03/06/19 REVISOR SGS/MP 19-4180 as introduced

## SENATE STATE OF MINNESOTA NINETY-FIRST SESSION

A bill for an act

relating to health; making changes to born alive infant protections; amending

S.F. No. 2305

(SENATE AUTHORS: EICHORN, Mathews, Rarick, Kiffmeyer and Benson)

DATE
03/11/2019
0773 Introduction and first reading

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3/11/2019 773 Introduction and first reading
Referred to Health and Human Services Finance and Policy

Minnesota Statutes 2018, section 145.423, subdivisions 1, 5, by adding subdivisions. 1.3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA: 1.4 Section 1. Minnesota Statutes 2018, section 145.423, subdivision 1, is amended to read: 1.5 Subdivision 1. **Recognition**; medical eare. A born alive infant as a result of an abortion 1.6 shall be fully recognized as a human person, and accorded immediate protection under the 1.7 law. All reasonable measures consistent with good medical practice, including the 18 1.9 compilation of appropriate medical records, shall be taken by the responsible medical personnel to preserve the life and health of the born alive infant. 1.10 Sec. 2. Minnesota Statutes 2018, section 145.423, is amended by adding a subdivision to 1.11 read: 1.12 1.13 Subd. 1a. Medical care. (a) All reasonable measures consistent with good medical practice, including the compilation of appropriate medical records, shall be taken by the 1.14 responsible medical personnel to preserve the life and health of the born alive infant. 1.15 (b) Any health care practitioner present at the time the child is born alive shall exercise 1.16 the same degree of professional skill, care, and diligence to preserve the life and health of 1.17 the child as a reasonably diligent and conscientious health care practitioner would render 1.18

Sec. 2. 1

to any other child born alive at the same gestational age.

(c) Following the exercise of skill, care, and diligence required under paragraph (a), the health care practitioner shall ensure that the child born alive is immediately transported and admitted to a hospital.

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- Sec. 3. Minnesota Statutes 2018, section 145.423, is amended by adding a subdivision to read:
  - Subd. 1b. Mandatory reporting of violations. A health care practitioner or any employee of a hospital, a physician's office, or an abortion clinic who has knowledge of a failure to comply with the requirements of subdivision 1a shall immediately report the failure to the commissioner of health or a law enforcement agency.
- Sec. 4. Minnesota Statutes 2018, section 145.423, subdivision 5, is amended to read:
  - Subd. 5. Civil and disciplinary actions. (a) Any person upon whom an abortion has been performed, or the parent or guardian of the mother if the mother is a minor, and the abortion results in the infant having been born alive, may maintain an action for death of or injury to the born alive infant against the person who performed the abortion if the death or injury was a result of simple negligence, gross negligence, wantonness, willfulness, intentional conduct, or another violation of the legal standard of care.
  - (b) Any responsible medical personnel that does not take all reasonable measures consistent with good medical practice to preserve the life and health of the born alive infant, as required by subdivision  $\frac{1}{2}$ , may be subject to the suspension or revocation of that person's professional license by the professional board with authority over that person. Any person who has performed an abortion and against whom judgment has been rendered pursuant to paragraph (a) shall be subject to an automatic suspension of the person's professional license for at least one year and said license shall be reinstated only after the person's professional board requires compliance with this section by all board licensees.
  - (c) Nothing in this subdivision shall be construed to hold the mother of the born alive infant criminally or civilly liable for the actions of a physician, nurse, or other licensed health care provider in violation of this section to which the mother did not give her consent.

Sec. 4. 2