(3) "Medical emergency" means based on the good faith clinical		

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1	judgment of the physician, a condition that complicated the medical condition		
2	of the pregnant woman as to necessitate the immediate termination of the		
3	pregnancy to avert her death or for which a delay will create a serious risk		
4	of substantial and irreversible impairment of a major bodily function;		
5	(4)(A) "Perinatal palliative care" means comprehensive support		
6	to the pregnant woman and her family that includes support from the time of		
7	diagnosis, through the time of birth and the death of the infant, and through		
8	the postpartum period.		
9	(B) "Perinatal palliative care" may include without		
10	limitation counseling and medical care by maternal-fetal medical specialists,		
11	obstetricians, neonatologists, anesthesia specialists, clergy, social		
12	workers, and specialty nurses focused on alleviating fear and ensuring that		
13	the woman and her family experience the life and death of the child in a		
14	comfortable and supportive environment; and		
15	(5) "Physician" means a person licensed to practice medicine in		
16	this state, including a medical doctor and a doctor of osteopathy.		
17			
18	20-16-2004. Informed consent for abortion to include perinatal		
19	palliative care information.		
20	(a) Except in the case of a medical emergency, consent to an abortion		
21	when the unborn child has been diagnosed with a lethal fetal anomaly is		
22	voluntary and informed only if at least seventy-two (72) hours before the		
23	abortion:		
24	(1) The physician performing the abortion has verbally informed		
25	the pregnant woman that perinatal palliative care services are available and		
26	has offered perinatal palliative care services as an alternative to abortion;		
27	<u>and</u>		
28	(2) The pregnant woman is given a list of perinatal palliative		
29	care services available both in the state and nationally that is prepared by		
30	the Department of Health and organized geographically by location.		
31	(b) If the pregnant woman declines perinatal palliative care services,		
32	the pregnant woman shall certify in writing that:		
33	(1) She declines the perinatal palliative care services; and		
34	(2) She has received the materials described in subdivision		
35	(a)(2) of this section.		
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1	20-16-2005. Professional sanctions.		
2	(a) A violation of this subchapter shall constitute unprofessional		
3	conduct and shall result in the revocation of a physician's license to		
4	practice medicine.		
5	(b) A violation of this subchapter may be used as the basis for:		
6	(1) Denying an application for licensure, certification, permit,		
7	registration, or other form of permission required to practice or engage in a		
8	trade, occupation, or profession;		
9	(2) Denying an application for renewal of licensure,		
10	certification, permit, registration, or other form of permission required to		
11	practice or engage in a trade, occupation, or profession; and		
12	(3) Revoking a licensure, certification, permit, registration,		
13	or other form of permission required to practice or engage in a trade,		
14	occupation, or profession.		
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16	20-16-2006. Right of intervention.		
17	The General Assembly by joint resolution may appoint one (1) or more of		
18	its members who sponsored or cosponsored this subchapter in his or her		
19	official capacity to intervene as a matter of right in any case in which the		
20	constitutionality of this subchapter is challenged.		
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22	SECTION 2. DO NOT CODIFY. Publication of materials.		
23	The Department of Health shall publish or cause to be published the		
24	printed materials described in § 20-16-2004 in English, Spanish, and any		
25	other appropriate languages within ninety (90) days of the effective date of		
26	this act.		
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28	/s/Penzo		
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