

107<sup>TH</sup> CONGRESS  
2<sup>D</sup> SESSION

# H. R. 4113

To provide for the provision by hospitals of emergency contraceptives to women who are survivors of sexual assault.

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## IN THE HOUSE OF REPRESENTATIVES

APRIL 9, 2002

Mrs. MORELLA (for herself, Mr. GREENWOOD, Ms. SLAUGHTER, and Ms. DEGETTE) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

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## A BILL

To provide for the provision by hospitals of emergency contraceptives to women who are survivors of sexual assault.

1       *Be it enacted by the Senate and House of Representa-*  
2       *tives of the United States of America in Congress assembled,*

3       **SECTION 1. SHORT TITLE.**

4       This Act may be cited as the “Compassionate Care  
5       for Female Sexual Assault Survivors Act”.

6       **SEC. 2. FINDINGS.**

7       The Congress finds as follows:

1           (1) It is estimated that 25,000 women become  
2 pregnant each year as a result of rape or incest.

3           (2) Surveys have shown that many hospitals do  
4 not routinely provide emergency contraception to  
5 women seeking treatment after being sexually as-  
6 saulted.

7           (3) The risk of pregnancy after sexual assault  
8 has been estimated to be 4.7 percent in survivors  
9 who were not protected by some form of contracep-  
10 tion at the time of the attack.

11           (4) The Food and Drug Administration has de-  
12 clared emergency contraception to be safe and effec-  
13 tive in preventing unintended pregnancy, reducing  
14 the risk by as much as 89 percent.

15           (5) Medical research strongly indicates that the  
16 sooner emergency contraception is administered, the  
17 greater the likelihood of preventing unintended preg-  
18 nancy, and it is most effective if administered in the  
19 first 12 hours after unprotected intercourse.

20           (6) In light of the safety and effectiveness of  
21 emergency contraceptive pills, both the American  
22 Medical Association and the American College of  
23 Obstetricians and Gynecologists have endorsed more  
24 widespread availability of such pills.

1           (7) It is essential that all hospitals that provide  
2           emergency medical treatment provide emergency  
3           contraception as a treatment option to any woman  
4           who has been sexually assaulted, so she may prevent  
5           an unintended pregnancy.

6 **SEC. 3. SURVIVORS OF SEXUAL ASSAULT; PROVISION BY**  
7                   **HOSPITALS OF EMERGENCY CONTRACEP-**  
8                   **TIVES WITHOUT CHARGE.**

9           (a) IN GENERAL.—Federal funds may not be pro-  
10          vided to a hospital under any health-related program un-  
11          less the hospital meets the conditions specified in sub-  
12          section (b) in the case of any woman who presents at the  
13          hospital and—

14               (1) states that she is the victim of sexual as-  
15          sault;

16               (2) is accompanied by someone who states she  
17          is a victim of sexual assault; or

18               (3) whom hospital personnel have reason to be-  
19          lieve is a victim of sexual assault.

20          (b) ASSISTANCE FOR VICTIMS.—The conditions spec-  
21          ified in this subsection regarding a hospital and a woman  
22          described in subsection (a) are as follows:

23               (1) The hospital promptly provides the woman  
24          with medically and factually accurate and unbiased

1 written and oral information about emergency con-  
2 traception, including information explaining that—

3 (A) emergency contraception does not  
4 cause an abortion; and

5 (B) emergency contraception is effective in  
6 most cases in preventing pregnancy after un-  
7 protected sex.

8 (2) The hospital promptly offers emergency  
9 contraception to the woman, and promptly provides  
10 it to her upon her request.

11 (3) The information provided pursuant to para-  
12 graph (1) is in clear and concise language, is readily  
13 comprehensible, and meets such conditions regarding  
14 the provision of the information in languages other  
15 than English as the Secretary may establish.

16 (4) The services described in paragraphs (1)  
17 through (3) are not denied because of the inability  
18 of the woman or her family to pay for the services.

19 (c) DEFINITIONS.—For purposes of this section:

20 (1) The term “emergency contraception” means  
21 a drug that is—

22 (A) used postcoitally;

23 (B) prevents pregnancy by delaying ovula-  
24 tion, preventing fertilization of an egg, or pre-  
25 venting implantation of an egg in a uterus; and

1 (C) is approved by the Food and Drug Ad-  
2 ministration.

3 (2) The term “hospital” has the meanings given  
4 such term in title XVIII of the Social Security Act,  
5 including the meaning applicable in such title for  
6 purposes of making payments for emergency services  
7 to hospitals that do not have agreements in effect  
8 under such title.

9 (3) The term “Secretary” means the Secretary  
10 of Health and Human Services.

11 (4) The term “sexual assault” means coitus in  
12 which the woman involved does not consent or lacks  
13 the legal capacity to consent.

14 (d) EFFECTIVE DATE; AGENCY CRITERIA.—This sec-  
15 tion takes effect upon the expiration of the 180-day period  
16 beginning on the date of the enactment of this Act. Not  
17 later than 30 days prior to the expiration of such period,  
18 the Secretary shall publish in the Federal Register criteria  
19 for carrying out this section.

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