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46TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2003

INTRODUCED BY

Michael S. Sanchez

AN ACT

RELATING TO HEALTH CARE; ENACTING THE SEXUAL ASSAULT SURVIVORS EMERGENCY CARE ACT; PROVIDING PENALTIES; DECLARING AN EMERGENCY.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

- Section 1. SHORT TITLE. -- This act may be cited as the "Sexual Assault Survivors Emergency Care Act".
- Section 2. LEGISLATIVE FINDINGS. -- The legislature finds that:
- A. one out of every five women in the United States has been sexually assaulted;
- B. each year over three hundred thousand women are sexually assaulted in the United States;
- C. a woman is sexually assaulted every six minutes in the United States;

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- D. New Mexico ranks high when compared with other states in the number of sexual assaults reported each year;
- E. after a woman is sexually assaulted, she may face the additional trauma of an unwanted pregnancy by the rapist;
- F. each year over thirty-two thousand women become pregnant as a result of sexual assault and approximately fifty percent of those pregnancies end in abortion;
- G. emergency contraception, approved for use by the federal food and drug administration, prevents pregnancy after unprotected intercourse;
- H. emergency contraception cannot and does not cause abortion:
- I. emergency contraception pills are the most commonly used method of emergency contraception and are similar to ordinary birth control pills;
- J. emergency contraception pills are as much as eighty-nine percent effective in reducing the risk of pregnancy following unprotected intercourse;
- K. delaying the first dose of emergency contraception pills by twelve hours increases the odds of pregnancy by almost fifty percent;
- L. standards of emergency care established by the American medical association require that sexual assault survivors be counseled about their risk of pregnancy and .143781.1

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offered emergency contraception;

most New Mexico hospitals do not have a clear policy on offering emergency contraception to sexual assault survivors and, therefore, few hospitals require staff to inform sexual assault survivors of the availability of emergency contraception; and

most women of reproductive age do not know about emergency contraception and, therefore, cannot ask for it. Surveys show that only eleven percent of women of reproductive age in the United States have heard of emergency contraception, and fewer still are aware that treatment must begin within seventy-two hours of a sexual assault.

DEFINITIONS. -- As used in the Sexual Assault Section 3. Survivors Emergency Care Act:

- "department" means the department of health; A.
- В. "emergency care for sexual assault survivors" means medical examinations, procedures and services provided by a hospital to a sexual assault survivor following an alleged sexual assault:
- "emergency contraception" means a drug or device approved by the federal food and drug administration that prevents pregnancy after sexual intercourse;
- D. "hospital" means a facility providing emergency or urgent health care;
- "medically and factually accurate and objective" E. . 143781. 1

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means verified or supported by the weight of research conducted in compliance with accepted scientific methods and standards; published in peer-reviewed journals; and recognized as accurate and objective by leading professional organizations and agencies with relevant expertise in the field of obstetrics and gynecology, such as the American college of obstetricians and gynecologists;

- F. "sexual assault" means the crime of criminal sexual penetration; and
- G. "sexual assault survivor" means a female who alleges or is alleged to have been sexually assaulted and who presents as a patient to a hospital.
- Section 4. EMERGENCY CARE FOR SEXUAL ASSAULT SURVIVORS--STANDARD OF CARE. --
- A. The standard of care for a hospital that provides emergency care for sexual assault survivors shall be to:
- (1) provide each sexual assault survivor with medically and factually accurate and objective written and oral information about emergency contraception;
- (2) orally inform each sexual assault survivor of her option to be provided emergency contraception at the hospital; and
- (3) provide emergency contraception immediately at the hospital to each sexual assault survivor who . 143781.1

requests it.

B. The provision of emergency contraception shall include the initial dose that the sexual assault survivor can take at the hospital as well as the subsequent dose that the sexual assault survivor may self-administer twelve hours following the initial dose.

Section 5. TRAINING.--A hospital shall ensure that all personnel who provide care to sexual assault survivors are trained to provide medically and factually accurate and objective information about emergency contraception.

Section 6. ENFORCEMENT--ADMINISTRATIVE FINES. --

A. Complaints of failure to provide services required by the Sexual Assault Survivors Emergency Care Act may be filed with the department.

- B. The department shall immediately investigate every complaint it receives regarding failure of a hospital to provide services required by the Sexual Assault Survivors Emergency Care Act to determine the action to be taken to satisfy the complaint.
- C. The department shall compile all complaints it receives regarding failure to provide services required by the Sexual Assault Survivors Emergency Care Act and shall retain the complaints for at least ten years so that they can be analyzed for patterns of failure to provide services pursuant to that act.

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- D. If the department determines that a hospital is not providing the services required in the Sexual Assault Survivors Emergency Care Act, the department shall:
- (1) impose on the hospital a fine of five thousand dollars (\$5,000) per sexual assault survivor who is denied medically and factually accurate and objective information about emergency contraception or who is not offered or provided emergency contraception;
- (2) impose on the hospital a fine of five thousand dollars (\$5,000) for each month that the hospital provides emergency services following the effective date of the Sexual Assault Survivors Emergency Care Act if the department, after investigating a complaint, determines that the hospital has failed to train hospital personnel to provide medically and factually accurate and objective information regarding the availability and effectiveness of emergency contraception; and
- (3) after a fine has been imposed for a second time pursuant to either Paragraph (1) or (2) of this subsection, suspend or revoke the license issued by the department pursuant to the Public Health Act or impose an intermediate sanction for licensure violations as provided in Section 24-1-5.2 NMSA 1978 after providing notice to the hospital and affording the hospital an opportunity for a hearing to be held pursuant to the provisions of the Public Health Act and rules of the department.

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Section 7. SEVERABILITY.--If any part or application of the Sexual Assault Survivors Emergency Care Act is held invalid, the remainder of its application to other situations or persons shall not be affected.

Section 8. EMERGENCY. -- It is necessary for the public peace, health and safety that this act take effect immediately.

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