### SESSION OF 2024

### SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2749

As Amended by House Committee on Health and Human Services

### Brief\*

HB 2749, as amended, would amend reporting requirements for abortions performed in Kansas.

# Reporting Requirements

The bill would provide for the written report of pregnancies lawfully terminated to be submitted by medical care facilities and persons licensed to practice medicine and surgery to the Secretary of Health and Environment (Secretary) on a biannual basis. [Note: Current law requires facilities and providers to submit these reports on an annual basis.]

## Reporting Questions

The bill would require, except in the case of a medical emergency, each patient to be asked, prior to the termination of a pregnancy, to indicate the most important factor regarding their reason for deciding to seek an abortion. The bill would provide the following reasons as options to be offered:

- Having a baby would interfere with the patient's education, employment, or career;
- The patient cannot afford a child;

<sup>\*</sup>Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at http://www.kslegislature.org

- The patient already has enough, or too many, children:
- The patient's husband or partner is abusive to the patient or their children;
- The patient's husband or partner wants the patient to have an abortion;
- The patient does not have enough support from family or others to raise a child;
- The pregnancy is the result of rape;
- The pregnancy is the result of incest;
- The pregnancy threatens the patient's physical health;
- The pregnancy threatens the patient's mental or emotional health; or
- The child would have a disability.

If the patient declines to answer, that response would be recorded.

The bill would require each report to include, for the period of time covered by the report:

- The number of times each of the reasons was described as the most important; and
- The number of times a patient seeking an abortion was asked about the reasons and declined to answer.

Each report would also be required to include:

 The patient's age in years on the patient's last birthday;

- The patient's marital status at the time of the abortion;
- The state or U.S. territory of residence of the patient or, if the patient is not a resident of the United States, the patent's country of residence;
- The patient's race and, if applicable, the Hispanic origin of the patient;
- The highest level of education completed by the patient;
- Whether, in the last 30 days prior to the abortion, the patient received services, financial assistance (excluding financial assistance in obtaining an abortion), or other assistance from a nonprofit organization that supports pregnant women;
- Whether the patient reported having experienced domestic violence in the 12 months prior to the abortion;
- Whether the patient is living in a place that the patient considers to be safe, stable, and affordable;
- Whether a report of physical, mental, or emotional abuse or neglect was made where the patient was the victim; and
- The method by which the abortion was performed on the patient.

## Confidentiality and Disclosure

The bill would extend the expiration of provisions related to confidentiality and disclosure by one year to July 1, 2029, unless the Legislature reviews and reenacts the provisions prior to that date.

# Kansas Department of Health and Environment Reporting

The bill would provide for the public report on abortions performed in Kansas issued by the Secretary to be released on a biannual basis. The bill would also specify the report would be issued no later than 30 days after the end of the reporting period for the information contained in the report.

# Severability

The bill would state that provisions in KSA 2023 Supp. 65-455 are severable; if any provision, phrase, or clause or its application to any person or circumstance is found to be invalid, the remaining provisions, phrases, or clauses would remain effective.

## **Background**

The bill was introduced by the House Committee on Health and Human Services at the request of Representative Bryce on behalf of Kansans for Life.

## House Committee on Health and Human Services

In the House Committee hearing, **proponent** testimony was provided by representatives of Alliance Defending Freedom, Kansas Family Voice, and Kansans for Life, who stated several elements of the reporting information requested in the bill are already being collected by the Kansas Department of Health and Environment (KDHE), and the data would help policymakers and organizations obtain a better understanding of the reasons why women seek abortions.

Written-only proponent testimony was provided by a representative of Kansas Catholic Conference and a private citizen.

**Opponent** testimony was provided by representatives of Planned Parenthood Great Plains Votes and Trust Women Foundation, who stated the bill would place an undue burden on medical providers and women seeking abortions and expressed concerns about increasing the stigma around abortion.

Written-only opponent testimony was provided by representatives of Loud Light Civic Action and Mainstream and 18 private citizens.

No other testimony was provided.

The House Committee amended the bill to:

- Change references to "woman" to "patient";
- Remove direction for the patient to rank the second and third most important reasons for seeking an abortion;
- Remove the requirement to include the number of times each reason was indicated as the second or third most important reason for seeking an abortion in required reports;
- Remove the following factors from the survey:
  - Having a baby would interfere with the patient's employment or career;
  - The patient does not feel mature enough to raise a child or, if applicable, an additional child:
  - The patient's parent or parents want the patient to have an abortion;
  - The patient does not want others to know that the patient had sexual intercourse or became pregnant; and

• The patient fears that the patient would neglect or abuse an unwanted child.

### **Fiscal Information**

According to the fiscal note prepared by the Division of the Budget on the bill, as introduced, KDHE indicates enactment of the bill would require additional expenditures totaling \$10,000, all from the State General Fund, in FY 2024. This would be to add additional fields to the electronic reporting system for abortion data. They agency states it would need to work with the system vendor to determine a timeline of when the changes would be completed. KDHE would also need to update paper worksheets and additional data fields would need to be analyzed and edited. The agency notes amendments to KAR 28-56-2 would also be required. The Office of Judicial Administrations states enactment of the bill would not have a fiscal effect on the Judicial Branch. Any fiscal effect associated with the bill is not reflected in *The FY 2025 Governor's Budget Report*.

Abortion; reporting; health; Secretary of Health and Environment