

## THE ABORTION INDUSTRY'S WISHLIST BILL: HOUSE BILL 26 REMOVES CURRENT PROTECTIONS, INCLUDING BORN-ALIVE SAFEGUARDS

## **KEY POINTS:**

- Eliminates all current pro-life protections, including:
  - The 24-hour waiting period
  - Informed consent before having an abortion
  - Parental consent requirement for minors to undergo abortion
  - Protections for babies born alive from a failed abortion
- Expands who can perform abortions beyond medical doctors to include nurse anesthetists, nurse practitioners, and physician assistants.
- Adds "mental health" (as determined by physician) as a reason for late-term abortions after 24 weeks (6 months) of pregnancy. In practice, this is used in other states to remove any time limits on abortions.
- Removes all mentions of "unborn child" (which appears 33 times in the PA Abortion Control Act) and replaces it with "pregnancy."
- Erases the terms "woman" or "mother" and substitutes "pregnant individuals" or "patients."

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H ouse Bill 26 from Rep. Howard is radical legislation that would repeal Pennsylvania's long-standing Abortion Control Act and replace it with a completely new legal framework. It is the "omnibus" abortion bill that benefits the industry and removes common sense protections.

The *Dobbs* decision overturning *Roe v. Wade*, the law of the land on abortion for nearly 50 years, has led the abortion movement to ramp up their aggressive campaign to promote abortion — without restrictions, sensible delays, medical examinations, or safety regulations.

House Bill 26 is euphemistically named the "Reproductive Freedom Act."

HB 26 would repeal and replace many of the provisions of the Abortion Control Act—including the significant shift of moving the subject from the Crimes Code (Title 18, Chapter 32) and placing it under the consolidated Health and Welfare Code (35 Pa. C.S.). Placing abortion laws under the health code is misguided and only serves to support the narrative that abortion is health care even though it results in the ending of a life. This is a seismic shift from how Pennsylvania treats the protection of life under the Crimes Code, including our fetal homicide law.

Although HB 26 removes abortion laws from the Crimes Code, it does amend a section of the Crimes Code that could be used to **prosecute anyone who councils a woman to not get an abortion.** The new section states that a person who attempts to "coerce or

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threaten an individual to undergo or *forego* an abortion" may be charged with aggravated assault, a second-degree felony. A second-degree felony carries a maximum period of incarceration of 5 to 10 years and a maximum fine of \$25,000. It would also give a police officer the right of arrest without a warrant if the officer believes probable cause exists that Section 2702 (a) (10) has been violated.

The word "coerce" can be very subjective and easily misinterpreted. This definition of aggravated assault would have a chilling and intimidating effect on counselors and ministers for merely encouraging and empowering a woman to choose life and carry her baby to term.

Currently, abortion is legal in Pennsylvania up to 24 weeks (23 weeks and 6 days to be exact) of gestation, which is almost 6 months of pregnancy. HB 26 uses a tricky loophole to remove time restrictions on abortion without stating it clearly. In this legislation abortion would be legal beyond 24 weeks if a woman's physician reasonably believes that the abortion is, in the physician's good faith medical judgment, necessary to prevent an extreme risk to the patient's mental health. A serious risk of substantial detriment to the mental health of the patient is considered to be a "medical emergency" and therefore an exception to the 24-week limitation. The concurrence of a second physician is required. However, it is not clear if a CRNP, a CRNA, or a PA would be qualified to provide the second opinion. It is also important to note that neither a specified psychiatric diagnosis nor an examination by a mental health specialist is required. Such mental health exceptions have been used in other states to ignore any time restrictions and allow abortion all nine months of pregnancy.

With complete disregard for the health and safety of a pregnant woman, HB 26 allows a patient to meet with a physician electronically via telemedicine to satisfy the physician's legal requirement to determine gestational age before a nonsurgical abortion can be prescribed. In making the determination of gestational age, the physician makes inquiries of the patient without an in-person medical examination or ultrasound. Also, in the course of providing nonsurgical abortions via telemedicine, Rh testing requirements are waived, thereby placing a woman's health at risk for future pregnancies.

Complications from chemical abortions have tripled in past years. Women are placed at an even higher risk of complications without crucial steps like ultrasounds to 1) verify their baby's gestational age and 2) confirm the pregnancy is not ectopic. By removing basic health and safety practices, HB 26 puts the bottom dollar of the abortion industry over the well-being of women.

While there are numerous other harms listed in the overview, the final we wanted to highlight was HB 26's removal of Born-Alive protections. Currently, if a baby is born alive as the result of a failed abortion, everything possibly must be done to save the child or, at the very least, keep the

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baby comfortable if not viable. This is common sense and the bare minimum to be humane. HB 26 removes this protection, allowing infants born alive to be left to die or to be thrown away.



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