A BILL TO BE ENTITLED
AN ACT TO PROVIDE THAT FACILITIES WHERE ABORTIONS ARE PERFORMED MUST COMPLY WITH CERTAIN CERTIFICATION REQUIREMENTS, TO REQUIRE PHYSICIANS WHO PERFORM ABORTIONS AFTER THE SIXTEENTH AND TWENTIETH WEEK OF PREGNANCY TO PROVIDE CERTAIN INFORMATION TO THE DEPARTMENT OF HEALTH AND HUMAN SERVICES, TO INCLUDE IN THE LIST OF AGGRAVATING FACTORS THAT THE DEFENDANT KNEW OR SHOULD HAVE KNOWN THAT A MINOR WAS WITNESSING THE CRIME BY SIGHT OR HEARING, AND TO APPROPRIATE FUNDS TO ASSIST WITH THE DEVELOPMENT OF A STATE-OF-THE-ART PERINATAL RESOURCE CENTER AT UNC HOSPITALS.

The General Assembly of North Carolina enacts:

SECTION 1. G.S. 14-45.1 reads as rewritten:

"§ 14-45.1. When abortion not unlawful.

..."

(a1) The Department of Health and Human Services shall annually inspect any clinic, including ambulatory surgical facilities, certified by the Department as a suitable facility for the performance of abortions. No clinic certified by the Department of Health and Human Services shall employ a person who is less than 18 years of age. Any clinic certified by the Department of Health and Human Services shall have a written agreement between the clinic and a hospital for the hospital to accept the transfer of patients who are in need of emergency care.

(b1) A physician who advises, procures, or causes a miscarriage or abortion after the sixteenth week of a woman's pregnancy shall record all of the following: the method used by the physician to determine the probable gestational age of the unborn child at the time the procedure is to be performed; the results of the methodology, including the measurements of the unborn child; and an ultrasound image of the unborn child that depicts the measurements. The physician shall provide this information, including the ultrasound image, to the Department of Health and Human Services pursuant to G.S. 14-45.1(c).

A physician who procures or causes a miscarriage or abortion after the twentieth week of a woman's pregnancy shall record the findings and analysis on which the physician based the determination that continuance of the pregnancy would threaten the life or gravely impair the health of the woman and shall provide that information to the Department of Health and Human Services pursuant to G.S. 14-45.1(c).
The information provided under this subsection shall be for statistical purposes only and the confidentiality of the patient shall be protected.

(c) The Department of Health and Human Services shall prescribe and collect on an annual basis, from hospitals or clinics, including ambulatory surgical facilities, where abortions are performed, such representative samplings of statistical summary reports concerning the medical and demographic characteristics of the abortions provided for in this section, including the information described in subsection (b1) of this section as it shall deem to be in the public interest. Hospitals or clinics where abortions are performed shall be responsible for providing these statistical summary reports to the Department of Health and Human Services. The reports shall be for statistical purposes only and the confidentiality of the patient relationship shall be protected.

(d) The requirements of G.S. 130-43–G.S. 130A-114 are not applicable to abortions performed pursuant to this section.

(e) Nothing in this section shall require a physician licensed to practice medicine in North Carolina, any nurse, or any other health care provider who shall state an objection to abortion on moral, ethical, or religious grounds shall be required to perform or participate in medical procedures which result in an abortion. The refusal of a physician, nurse, or health care provider to perform or participate in these medical procedures shall not be a basis for damages for the refusal, or for any disciplinary or any other recriminatory action against the physician, nurse, or health care provider. For purposes of this section, the phrase "health care provider" shall have the same meaning as defined under G.S. 90-410(1).

(SECTION 2. Perinatal Resource Center at UNC Chapel Hill. – There is appropriated from the General Fund to the Board of Governors of the University of North Carolina the sum of five hundred thousand dollars ($500,000) for the 2015-2016 fiscal year to be used for the planning and implementation of a perinatal resource care program at UNC Hospitals to develop a state-of-the-art perinatal resource center to serve families with complications detected by prenatal diagnosis.

SECTION 3. G.S. 15A-1340.16(d) is amended by adding a new subdivision to read:

"(13a) The defendant knew or reasonably should have known that the offense was being witnessed by sight or hearing, by a person under the age of 18 who was not involved in the commission of the offense."

SECTION 4. If any provision of this act or its application is held invalid, the invalidity does not affect other provisions or applications of this act that can be given effect without the invalid provisions or application, and to this end the provisions of this act are severable. If any provision of this act is temporarily or permanently restrained or enjoined by judicial order, this act shall be enforced as though such restrained or enjoined provisions had not been adopted, provided that whenever such temporary or permanent restraining order or injunction is stayed, dissolved, or otherwise ceases to have effect, such provisions shall have full force and effect.

SECTION 5. Section 1 of this act becomes effective January 1, 2016. G.S. 14-45.1(b1) and G.S. 14-45.1(c) as enacted by Section 1 of this act apply to abortions performed or attempted on or after January 1, 2016. Section 2 of this act becomes effective July 1, 2015. Section 3 of this act becomes effective December 1, 2015, and applies to offenses committed on or after that date. The remainder of this act is effective when it becomes law.