

HOUSE BILL No. 5411

September 17, 2009, Introduced by Reps. Agema, Genetski, Rick Jones, Walsh, Kurtz, McMillin, Elsenheimer, Marleau, Calley, Meekhof, Pearce, Knollenberg, DeShazor, Hansen, Lund, Denby, Moss, Opsommer, Haveman, Tyler, Pavlov, Daley, Crawford, Moore, Lori, Stamas and Proos and referred to the Committee on Judiciary.

A bill to amend 1978 PA 368, entitled "Public health code," by amending sections 17015 and 17515 (MCL 333.17015 and 333.17515), section 17015 as amended by 2006 PA 77 and section 17515 as added by 1993 PA 133, and by adding section 17015a.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 Sec. 17015. (1) Subject to subsection (10), a physician shall
2 not perform an abortion otherwise permitted by law without the
3 patient's informed written consent, given freely and without
4 coercion.

5 (2) For purposes of this section **AND SECTION 17015A:**

6 (a) "Abortion" means the intentional use of an instrument,
7 drug, or other substance or device to terminate a woman's pregnancy
8 for a purpose other than to increase the probability of a live
9 birth, to preserve the life or health of the child after live

1 birth, or to remove a dead fetus. Abortion does not include the use
2 or prescription of a drug or device intended as a contraceptive.

3 (b) "Fetus" means an individual organism of the species homo
4 sapiens in utero.

5 (c) "Local health department representative" means a person,
6 who meets 1 or more of the licensing requirements listed in
7 subdivision (f) and who is employed by, or under contract to
8 provide services on behalf of, a local health department.

9 (d) "Medical emergency" means that condition which, on the
10 basis of the physician's good faith clinical judgment, so
11 complicates the medical condition of a pregnant woman as to
12 necessitate the immediate abortion of her pregnancy to avert her
13 death or for which a delay will create serious risk of substantial
14 and irreversible impairment of a major bodily function.

15 (e) "Medical service" means the provision of a treatment,
16 procedure, medication, examination, diagnostic test, assessment, or
17 counseling, including, but not limited to, a pregnancy test,
18 ultrasound, pelvic examination, or an abortion.

19 (f) "Qualified person assisting the physician" means another
20 physician or a physician's assistant licensed under this part or
21 part 175, a fully licensed or limited licensed psychologist
22 licensed under part 182, a professional counselor licensed under
23 part 181, a registered professional nurse or a licensed practical
24 nurse licensed under part 172, or a social worker licensed under
25 part 185.

26 (g) "Probable gestational age of the fetus" means the
27 gestational age of the fetus at the time an abortion is planned to

1 be performed.

2 (h) "Provide the patient with a physical copy" means
3 confirming that the patient accessed the internet website described
4 in subsection (5) and received a printed valid confirmation form
5 from the website and including that form in the patient's medical
6 record or giving a patient a copy of a required document by 1 or
7 more of the following means:

8 (i) In person.

9 (ii) By registered mail, return receipt requested.

10 (iii) By parcel delivery service that requires the recipient to
11 provide a signature in order to receive delivery of a parcel.

12 (iv) By facsimile transmission.

13 (3) Subject to subsection (10), a physician or a qualified
14 person assisting the physician shall do all of the following not
15 less than 24 hours before that physician performs an abortion upon
16 a patient who is a pregnant woman:

17 (a) Confirm that, according to the best medical judgment of a
18 physician, the patient is pregnant, and determine the probable
19 gestational age of the fetus.

20 (b) Orally describe, in language designed to be understood by
21 the patient, taking into account her age, level of maturity, and
22 intellectual capability, each of the following:

23 (i) The probable gestational age of the fetus she is carrying.

24 (ii) Information about what to do and whom to contact should
25 medical complications arise from the abortion.

26 (iii) Information about how to obtain pregnancy prevention
27 information through the department of community health.

1 (c) Provide the patient with a physical copy of the written
2 summary described in subsection (11)(b) that corresponds to the
3 procedure the patient will undergo and is provided by the
4 department of community health. If the procedure has not been
5 recognized by the department, but is otherwise allowed under
6 Michigan law, and the department has not provided a written summary
7 for that procedure, the physician shall develop and provide a
8 written summary that describes the procedure, any known risks or
9 complications of the procedure, and risks associated with live
10 birth and meets the requirements of subsection (11)(b)(iii) ~~through~~
11 **TO** (vii).

12 (d) Provide the patient with a physical copy of a medically
13 accurate depiction, illustration, or photograph and description of
14 a fetus supplied by the department of community health pursuant to
15 subsection (11)(a) at the gestational age nearest the probable
16 gestational age of the patient's fetus.

17 (e) Provide the patient with a physical copy of the prenatal
18 care and parenting information pamphlet distributed by the
19 department of community health under section 9161.

20 **(F) PERFORM THE COERCION AND INTIMIDATION SCREENING AS**
21 **REQUIRED UNDER SECTION 17015A(1) AND, IF APPLICABLE, COMPLY WITH**
22 **THE REQUIREMENTS UNDER SECTION 17015A(2) AND (3).**

23 (4) The requirements of subsection (3) may be fulfilled by the
24 physician or a qualified person assisting the physician at a
25 location other than the health facility where the abortion is to be
26 performed. The requirement of subsection (3)(a) that a patient's
27 pregnancy be confirmed may be fulfilled by a local health

1 department under subsection (18). The requirements of subsection
2 (3) cannot be fulfilled by the patient accessing an internet
3 website other than the internet website described in subsection (5)
4 that is maintained through the department.

5 (5) The requirements of subsection (3)(c) ~~through~~**TO** (e) may
6 be fulfilled by a patient accessing the internet website maintained
7 and operated through the department and receiving a printed, valid
8 confirmation form from the website that the patient has reviewed
9 the information required in subsection (3)(c) ~~through~~**TO** (e) at
10 least 24 hours before an abortion being performed on the patient.
11 The website shall not require any information be supplied by the
12 patient. The department shall not track, compile, or otherwise keep
13 a record of information that would identify a patient who accesses
14 this website. The patient shall supply the valid confirmation form
15 to the physician or qualified person assisting the physician to be
16 included in the patient's medical record to comply with this
17 subsection.

18 (6) Subject to subsection (10), before obtaining the patient's
19 signature on the acknowledgment and consent form, a physician
20 personally and in the presence of the patient shall do all of the
21 following:

22 (a) Provide the patient with the physician's name, **CONFIRM**
23 **WITH THE PATIENT THAT THE COERCION AND INTIMIDATION SCREENING**
24 **REQUIRED UNDER SECTION 17015A WAS PERFORMED**, and inform the patient
25 of her right to withhold or withdraw her consent to the abortion at
26 any time before performance of the abortion.

27 (b) Orally describe, in language designed to be understood by

1 the patient, taking into account her age, level of maturity, and
2 intellectual capability, each of the following:

3 (i) The specific risk, if any, to the patient of the
4 complications that have been associated with the procedure the
5 patient will undergo, based on the patient's particular medical
6 condition and history as determined by the physician.

7 (ii) The specific risk of complications, if any, to the patient
8 if she chooses to continue the pregnancy based on the patient's
9 particular medical condition and history as determined by a
10 physician.

11 (7) To protect a patient's privacy, the information set forth
12 in subsection (3) and subsection (6) shall not be disclosed to the
13 patient in the presence of another patient.

14 (8) If at any time prior to the performance of an abortion, a
15 patient undergoes an ultrasound examination, or a physician
16 determines that ultrasound imaging will be used during the course
17 of a patient's abortion, the physician or qualified person
18 assisting the physician shall provide the patient with the
19 opportunity to view or decline to view an active ultrasound image
20 of the fetus, and offer to provide the patient with a physical
21 picture of the ultrasound image of the fetus prior to the
22 performance of the abortion. ~~Before~~**AFTER THE EXPIRATION OF THE 24-**
23 **HOURLY PERIOD PRESCRIBED UNDER SUBSECTION (3) BUT BEFORE** performing
24 an abortion on a patient who is a pregnant woman, a physician or a
25 qualified person assisting the physician shall do all of the
26 following:

27 (a) Obtain the patient's signature on the acknowledgment and

1 consent form described in subsection (11)(c) confirming that she
2 has received the information required under subsection (3).

3 (b) Provide the patient with a physical copy of the signed
4 acknowledgment and consent form described in subsection (11)(c).

5 (c) Retain a copy of the signed acknowledgment and consent
6 form described in subsection (11)(c) and, if applicable, a copy of
7 the pregnancy certification form completed under subsection
8 (18)(b), in the patient's medical record.

9 (9) This subsection does not prohibit notifying the patient
10 that payment for medical services will be required or that
11 collection of payment in full for all medical services provided or
12 planned may be demanded after the 24-hour period described in this
13 subsection has expired. A physician or an agent of the physician
14 shall not collect payment, in whole or in part, for a medical
15 service provided to or planned for a patient before the expiration
16 of 24 hours ~~from~~ **AFTER** the time the patient has done either or both
17 of the following, except in the case of a physician or an agent of
18 a physician receiving capitated payments or under a salary
19 arrangement for providing those medical services:

20 (a) Inquired about obtaining an abortion after her pregnancy
21 is confirmed and she has received from that physician or a
22 qualified person assisting the physician the information required
23 under subsection (3)(c) and (d).

24 (b) Scheduled an abortion to be performed by that physician.

25 (10) If the attending physician, utilizing his or her
26 experience, judgment, and professional competence, determines that
27 a medical emergency exists and necessitates performance of an

1 abortion before the requirements of subsections (1), (3), and (6)
2 can be met, the physician is exempt from the requirements of
3 subsections (1), (3), and (6), may perform the abortion, and shall
4 maintain a written record identifying with specificity the medical
5 factors upon which the determination of the medical emergency is
6 based.

7 (11) The department of community health shall do each of the
8 following:

9 (a) Produce medically accurate depictions, illustrations, or
10 photographs of the development of a human fetus that indicate by
11 scale the actual size of the fetus at 2-week intervals from the
12 fourth week through the twenty-eighth week of gestation. Each
13 depiction, illustration, or photograph shall be accompanied by a
14 printed description, in nontechnical English, Arabic, and Spanish,
15 of the probable anatomical and physiological characteristics of the
16 fetus at that particular state of gestational development.

17 (b) Subject to subdivision (g), develop, draft, and print, in
18 nontechnical English, Arabic, and Spanish, written standardized
19 summaries, based upon the various medical procedures used to abort
20 pregnancies, that do each of the following:

21 (i) Describe, individually and on separate documents, those
22 medical procedures used to perform abortions in this state that are
23 recognized by the department.

24 (ii) Identify the physical complications that have been
25 associated with each procedure described in subparagraph (i) and
26 with live birth, as determined by the department. In identifying
27 these complications, the department shall consider the annual

1 statistical report required under section 2835(6), and shall
2 consider studies concerning complications that have been published
3 in a peer review medical journal, with particular attention paid to
4 the design of the study, and shall consult with the federal centers
5 for disease control **AND PREVENTION**, the American college of
6 obstetricians and gynecologists, the Michigan state medical
7 society, or any other source that the department determines
8 appropriate for the purpose.

9 (iii) State that as the result of an abortion, some women may
10 experience depression, feelings of guilt, sleep disturbance, loss
11 of interest in work or sex, or anger, and that if these symptoms
12 occur and are intense or persistent, professional help is
13 recommended.

14 (iv) State that not all of the complications listed in
15 subparagraph (ii) may pertain to that particular patient and refer
16 the patient to her physician for more personalized information.

17 (v) Identify services available through public agencies to
18 assist the patient during her pregnancy and after the birth of her
19 child, should she choose to give birth and maintain custody of her
20 child.

21 (vi) Identify services available through public agencies to
22 assist the patient in placing her child in an adoptive or foster
23 home, should she choose to give birth but not maintain custody of
24 her child.

25 (vii) Identify services available through public agencies to
26 assist the patient and provide counseling should she experience
27 subsequent adverse psychological effects from the abortion.

1 (c) Develop, draft, and print, in nontechnical English,
2 Arabic, and Spanish, an acknowledgment and consent form that
3 includes only the following language above a signature line for the
4 patient:

5 "I, _____ , **VOLUNTARILY AND WILLFULLY**
6 hereby authorize Dr. _____ ("the physician") and any
7 assistant designated by the physician to perform upon me the
8 following operation(s) or procedure(s):

9 _____
10 (Name of operation(s) or procedure(s))

11 _____

12 I understand that I am approximately _____ weeks pregnant. I
13 consent to an abortion procedure to terminate my pregnancy. I
14 understand that I have the right to withdraw my consent to the
15 abortion procedure at any time prior to performance of that
16 procedure. **I UNDERSTAND THAT IT IS ILLEGAL FOR ANYONE TO COERCE OR**
17 **INTIMIDATE ME INTO SEEKING AN ABORTION.** I acknowledge that at least
18 24 hours before the scheduled abortion I have received a physical
19 copy of each of the following:

20 (a) A medically accurate depiction, illustration, or
21 photograph of a fetus at the probable gestational age of the fetus
22 I am carrying.

23 (b) A written description of the medical procedure that will
24 be used to perform the abortion.

25 (c) A prenatal care and parenting information pamphlet. If any
26 of the above listed documents were transmitted by facsimile, I
27 certify that the documents were clear and legible. I acknowledge

1 that the physician who will perform the abortion has orally
2 described all of the following to me:

3 (i) The specific risk to me, if any, of the complications that
4 have been associated with the procedure I am scheduled to undergo.

5 (ii) The specific risk to me, if any, of the complications if I
6 choose to continue the pregnancy.

7 I acknowledge that I have received all of the following
8 information:

9 (d) Information about what to do and whom to contact in the
10 event that complications arise from the abortion.

11 (e) Information pertaining to available pregnancy related
12 services.

13 I have been given an opportunity to ask questions about the
14 operation(s) or procedure(s). I certify that I have not been
15 required to make any payments for an abortion or any medical
16 service before the expiration of 24 hours after I received the
17 written materials listed in paragraphs (a), (b), and (c) above, or
18 24 hours after the time and date listed on the confirmation form if
19 paragraphs (a), (b), and (c) were viewed from the state of Michigan
20 internet website."

21 (d) Make available to physicians, through the Michigan board
22 of medicine and the Michigan board of osteopathic medicine and
23 surgery, and any **OTHER** person upon request the copies of medically
24 accurate depictions, illustrations, or photographs described in
25 subdivision (a), the standardized written summaries described in
26 subdivision (b), the acknowledgment and consent form described in
27 subdivision (c), the prenatal care and parenting information

1 pamphlet described in section 9161, and the pregnancy certification
2 form described in subdivision (f).

3 (e) The department shall not develop written summaries for
4 abortion procedures under subdivision (b) that utilize medication
5 that has not been approved by the United States food and drug
6 administration for use in performing an abortion.

7 (f) Develop, draft, and print a certification form to be
8 signed by a local health department representative at the time and
9 place a patient has a pregnancy confirmed, as requested by the
10 patient, verifying the date and time the pregnancy is confirmed.

11 (g) Develop and maintain an internet website that **OPENS WITH**
12 **THE NOTICE DESCRIBED UNDER SECTION 17015A(4) AND THEN** allows a
13 patient considering an abortion to review the information required
14 in subsection (3)(c) ~~through~~ **TO** (e). After the patient reviews the
15 required information, the department shall assure that a
16 confirmation form can be printed by the patient from the internet
17 website that will verify the time and date the information was
18 reviewed. A confirmation form printed under this subdivision
19 becomes invalid 14 days after the date and time printed on the
20 confirmation form.

21 (h) Include on the informed consent website developed under
22 subdivision (g) a list of health care providers, facilities, and
23 clinics that offer to perform ultrasounds free of charge. The list
24 shall be organized geographically and shall include the name,
25 address, and telephone number of each health care provider,
26 facility, and clinic.

27 **(I) DEVELOP, DRAFT, AND PRINT, IN NONTECHNICAL ENGLISH,**

1 ARABIC, AND SPANISH, THE NOTICE AS DESCRIBED UNDER SECTION
2 17015A(4) THAT IS REQUIRED TO BE POSTED AND PROVIDED TO THE
3 PATIENT. THE NOTICE SHALL BE AT LEAST 8-1/2 INCHES BY 14 INCHES AND
4 THE STATEMENT REQUIRED UNDER SECTION 17015A(4) SHALL BE PRINTED IN
5 AT LEAST 44-POINT TYPE. THE NOTICE SHALL BE MADE AVAILABLE TO
6 PHYSICIANS THROUGH THE MICHIGAN BOARD OF MEDICINE AND THE MICHIGAN
7 BOARD OF OSTEOPATHIC MEDICINE AND SURGERY.

8 (J) DEVELOP, DRAFT, AND PRINT PROTOCOLS AND ASSESSMENT
9 MATERIALS TO BE UTILIZED BY A PHYSICIAN OR A QUALIFIED PERSON
10 ASSISTING THE PHYSICIAN WHILE PERFORMING THE INTIMIDATION AND
11 COERCION SCREENING AS REQUIRED UNDER SECTION 17015A. IN DEVELOPING
12 THE PROTOCOLS AND ASSESSMENT MATERIALS, THE DEPARTMENT SHALL
13 CONSIDER THE STANDARDS AND RECOMMENDATIONS OF THE JOINT COMMISSION
14 ON ACCREDITATION OF HEALTH CARE ORGANIZATIONS AND THE AMERICAN
15 MEDICAL ASSOCIATION. THE PROTOCOLS AND ASSESSMENT MATERIALS SHALL
16 ADDRESS, AT A MINIMUM, EACH OF THE FOLLOWING:

- 17 (i) DANGER ASSESSMENTS.
18 (ii) PHYSICAL AND PSYCHOLOGICAL ASSESSMENTS.
19 (iii) SAFETY PLANS.
20 (iv) DISCHARGE INSTRUCTIONS.
21 (v) REFERRALS TO LAW ENFORCEMENT AND SUPPORT ORGANIZATIONS.
22 (vi) PRIVATE ACCESS TO A TELEPHONE AND SAFE TRANSPORTATION.

23 (12) A physician's duty to inform the patient under this
24 section does not require disclosure of information beyond what a
25 reasonably well-qualified physician licensed under this article
26 would possess.

27 (13) A written consent form meeting the requirements set forth

1 in this section and signed by the patient is presumed valid. The
2 presumption created by this subsection may be rebutted by evidence
3 that establishes, by a preponderance of the evidence, that consent
4 was obtained through fraud, negligence, deception,
5 misrepresentation, coercion, or duress.

6 (14) A completed certification form described in subsection
7 (11)(f) that is signed by a local health department representative
8 is presumed valid. The presumption created by this subsection may
9 be rebutted by evidence that establishes, by a preponderance of the
10 evidence, that the physician who relied upon the certification had
11 actual knowledge that the certificate contained a false or
12 misleading statement or signature.

13 (15) This section does not create a right to abortion.

14 (16) Notwithstanding any other provision of this section, a
15 person shall not perform an abortion that is prohibited by law.

16 (17) If any portion of this act or the application of this act
17 to any person or circumstances is found invalid by a court, that
18 invalidity does not affect the remaining portions or applications
19 of the act that can be given effect without the invalid portion or
20 application, if those remaining portions are not determined by the
21 court to be inoperable.

22 (18) Upon a patient's request, each local health department
23 shall:

24 (a) Provide a pregnancy test for that patient to confirm the
25 pregnancy as required under subsection (3)(a) and determine the
26 probable gestational stage of the fetus. The local health
27 department need not comply with this subdivision if the

1 requirements of subsection (3)(a) have already been met.

2 (b) If a pregnancy is confirmed, ensure that the patient is
3 provided with a completed pregnancy certification form described in
4 subsection (11)(f) at the time the information is provided.

5 (19) The identity and address of a patient who is provided
6 information or who consents to an abortion pursuant to this section
7 is confidential and is subject to disclosure only with the consent
8 of the patient or by judicial process.

9 (20) A local health department with a file containing the
10 identity and address of a patient described in subsection (19) who
11 has been assisted by the local health department under this section
12 shall do both of the following:

13 (a) Only release the identity and address of the patient to a
14 physician or qualified person assisting the physician in order to
15 verify the receipt of the information required under this section.

16 (b) Destroy the information containing the identity and
17 address of the patient within 30 days after assisting the patient
18 under this section.

19 **SEC. 17015A. (1) IF A PATIENT SCHEDULES AN APPOINTMENT FOR AN**
20 **ABORTION AFTER RECEIVING THE INFORMATION REQUIRED UNDER SECTION**
21 **17015(3), THE PHYSICIAN OR QUALIFIED PERSON ASSISTING THE PHYSICIAN**
22 **SHALL ENSURE THAT THE PATIENT'S REQUEST FOR AN ABORTION IS NOT THE**
23 **RESULT OF INTIMIDATION OR COERCION BY DOING BOTH OF THE FOLLOWING:**

24 **(A) PROVIDING THE PATIENT WITH A COPY OF THE NOTICE DESCRIBED**
25 **UNDER SUBSECTION (4) AND ORALLY INFORMING THE PATIENT THAT CERTAIN**
26 **ACTIONS TO PRESSURE A WOMAN INTO HAVING AN ABORTION ARE ILLEGAL AND**
27 **GROUNDS FOR A CIVIL ACTION, BUT CLARIFYING THAT DISCUSSIONS ABOUT**

1 THE OPTIONS AVAILABLE, INCLUDING PERSONAL OR INTENSELY EMOTIONAL
2 EXPRESSIONS ABOUT SUCH OPTIONS, ARE NOT NECESSARILY COERCIVE AND
3 ILLEGAL.

4 (B) ASKING THE PATIENT IF THE PATIENT'S HUSBAND, PARENTS,
5 SIBLINGS, RELATIVES, OR EMPLOYER, THE FATHER OR PUTATIVE FATHER OF
6 THE FETUS, THE PARENTS OF THE FATHER OR PUTATIVE FATHER OF THE
7 FETUS, OR ANY OTHER INDIVIDUAL IN A POSITION OF AUTHORITY OVER THE
8 PATIENT HAS THREATENED, INTIMIDATED, OR COERCED HER INTO SEEKING AN
9 ABORTION AS PROHIBITED UNDER SECTION 15A OF THE MICHIGAN PENAL
10 CODE, 1931 PA 328, MCL 750.15A.

11 (2) IF A PATIENT INDICATES THAT SHE IS THE VICTIM OF
12 INTIMIDATION OR COERCION AS DESCRIBED UNDER SUBSECTION (1) (B), THE
13 PHYSICIAN OR QUALIFIED PERSON ASSISTING THE PHYSICIAN SHALL COMPLY
14 WITH THE PROTOCOLS ESTABLISHED BY THE DEPARTMENT PURSUANT TO
15 SECTION 17015(11).

16 (3) IN ADDITION TO THE REQUIREMENTS OF SUBSECTION (2), IF A
17 PATIENT WHO IS UNDER THE AGE OF 18 INDICATES THAT SHE IS THE VICTIM
18 OF INTIMIDATION OR COERCION, THE PHYSICIAN OR QUALIFIED PERSON
19 ASSISTING THE PHYSICIAN SHALL CONTACT A COUNTY CHILD PROTECTIVE
20 SERVICES AGENCY.

21 (4) A PRIVATE OFFICE, FREESTANDING SURGICAL OUTPATIENT
22 FACILITY, OR OTHER FACILITY OR CLINIC IN WHICH ABORTIONS ARE
23 PERFORMED SHALL POST IN A CONSPICUOUS PLACE IN AN AREA OF ITS
24 FACILITY THAT IS ACCESSIBLE TO PATIENTS, EMPLOYEES, AND VISITORS A
25 NOTICE STATING THAT IT IS ILLEGAL FOR ANYONE TO COERCE OR
26 INTIMIDATE A WOMAN INTO SEEKING AN ABORTION.

27 (5) IF A PATIENT STILL SEEKS AN ABORTION AFTER THE

1 REQUIREMENTS OF SUBSECTIONS (1), (2), AND (3), IF APPLICABLE, HAVE
2 BEEN FULFILLED, THE PHYSICIAN MAY, AFTER OBTAINING THE PATIENT'S
3 SIGNATURE ON THE ACKNOWLEDGMENT AND CONSENT FORM AS REQUIRED UNDER
4 SECTION 17015, PERFORM THE ABORTION.

5 (6) THIS SECTION DOES NOT CREATE A RIGHT TO ABORTION.
6 NOTWITHSTANDING ANY OTHER PROVISION OF THIS SECTION, A PERSON SHALL
7 NOT PERFORM AN ABORTION THAT IS PROHIBITED BY LAW.

8 Sec. 17515. A physician, before performing an abortion on a
9 patient, shall comply with ~~section~~ **SECTIONS 17015 AND 17015A.**

10 Enacting section 1. This amendatory act takes effect October
11 1, 2009.

12 Enacting section 2. This amendatory act does not take effect
13 unless House Bill No. 4525 of the 95th Legislature is enacted into
14 law.