



Washington | RANKING 44

Washington does not maintain adequate protections against the harms of abortion, nor does it protect unborn children from criminal violence. Washington has failed to enact commonsense, publicly supported laws pertaining to informed consent, parental involvement, abortion provider regulations, or fetal homicide, and it does not regulate emerging biotechnologies. Moreover, Washington explicitly permits suicide by physician.

ABORTION

- Washington maintains a Freedom of Choice Act. The Act mandates a right to abortion even if *Roe v. Wade* is eventually overturned, specifically providing “that every individual possesses a fundamental right of privacy with respect to personal reproductive decisions.”
- In addition, the “state may not deny or interfere with a woman’s right to choose to have an abortion prior to viability of the fetus, or to protect her life or health.” Any regulations must be medically necessary to protect the life or health of the woman, “consistent with established medical practice,” and impose the “least restrictions” on the right to abortion.
- No abortion may be performed after viability unless necessary to protect the woman’s life or health.
- Washington does not have an informed consent law for abortion, parental involvement law for minors seeking abortion, or abortion facility regulations.
- Only a physician licensed in Washington may perform an abortion.
- Washington has an enforceable abortion reporting law but does not require the reporting of information to the Centers for Disease Control (CDC). The measure applies to both surgical and nonsurgical abortions and requires abortion providers to report short-term complications.
- Washington taxpayers are required by statute to fund “medically necessary” abortions for women receiving state public assistance, requiring funding of abortion-on-demand in light of the U.S. Supreme Court’s broad definition of “health” in the context of abortion. It must also provide benefits, services, or information to permit women to obtain abortions if it provides comparable maternity care benefits, services, or information.
- Washington protects physical access to abortion clinics and curtails the First Amendment rights of pro-life sidewalk counselors and demonstrators.
- Health plans issued or renewed starting in 2019, if they cover maternity care, must also provide “substantially equivalent coverage” for abortion procedures.

LEGAL RECOGNITION AND PROTECTION OF UNBORN CHILDREN AND NEWLY BORN INFANTS

- Under Washington law, “the right of medical treatment of an infant born alive in the course of an abortion procedure shall be the same as the right of an infant born prematurely of equal gestational age.”

- Under Washington criminal law, the killing of an unborn child after “quickening” is defined as a form of homicide.
- It allows a wrongful death (civil) action when a viable unborn child is killed through negligence or a criminal act.
- Washington has enacted a “Baby Moses” law, establishing a safe haven for mothers to legally leave their infants at designated places and ensuring the infants receive appropriate care and protection.
- It is a misdemeanor to conceal the birth of a child by disposing of the dead body regardless of whether the child died before or after birth.
- It funds drug treatment programs for pregnant women and newborns.

BIOETHICS LAWS

- Washington law does not prohibit human cloning, destructive embryo research, or fetal experimentation.
- All persons licensed to provide prenatal care or practice medicine must provide information to all pregnant women regarding the differences between public and private umbilical cord blood banking and the opportunity to donate the blood and tissue extracted from the placenta and umbilical cord following delivery.
- Washington maintains no meaningful regulation of assisted reproductive technologies or human egg harvesting.
- The Uniform Parentage Act includes “donation of embryos” in its definition of “assisted reproduction.”

PATIENT PROTECTION LAWS

- Washington has legalized suicide by physician by voter initiative. The law creates financial incentives for healthcare insurance companies to deny coverage for life-saving treatment and to pressure vulnerable patients to choose suicide—a practice already occurring in Oregon. Moreover, the law does not provide safeguards for those suffering from mental illness or depression and requires physicians participating in patient suicides to falsify death certificates.
- The initiative superseded a prior law which made suicide by physician a felony. That law had been upheld in the landmark case of *Washington v. Glucksberg*, in which the U.S. Supreme Court refused to recognize a federal constitutional right to suicide by physician.

HEALTHCARE FREEDOM OF CONSCIENCE

PARTICIPATION IN ABORTION AND CONTRACEPTION

- An individual healthcare worker or private medical facility cannot be required by law or contract to participate in the performance of abortions.
- No person may be discriminated against in employment or professional privileges because of participating or refusing to participate in abortions.
- Washington protects individual healthcare providers, as well as private hospitals and medical facilities, who conscientiously object to participating in any healthcare procedure. However, this protection does not extend to public hospitals and medical facilities.

- Washington has a “contraceptive equity” law, requiring health insurance coverage for contraception. No exemption is provided for employers or insurers with a moral or religious objection to contraception.

PARTICIPATION IN RESEARCH HARMFUL TO HUMAN LIFE

- Washington currently provides no protection for the rights of healthcare providers who conscientiously object to participation in human cloning, destructive embryo research, or other forms of medical research that violate a provider’s moral or religious beliefs.

WHAT HAPPENS AFTER *ROE* IS OVERTURNED?

- Abortion will be legal throughout pregnancy.

RECOMMENDATIONS FOR WASHINGTON

WOMEN'S PROTECTION PROJECT PRIORITIES

- Enhanced penalties and enforcement mechanisms for the state's abortion-related laws
 - Women's Right to Know Act with reflection period
 - Coercive Abuse Against Mothers Prevention Act
 - Women's Health Protection Act (abortion clinic regulations, emergency transfer and admission provisions)
 - Drug-Induced Abortion Information and Reporting Act
 - Parental Notification for Abortion Act
 - Child Protection Act
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INFANTS' PROTECTION PROJECT PRIORITIES

- Unborn Infants Dignity Act
 - Prenatal Nondiscrimination Act
 - Perinatal Hospice Information Act
 - Unborn Infants Wrongful Death Act (for a pre-viable child)
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PATIENT PROTECTION ACT PRIORITIES

- Suicide by Physician Ban Act
 - Joint Resolution Opposing Suicide by Physician
 - Charlie Gard Act (formerly the Life Sustaining Care Act)
 - Pain Management Education Act
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ADDITIONAL PRIORITIES

ABORTION

- Repeal of State FOCA
- Defunding the Abortion Industry and Advancing Women's Health Act
- Federal Abortion-Mandate Opt-Out Act

LEGAL RECOGNITION AND PROTECTION FOR THE UNBORN

- Crimes Against the Unborn Child Act (protecting a child from conception)
- Pregnant Woman's Protection Act

BIOETHICS

- Human Cloning Prohibition Act
- Destructive Embryo Research Act
- Prohibition on Public Funding of Human Cloning and Destructive Embryo Research Act

END OF LIFE

- Limits on the provision of suicide by physician such as family member notification and mental health evaluations

HEALTHCARE FREEDOM OF CONSCIENCE

- Healthcare Freedom of Conscience Act