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2025

LEGISLATURE OF NEBRASKA

ONE HUNDRED NINTH LEGISLATURE

FIRST SESSION

LEGISLATIVE BILL 512

Introduced by Holdcroft, 36.

Read first time January 21, 2025

Committee: Health and Human Services

A BILL FOR AN ACT relating to public health and welfare; to amend section 38-2021, Revised Statutes Cumulative Supplement, 2024; to adopt the Chemical Abortion Safety Protocol Act; to redefine a term; to provide severability; and to repeal the original section.

Be it enacted by the people of the State of Nebraska,

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Section 1. Sections 1 to 6 of this act shall be known and may be cited as the Chemical Abortion Safety Protocol Act.

Sec. 2. For purposes of the Chemical Abortion Safety Protocol Act:

(1) Abortion-inducing drug means a drug or other substance, including a regimen of two or more drugs or substances, that is provided to a woman known to be pregnant, with the specific intent of terminating the life of her preborn child. An abortion-inducing drug shall not include a drug, medicine, or other substance that may be known to cause an abortion but is provided for other medical reasons;

(2) Adverse event means any harmful event or outcome arising out of the provision of an abortion-inducing drug, including: (a) Shock; (b) heavy or prolonged bleeding; (c) hemorrhage; (d) aspiration or allergic response; (e) infection; (f) sepsis; (g) pelvic inflammatory disease; (h) incomplete abortion; (i) failure to terminate the pregnancy; (j) missed ectopic pregnancy; (k) death; or (l) any other adverse event as defined by the federal Food and Drug Administration as reported by MedWatch.

(3) Department means the Department of Health and Human Services; and

(4) Provide, when used with regard to an abortion-inducing drug, means any act of giving, selling, dispensing, administering, transferring possession of, or prescribing an abortion-inducing drug.

Sec. 3. Before a physician provides an abortion-inducing drug, the physician shall:

(1) Examine the woman in person;

(2) Independently verify that the woman is pregnant;

(3) Determine whether the woman has an ectopic pregnancy;

(4) Document in the medical record the gestational age and location of the pregnancy;

(5) Determine the woman's blood type, and if a woman is Rh negative, offer to administer Rh immunoglobin to prevent Rh incompatibility, complications, or miscarriage in future pregnancies; and

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(6) Document in the medical record whether or not the woman received treatment for Rh negativity.

Sec. 4. A physician who provides an abortion-inducing drug, or the physician's agent, shall schedule a follow-up visit between the physician and the woman to whom the abortion-inducing drug was provided. Such follow-up visit shall occur no earlier than the third day and no later than the fourteenth day after the date the abortion-inducing drug was provided. At the follow-up visit, the physician shall:

(1) Confirm that the woman's pregnancy is completely terminated;

(2) Assess the woman for adverse events occurring after the provision of the abortion-inducing drug, including any continued blood loss; and

(3) Document any adverse events in the woman's medical record.

Sec. 5. (1) A physician who provides an abortion-inducing drug shall file a report with the department within thirty days after the end of the calendar month in which the abortion-inducing drug was provided. Such report shall include, in addition to any information required by rules and regulations adopted and promulgated by the department:

(a) The name of the physician;

(b) The name of the abortion-inducing drug provided and the date each drug was provided to the woman;

(c) The date the woman returned for a follow-up visit, if applicable;

(d) Documentation of any adverse events that occurred after provision of the abortion-inducing drug;

(e) Any follow-up treatment provided by the physician; and

(f) If the woman was referred to another health care provider, the purpose of such referral.

(2) The department shall produce a standard form for filing such report.

(3) The report shall not include any personally identifying

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information for a woman to whom an abortion-inducing drug was provided.

Sec. 6. No woman upon whom an abortion is attempted, induced, or performed shall be liable for a violation of the Chemical Abortion Safety Protocol Act.

Sec. 7. Section 38-2021, Revised Statutes Cumulative Supplement, 2024, is amended to read:

38-2021 Unprofessional conduct means any departure from or failure to conform to the standards of acceptable and prevailing practice of medicine and surgery or the ethics of the profession, regardless of whether a person, patient, or entity is injured, or conduct that is likely to deceive or defraud the public or is detrimental to the public interest, including, but not limited to:

(1) Performance by a physician of an abortion as defined in subdivision (1) of section 28-326 under circumstances when he or she will not be available for a period of at least forty-eight hours for postoperative care unless such postoperative care is delegated to and accepted by another physician;

(2) Performing an abortion upon a minor without having satisfied the requirements of sections 71-6901 to 71-6911;

(3) The intentional and knowing performance of a partial-birth abortion as defined in subdivision (8) of section 28-326, unless such procedure is necessary to save the life of the mother whose life is endangered by a physical disorder, physical illness, or physical injury, including a life-endangering physical condition caused by or arising from the pregnancy itself;

(4) Performance by a physician of an abortion in violation of the Pain-Capable Unborn Child Protection Act; ~~and~~

(5) Violation of the Preborn Child Protection Act; and ~~.~~

(6) Violation of the Chemical Abortion Safety Protocol Act.

Sec. 8. If any section in this act or any part of any section is declared invalid or unconstitutional, the declaration shall not affect

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the validity or constitutionality of the remaining portions.

Sec. 9. Original section 38-2021, Revised Statutes Cumulative Supplement, 2024, is repealed.