

FIRST REGULAR SESSION

HOUSE BILL NO. 371

99TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE NEWMAN.

0227H.011

D. ADAM CRUMBLISS, Chief Clerk

AN ACT

To amend chapter 191, RSMo, by adding thereto two new sections relating to the compassionate assistance for rape emergencies (CARE) act, with penalty provisions.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 191, RSMo, is amended by adding thereto two new sections, to be known as sections 191.713 and 191.714, to read as follows:

191.713. 1. Sections 191.713 and 191.714 shall be known and may be cited as the "Compassionate Assistance for Rape Emergencies (CARE) Act".

2. As used in sections 191.713 and 191.714, unless the context clearly indicates otherwise, the following terms shall mean:

(1) "Emergency care to sexual assault victims", medical examinations, procedures, or services provided at a hospital to a sexual assault victim following an alleged rape;

(2) "Emergency contraception", any drug or device approved by the Food and Drug Administration that prevents pregnancy after sexual intercourse;

(3) "Health care facility", any urgent care center or facility that offers treatment for patients during normal business, after-business, or weekend hours and that is affiliated with a licensed hospital;

(4) "Medically and factually accurate and objective", verified or supported by the weight of research conducted in compliance with accepted scientific methods and published in peer-reviewed journals if applicable; or comprising information that leading professional organizations and agencies with relevant expertise in the field, such as the American College of Obstetricians and Gynecologists, recognize as accurate and objective;

(5) "Sexual assault", as defined in section 566.040;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

18 (6) "Sexual assault victim", a female who is alleged to have been raped and is
19 presented as a patient.

 191.714. 1. It shall be the standard of care for any hospital and any health care
2 facility that provides emergency care to sexual assault victims to:

3 (1) Provide each sexual assault victim with medically and factually accurate and
4 objective written and oral information about emergency contraception;

5 (2) Orally inform each sexual assault victim of her option to be provided emergency
6 contraception at the hospital;

7 (3) Provide the complete regimen of emergency contraception immediately at the
8 hospital or health care facility to each sexual assault victim who requests it; and

9 (4) Follow the Department of Justice protocols on HIV/STD screening and
10 prophylactic treatment as referenced in 19 CSR 40-10.010 and the sexual assault forensic
11 exam checklist promulgated by the department of health and senior services.

12 2. Hospitals and health care facilities shall ensure that each person who provides
13 care to sexual assault victims is provided with medically and factually accurate and
14 objective information about emergency contraception.

15 3. The department of health and senior services shall develop, prepare, and
16 produce informational materials relating to emergency contraception for the prevention
17 of pregnancy for distribution in any hospital or health care facility in the state in quantities
18 sufficient to comply with the requirements of this section. The director, in collaboration
19 with community sexual assault programs, may also approve informational materials from
20 other sources.

21 4. The informational materials shall:

22 (1) Be medically and factually accurate and objective;

23 (2) Be clearly written and readily comprehensible in a culturally competent manner
24 as the department deems necessary to inform victims of sexual assault; and

25 (3) Explain the nature of emergency contraception, including its use, safety,
26 efficacy, and availability, and that it does not cause abortion.

27 5. The department of health and senior services shall respond to complaints and
28 shall periodically determine whether hospitals and health care facilities are complying with
29 the provisions of this section. The department may use all investigative tools available to
30 verify compliance. If the department determines that a hospital or health care facility is
31 not in compliance, the department shall:

32 (1) Impose an administrative penalty of five thousand dollars per woman who is
33 denied medically and factually accurate and objective information about emergency
34 contraception or who is not offered or provided emergency contraception; and

35 (2) Impose an administrative penalty of five thousand dollars for failure to comply
36 with the provisions of this section and for every thirty days that a hospital or health care
37 facility is not in compliance, an additional penalty of five thousand dollars shall be
38 imposed.

39 6. The department shall promulgate rules to implement the provisions of sections
40 191.713 and 191.714.

41 7. Any rule or portion of a rule, as that term is defined in section 536.010, that is
42 created under the authority delegated in this section shall become effective only if it
43 complies with and is subject to all of the provisions of chapter 536 and, if applicable,
44 section 536.028. This section and chapter 536 are nonseverable, and if any of the powers
45 vested with the general assembly pursuant to chapter 536 to review, to delay the effective
46 date, or to disapprove and annul a rule are subsequently held unconstitutional, then the
47 grant of rulemaking authority and any rule proposed or adopted after August 28, 2017,
48 shall be invalid and void.

✓