

HOUSE BILL No. 5182

November 29, 2011, Introduced by Rep. O'Brien and referred to the Committee on Families, Children, and Seniors.

A bill to amend 1978 PA 368, entitled
"Public health code,"
by amending section 17015 (MCL 333.17015), as amended by 2006 PA
77.

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 **TO ABORT.**

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) "COERCION TO ABORT" MEANS AN ACT COMMITTED WITH THE INTENT
4 TO COERCE AN INDIVIDUAL TO HAVE AN ABORTION, WHICH ACT IS
5 PROHIBITED BY SECTION 213A OF THE MICHIGAN PENAL CODE, 1931 PA 328,
6 MCL 750.213A.

7 (C) "DOMESTIC VIOLENCE" MEANS THAT TERM AS DEFINED IN SECTION
8 1 OF 1978 PA 389, MCL 400.1501.

9 (D) ~~(b)~~—"Fetus" means an individual organism of the species
10 homo sapiens in utero.

11 (E) ~~(e)~~—"Local health department representative" means a
12 person ~~—~~who meets 1 or more of the licensing requirements listed
13 in subdivision ~~(f)~~—(H) and who is employed by, or under contract to
14 provide services on behalf of, a local health department.

15 (F) ~~(d)~~—"Medical emergency" means that condition which, on the
16 basis of the physician's good faith clinical judgment, so
17 complicates the medical condition of a pregnant woman as to
18 necessitate the immediate abortion of her pregnancy to avert her
19 death or for which a delay will create serious risk of substantial
20 and irreversible impairment of a major bodily function.

21 (G) ~~(e)~~—"Medical service" means the provision of a treatment,
22 procedure, medication, examination, diagnostic test, assessment, or
23 counseling, including, but not limited to, a pregnancy test,
24 ultrasound, pelvic examination, or an abortion.

25 (H) ~~(f)~~—"Qualified person assisting the physician" means
26 another physician or a physician's assistant licensed under this
27 part or part 175, a fully licensed or limited licensed psychologist

1 licensed under part 182, a professional counselor licensed under
2 part 181, a registered professional nurse or a licensed practical
3 nurse licensed under part 172, or a social worker licensed under
4 part 185.

5 (I) ~~(g)~~—"Probable gestational age of the fetus" means the
6 gestational age of the fetus at the time an abortion is planned to
7 be performed.

8 (J) ~~(h)~~—"Provide the patient with a physical copy" means
9 confirming that the patient accessed the internet website described
10 in subsection (5) and received a printed valid confirmation form
11 from the website and including that form in the patient's medical
12 record or giving a patient a copy of a required document by 1 or
13 more of the following means:

14 (i) In person.

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

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

18 (iv) By facsimile transmission.

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

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

26 (b) Orally describe, in language designed to be understood by
27 the patient, taking into account her age, level of maturity, and

1 intellectual capability, each of the following:

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

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

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

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

18 (d) Provide the patient with a physical copy of a medically
19 accurate depiction, illustration, or photograph and description of
20 a fetus supplied by the department of community health pursuant to
21 subsection (11)(a) at the gestational age nearest the probable
22 gestational age of the patient's fetus.

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

26 (4) The requirements of subsection (3) may be fulfilled by the
27 physician or a qualified person assisting the physician at a

1 location other than the health facility where the abortion is to be
2 performed. The requirement of subsection (3)(a) that a patient's
3 pregnancy be confirmed may be fulfilled by a local health
4 department under subsection (18). The requirements of subsection
5 (3) cannot be fulfilled by the patient accessing an internet
6 website other than the internet website described in subsection (5)
7 that is maintained ~~through~~ **AND OPERATED BY** the department **UNDER**
8 **SUBSECTION (11)(G)**.

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

22 (6) Subject to subsection (10), before obtaining the patient's
23 signature on the acknowledgment and consent form, a physician
24 personally and in the presence of the patient shall do all of the
25 following:

26 (a) Provide the patient with the physician's name, **CONFIRM**
27 **WITH THE PATIENT THAT THE COERCION TO ABORT AND DOMESTIC VIOLENCE**

1 **SCREENING REQUIRED UNDER SECTION 17015A WAS PERFORMED**, and inform
2 the patient of her right to withhold or withdraw her consent to the
3 abortion at any time before performance of the abortion.

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

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

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

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

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

1 an abortion on a patient who is a pregnant woman, a physician or a
2 qualified person assisting the physician shall do all of the
3 following:

4 (a) Obtain the patient's signature on the acknowledgment and
5 consent form described in subsection (11)(c) confirming that she
6 has received the information required under subsection (3).

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

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

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

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

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

2 (10) If the attending physician, utilizing his or her
3 experience, judgment, and professional competence, determines that
4 a medical emergency exists and necessitates performance of an
5 abortion before the requirements of subsections (1), (3), and (6)
6 can be met, the physician is exempt from the requirements of
7 subsections (1), (3), and (6), may perform the abortion, and shall
8 maintain a written record identifying with specificity the medical
9 factors upon which the determination of the medical emergency is
10 based.

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

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

21 (b) Subject to subdivision ~~(g)~~, **(E)**, develop, draft, and
22 print, in nontechnical English, Arabic, and Spanish, written
23 standardized summaries, based upon the various medical procedures
24 used to abort pregnancies, that do each of the following:

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

1 (ii) Identify the physical complications that have been
2 associated with each procedure described in subparagraph (i) and
3 with live birth, as determined by the department. In identifying
4 these complications, the department shall consider the annual
5 statistical report required under section ~~2835(6)~~ **2835**, and shall
6 consider studies concerning complications that have been published
7 in a peer review medical journal, with particular attention paid to
8 the design of the study, and shall consult with the federal centers
9 for disease control **AND PREVENTION**, the American college ~~CONGRESS~~
10 of obstetricians and gynecologists, the Michigan state medical
11 society, or any other source that the department determines
12 appropriate for the purpose.

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

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

21 (v) Identify services available through public agencies to
22 assist the patient during her pregnancy and after the birth of her
23 child, should she choose to give birth and maintain custody of her
24 child.

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

1 her child.

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

5 (c) Develop, draft, and print, in nontechnical English,
6 Arabic, and Spanish, an acknowledgment and consent form that
7 includes only the following language above a signature line for the
8 patient:

9 "I, _____, **VOLUNTARILY AND WILLFULLY**
10 hereby authorize Dr. _____ ("the physician") and any
11 assistant designated by the physician to perform upon me the
12 following operation(s) or procedure(s):

13 _____
14 (Name of operation(s) or procedure(s))
15 _____

16 **A.** I understand that I am approximately _____ weeks pregnant.
17 I consent to an abortion procedure to terminate my pregnancy. I
18 understand that I have the right to withdraw my consent to the
19 abortion procedure at any time prior to performance of that
20 procedure.

21 **B. I UNDERSTAND THAT IT IS ILLEGAL FOR ANYONE TO COERCE ME**
22 **INTO SEEKING AN ABORTION.**

23 **C.** I acknowledge that at least 24 hours before the scheduled
24 abortion I have received a physical copy of each of the following:

25 1. ~~(a)~~ A medically accurate depiction, illustration, or
26 photograph of a fetus at the probable gestational age of the fetus
27 I am carrying.

1 2. ~~(b)~~—A written description of the medical procedure that
2 will be used to perform the abortion.

3 3. ~~(c)~~—A prenatal care and parenting information pamphlet.

4 D. If any of the ~~above-listed~~ documents **LISTED IN PARAGRAPH C**
5 were transmitted by facsimile, I certify that the documents were
6 clear and legible.

7 E. I acknowledge that the physician who will perform the
8 abortion has orally described all of the following to me:

9 1. ~~(i)~~—The specific risk to me, if any, of the complications
10 that have been associated with the procedure I am scheduled to
11 undergo.

12 2. ~~(ii)~~—The specific risk to me, if any, of the complications
13 if I choose to continue the pregnancy.

14 F. I acknowledge that I have received all of the following
15 information:

16 1. ~~(d)~~—Information about what to do and whom to contact in the
17 event that complications arise from the abortion.

18 2. ~~(e)~~—Information pertaining to available pregnancy related
19 services.

20 G. I have been given an opportunity to ask questions about the
21 operation(s) or procedure(s).

22 H. I certify that I have not been required to make any
23 payments for an abortion or any medical service before the
24 expiration of 24 hours after I received the written materials
25 listed in ~~paragraphs (a), (b), and (c) above,~~ **PARAGRAPH C**, or 24
26 hours after the time and date listed on the confirmation form if
27 ~~paragraphs (a), (b), and (c) were~~ **THE INFORMATION DESCRIBED IN**

1 **PARAGRAPH C WAS** viewed from the state of Michigan internet
2 website.".

3 (d) Make available to physicians through the Michigan board of
4 medicine and the Michigan board of osteopathic medicine and
5 surgery, and **TO** any person upon request, the copies of medically
6 accurate depictions, illustrations, or photographs described in
7 subdivision (a), the **WRITTEN** standardized ~~written~~ summaries
8 described in subdivision (b), the acknowledgment and consent form
9 described in subdivision (c), the prenatal care and parenting
10 information pamphlet described in section 9161, and the pregnancy
11 certification form described in subdivision (f).

12 (e) The department shall not develop written **STANDARDIZED**
13 summaries for abortion procedures under subdivision (b) that
14 utilize medication that has not been approved by the United States
15 food and drug administration for use in performing an abortion.

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

20 (g) Develop, **OPERATE**, and maintain an internet website that
21 allows a patient considering an abortion to review the information
22 required in subsection (3)(c) through (e). After the patient
23 reviews the required information, the department shall assure that
24 a confirmation form can be printed by the patient from the internet
25 website that will verify the time and date the information was
26 reviewed. A confirmation form printed under this subdivision
27 becomes invalid 14 days after the date and time printed on the

1 confirmation form.

2 (h) Include on the informed consent **INTERNET** website developed
3 under subdivision (g) ~~a~~**ALL OF THE FOLLOWING:**

4 (i) **A** list of health care providers, facilities, and clinics
5 that offer to perform ultrasounds free of charge. The list shall be
6 organized geographically and shall include the name, address, and
7 telephone number of each health care provider, facility, and
8 clinic.

9 (ii) **A STATEMENT THAT IT IS ILLEGAL UNDER MICHIGAN LAW TO**
10 **COERCE A WOMAN TO HAVE AN ABORTION.**

11 (iii) **A STATEMENT THAT HELP IS AVAILABLE IF A WOMAN IS BEING**
12 **THREATENED OR INTIMIDATED; PHYSICALLY, EMOTIONALLY, OR SEXUALLY**
13 **HARMED; OR FEELS AFRAID FOR ANY REASON.**

14 (iv) **THE TELEPHONE NUMBER OF AT LEAST 1 DOMESTIC VIOLENCE**
15 **HOTLINE.**

16 (I) **DEVELOP, DRAFT, AND PRINT OR MAKE AVAILABLE IN PRINTABLE**
17 **FORMAT, IN NONTECHNICAL ENGLISH, ARABIC, AND SPANISH, A NOTICE THAT**
18 **INCLUDES THE INFORMATION DESCRIBED IN SUBDIVISION (H) AND THAT IS**
19 **REQUIRED TO BE POSTED IN FACILITIES AND CLINICS UNDER SECTION**
20 **17015A. THE NOTICE SHALL BE AT LEAST 8-1/2 INCHES BY 14 INCHES, AND**
21 **THE STATEMENT REQUIRED UNDER SUBDIVISION (H) (ii) SHALL BE PRINTED IN**
22 **AT LEAST 44-POINT TYPE. THE NOTICE SHALL BE MADE AVAILABLE TO**
23 **PHYSICIANS THROUGH THE MICHIGAN BOARD OF MEDICINE AND THE MICHIGAN**
24 **BOARD OF OSTEOPATHIC MEDICINE AND SURGERY.**

25 (J) **DEVELOP, DRAFT, AND PRINT SCREENING TOOLS TO BE UTILIZED**
26 **BY A PHYSICIAN OR QUALIFIED PERSON ASSISTING THE PHYSICIAN WHILE**
27 **PERFORMING THE COERCION TO ABORT AND DOMESTIC VIOLENCE SCREENING**

1 REQUIRED UNDER SECTION 17015A. IN DEVELOPING THE SCREENING TOOLS,
2 THE DEPARTMENT SHALL CONSIDER THE STANDARDS AND RECOMMENDATIONS OF
3 THE JOINT COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS,
4 THE AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS, AND THE
5 AMERICAN MEDICAL ASSOCIATION. THE SCREENING TOOLS SHALL INSTRUCT
6 THE PHYSICIAN OR QUALIFIED PERSON ASSISTING THE PHYSICIAN TO DO, AT
7 A MINIMUM, ALL OF THE FOLLOWING:

8 (i) ORALLY INFORM THE PATIENT THAT COERCION TO ABORT IS ILLEGAL
9 AND IS GROUNDS FOR A CIVIL ACTION, BUT CLARIFYING THAT DISCUSSIONS
10 ABOUT PREGNANCY OPTIONS, INCLUDING PERSONAL OR INTENSELY EMOTIONAL
11 EXPRESSIONS ABOUT THOSE OPTIONS, ARE NOT NECESSARILY COERCION TO
12 ABORT AND ILLEGAL.

13 (ii) ORALLY ASK THE PATIENT IF HER HUSBAND, PARENTS, SIBLINGS,
14 RELATIVES, OR EMPLOYER, THE FATHER OR PUTATIVE FATHER OF THE FETUS,
15 THE PARENTS OF THE FATHER OR PUTATIVE FATHER OF THE FETUS, OR ANY
16 OTHER INDIVIDUAL HAS ENGAGED IN COERCION TO ABORT AND COERCED HER
17 INTO SEEKING AN ABORTION.

18 (iii) ORALLY ASK THE PATIENT IF AN INDIVIDUAL IS TAKING HARMFUL
19 ACTIONS AGAINST HER, INCLUDING, BUT NOT LIMITED TO, INTIMIDATING
20 HER, THREATENING HER, PHYSICALLY HURTING HER, OR FORCING HER TO
21 ENGAGE IN SEXUAL ACTIVITIES AGAINST HER WISHES.

22 (iv) DOCUMENT THE FINDINGS FROM THE COERCION TO ABORT AND
23 DOMESTIC VIOLENCE SCREENING IN THE PATIENT'S MEDICAL RECORD.

24 (K) DEVELOP, DRAFT, AND PRINT PROTOCOLS TO BE UTILIZED BY A
25 PHYSICIAN OR A QUALIFIED PERSON ASSISTING THE PHYSICIAN IF A
26 PATIENT DISCLOSES COERCION TO ABORT OR THAT DOMESTIC VIOLENCE IS
27 OCCURRING, OR BOTH, DURING THE COERCION TO ABORT AND DOMESTIC

1 VIOLENCE SCREENING. IN DEVELOPING THE PROTOCOLS, THE DEPARTMENT
2 SHALL CONSIDER THE STANDARDS AND RECOMMENDATIONS OF THE JOINT
3 COMMISSION ON ACCREDITATION OF HEALTHCARE ORGANIZATIONS, THE
4 AMERICAN CONGRESS OF OBSTETRICIANS AND GYNECOLOGISTS, AND THE
5 AMERICAN MEDICAL ASSOCIATION. THE PROTOCOLS SHALL INSTRUCT THE
6 PHYSICIAN OR QUALIFIED PERSON ASSISTING THE PHYSICIAN TO DO, AT A
7 MINIMUM, ALL OF THE FOLLOWING:

8 (i) FOLLOW THE REQUIREMENTS OF SECTION 17015A(2) TO (5), AS
9 APPLICABLE.

10 (ii) ASSESS THE PATIENT'S CURRENT LEVEL OF DANGER.

11 (iii) DEVELOP A SAFETY PLAN WITH THE PATIENT.

12 (iv) REFER THE PATIENT TO LAW ENFORCEMENT AND DOMESTIC VIOLENCE
13 SUPPORT ORGANIZATIONS.

14 (v) DOCUMENT ANY REFERRALS IN THE PATIENT'S MEDICAL RECORD.

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

19 (13) A written consent form meeting the requirements set forth
20 in this section and signed by the patient is presumed valid. The
21 presumption created by this subsection may be rebutted by evidence
22 that establishes, by a preponderance of the evidence, that consent
23 was obtained through fraud, negligence, deception,
24 misrepresentation, coercion, or duress.

25 (14) A completed certification form described in subsection
26 (11)(f) that is signed by a local health department representative
27 is presumed valid. The presumption created by this subsection may

1 be rebutted by evidence that establishes, by a preponderance of the
2 evidence, that the physician who relied upon the certification had
3 actual knowledge that the certificate contained a false or
4 misleading statement or signature.

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

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

8 (17) If any portion of this act or the application of this act
9 to any person or circumstances is found invalid by a court, that
10 invalidity does not affect the remaining portions or applications
11 of the act that can be given effect without the invalid portion or
12 application, if those remaining portions are not determined by the
13 court to be inoperable.

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

16 (a) Provide a pregnancy test for that patient to confirm the
17 pregnancy as required under subsection (3)(a) and determine the
18 probable gestational stage of the fetus. The local health
19 department need not comply with this subdivision if the
20 requirements of subsection (3)(a) have already been met.

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

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

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

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

8 (b) Destroy the information containing the identity and
9 address of the patient within 30 days after assisting the patient
10 under this section.

11 Enacting section 1. This amendatory act takes effect October
12 1, 2012.

13 Enacting section 2. This amendatory act does not take effect
14 unless all of the following bills of the 96th Legislature are
15 enacted into law:

16 (a) House Bill No. 4798.

17 (b) House Bill No. 4799.

18 (c) Senate Bill No.____ or House Bill No.____ (request no.
19 02350'11).

20 (d) Senate Bill No.____ or House Bill No. 5181(request no.
21 03835'11).