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Senate Bill 794 (Substitute S-2 as reported)
Sponsor: Senator Joanne G. Emmons
Committee: Families, Mental Health and Human Services

CONTENT

The bill would amend the Public Health Code to prohibit a health professional and a health facility or agency from seeking or accepting reimbursement from an insurer, health maintenance organization (HMO), or health care corporation for any services provided that were directly related to the performance of an elective abortion unless the reimbursement was from an optional rider as would be required under House Bills 4828 (H-4) or Senate Bill 645 (S-1). The bill would not create a right to abortion.

"Elective abortion" would mean the intentional use of an instrument, drug, or other substance or device to terminate a woman's pregnancy for a purpose other than to increase the probability of a live birth, to preserve the life or health of the child after live birth, or to remove a dead fetus, but would not include the prescription or use of a drug or device intended as a contraceptive, or an intentional action by a physician to terminate a woman's pregnancy if her physical condition, in the physician's reasonable medical judgment, necessitated the termination of her pregnancy to avert her death.

The bill could not be construed to affect legitimate and routine obstetric care, diagnostic testing, or other nonabortion procedures. The bill would not restrict the right of a health care professional or a health facility or agency employee to discuss abortion or abortion services with a patient who was pregnant.

In addition to administrative penalties under the Code, a licensee or registrant who violated the bill, or a health facility or agency that violated the bill, would be liable for a civil fine of up to \$10,000 per violation. The Department of Consumer and Industry Services (DCIS) would have to investigate an alleged violation and the Attorney General, in cooperation with the DCIS, could bring an action to enforce the bill.

The bill would take effect on July 1, 2001, and would apply to a licensee or registrant when seeking or accepting reimbursement from an insurer, an HMO, or a health care corporation under a policy, certificate, or contract issued or renewed on or after that date.

Proposed MCL 333.16240 & 333.20195

Legislative Analyst: P. Affholter

FISCAL IMPACT

The bill would require the Office of Health Services and Bureau of Health Systems to conduct additional investigations of health professionals and health facilities that were found to be in violation of the bill. The bill would authorize the Department to assess fines, which would offset these additional costs.

Date Completed: 12-7-00

Fiscal Analyst: M. Tyszkiewicz