



Renew Massachusetts Coalition Consolidated Analysis Key Provisions of the Infanticide Bill (a.k.a. ROE Act) HB 3320 (Haddad, Livingstone) SB 1209 (Sen. Chandler)

SECTION 1. Amends the definitions section of Massachusetts abortion laws (MGL c. 112, s. 12k) to politicize the definitions of abortion and pregnancy. Existing language currently identifies pregnancy as carrying an unborn child, an abortion as destroying the unborn. This section eliminates any reference to an unborn child, including the definition of an unborn child.

SECTION 2. Deletes the current abortion laws found in Sections 12L through 12U and replaces them with new Sections 12L through 12O. The most relevant impacts are as follows:

- Removes the legal and moral obligation to save the life of a baby born alive in process of an abortion – thereby permitting infanticide.
- Eliminates all parental consent requirements for girls under the age of 18 to get an abortion. While MA currently has a judicial bypass system that allows an underage girl to seek permission from a judge instead of parents, this removes any need for adult involvement except between a girl and abortionist.
- Removes any requirement that abortions be performed in a hospital and any other safety or sanitary requirements, even for late term abortions (after 24 weeks) that are considered major surgery, and regarded as more dangerous for a woman.
- Replaces the current, already broad reasons that permit late term abortions and leaves them entirely at the discretion of the abortionist, who has a profit-making interest in the abortion. [changing “necessary to save the life of the mother, or if a continuation of her pregnancy will impose on her a substantial risk of grave impairment of her physical or **mental health**” to “necessary to protect the patient’s life or physical or mental health, or in cases of lethal fetal anomalies, or where the fetus is incompatible with sustained life outside the uterus. Medical judgment may be exercised in the light of all factors—physical, emotional, psychological, familial, and the person’s age—relevant to the well-being of the patient.]. Under this provision, a doctor can sign off on a late-term abortion simply because he concurs the woman is too young to have children, or agrees that the woman has too many children.
- Removes the current, not-enforced, 24-hour waiting period after signing a consent form.
- Removes any requirement for doctors to provide information on the dangers and hazards of abortion to women seeking abortions under the “informed consent” part of the law.
- Prohibits the Commonwealth from interfering with a woman’s decision or ability to “prevent, commence, terminate, or continue their own pregnancy.
- Removes penalties against a doctor who violates provisions of the chapter.

SECTION 3. Removes any liability for damages for doctors who perform abortions on minor girls without parental consent.

SECTION 4. Allows more tax payer dollars to pay for abortions of middle-class women who do not qualify for MassHealth by allowing Healthy Start funds to be used for abortions. Healthy Start is a program for pregnant women, new mothers, and children designed to promote better outcomes early in life. It has not been funded the last several fiscal years (discontinued after FY14), but should it be re-started, this legislation would stipulate that it could cover abortion services to women not qualifying for a taxpayer funded abortion under current programs.

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