HOUSE RESEARCH ORGANIZATION bill analysisSB 24 (2nd reading) Lucio, et al. (Paddie et al.)	
SUBJECT:	Requiring hand-delivered information to pregnant women before abortion
COMMITTEE:	Public Health — favorable, without amendment
VOTE:	8 ayes — Wray, Allison, Frank, Lucio, Ortega, Price, Sheffield, Zedler
	0 nays
	3 present not voting — S. Thompson, Coleman, Guerra
SENATE VOTE:	On final passage, April 23 — 22-9 (Alvarado, Johnson, Menéndez, Miles, Powell, Rodríguez, Watson, West, Whitmire)
WITNESSES:	No public hearing
BACKGROUND:	Health and Safety Code ch. 171 establishes the Woman's Right to Know Act and specifies that a person may not perform an abortion on a woman without the woman's voluntary and informed consent. Sec. 171.012(a)(1) and sec. 171.012(a)(2) require the physician or physician's agent to inform the pregnant woman of the physician's name, the associated medical risks of an abortion procedure and pregnancy, medical and social services assistance, and agencies that provide pregnancy prevention counseling. This subsection also requires the physician or physician's agent to provide the pregnant woman with certain printed materials described by sec. 171.014.
	Sec. 171.014 requires the Department of State Health Services to publish informational materials that include:
	 the above information in sec. 171.012; a list of adoption agencies and free sonogram services; and a description of an unborn child's characteristics.

Sec. 171.012(b) prohibits information under sec. 171.012(a)(1) and sec. 171.012(a)(2) from being provided by audio or video recording and requires the information to be provided at least 24 hours before the

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abortion will be performed. If the pregnant woman lives less than 100 miles from the nearest licensed abortion facility or a facility that performs more than 50 abortions in any 12-month period, the information must be provided orally and in person in a private and confidential setting. If the pregnant woman lives 100 miles or more from the nearest licensed abortion facility or a facility that performs more than 50 abortions in any 12-month period, the information must be provided orally by telephone or in person in a private and confidential setting. DIGEST: SB 24 would require that information required to be provided orally by telephone by a physician to a pregnant woman on whom an abortion would be performed and who lived at least 100 miles away from the nearest licensed abortion facility be on a private call. The bill also would require a physician who would perform an abortion, or the physician's designee, to hand-deliver to the pregnant woman a copy of the informational materials described by Health and Safety Code sec. 171.014 under the following circumstances: on the day of the required consultation for a pregnant woman who lived less than 100 miles from the nearest licensed abortion facility or a facility that performed more than 50 abortions in any 12-month period; or before any sedative or anesthesia was administered to the pregnant woman on the day of the abortion and at least two hours before the abortion if the woman lived at least 100 miles away from the nearest abortion facility or facility that performed more than 50 abortions in any 12-month period. The bill would take effect September 1, 2019, and would apply only to an abortion performed on or after that day. **SUPPORTERS** SB 24 would close loopholes in current law by clarifying that a required SAY: phone consultation between a physician and a pregnant woman seeking an abortion be conducted in private. Observers have reported that some physicians conduct simultaneous conference calls with multiple women

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	rather than speaking privately to each woman individually. Requiring a private telephonic consultation would enhance confidentiality and align with other medical standards that require private patient consultations to occur in advance of surgical procedures.
	By requiring a physician or physician's agent to hand-deliver the informational materials to a woman seeking an abortion, the bill would ensure that the woman received accurate information on all available resources before deciding whether to have an abortion.
OPPONENTS SAY:	By requiring informational materials to be hand-delivered to a woman seeking an abortion, SB 24 would further intimidate women who want to make the best decision for their own bodies without interference in the doctor-patient relationship. The bill is unnecessary because current law already requires information be provided to women seeking abortions.