Wisconsin has continued to prioritize maternal health over abortion industry influence and profits, prohibiting late-term abortions and requiring comprehensive informed consent for abortions. Wisconsin is also one of a small number of states that maintain a broad, enforceable abortion prohibition should the U.S. Constitution be amended to protect unborn life or the U.S. Supreme Court overturn Roe v. Wade.

**ABORTION**

- Wisconsin possesses an enforceable abortion prohibition should the U.S. Constitution be amended or certain U.S. Supreme Court decisions be reversed or modified.

- Wisconsin prohibits abortions at or after 5 months (i.e., 20 weeks) on the basis of the pain experienced by unborn children.

- No abortion may be performed after viability unless necessary to preserve the woman’s life or health. Moreover, a physician must use the abortion method most likely to preserve the life and health of the unborn child unless that method would increase the risk to the woman.

- Wisconsin prohibits partial-birth abortion, but the state’s Attorney General issued a statement declaring the law unenforceable and finding it possibly restrictive of other abortion procedures.

- A physician may not perform an abortion on a woman until at least 24 hours after the woman is informed of the probable gestational age of her unborn child, the details of the proposed abortion procedure and its inherent risks, the particular medical risks of her pregnancy, her right to view an ultrasound prior to an abortion, available medical assistance benefits, the father’s legal responsibilities, and alternatives to abortion. Women must also be provided information on the post-fertilization age of the unborn child.

- Wisconsin requires the performance of an ultrasound before an abortion. An oral explanation of the ultrasound must be provided, and the image must be available for the woman to view. She must be provided with the opportunity to view and hear an explanation of the heartbeat if one is detectable. The woman cannot be forced to view the ultrasound or heartbeat if she refuses.

- The provision of informed consent and state-prepared materials must include information on perinatal hospice.

- Wisconsin requires abortion providers to state in their printed materials that it is illegal for anyone to coerce a woman into having an abortion.

- A physician may not perform an abortion on an unemancipated minor without the informed, written consent of one parent, grandparent, aunt, uncle, or sibling who is at least 25 years of age, unless the minor is the victim of rape, incest, or child abuse; there is a medical emergency; or the minor obtains a court order. Further, the law gives discretion to a psychiatrist or psychologist to waive consent based on a belief that the minor will commit suicide rather than obtain consent or seek a court order.
Wisconsin imposes minimal health and safety requirements on abortion facilities. Further, physicians may only perform first-trimester abortions within 30 minutes of a hospital.

Only a licensed physician may perform an abortion. A law requiring that individual abortion providers maintain hospital admitting privileges was invalidated by the Seventh Circuit Court of Appeals.

Wisconsin 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.

Wisconsin prohibits the use of telemedicine to administer abortion-inducing drugs and requires that such drugs be provided only by physicians, but the law has been challenged in state court.

Wisconsin provides state funding for abortions for women eligible for public assistance that are directly and medically necessary to preserve the woman's life, to prevent grave, long-lasting physical health damage to the woman, or when the pregnancy is the result of sexual assault or incest reported to law enforcement authorities.

Generally, no state, local, or federal funds passing through the state's pregnancy programs, projects, or services may be used to perform, promote, refer for, or counsel for abortion. However, referrals may be made if the abortion is necessary to preserve the woman's life. Further, the law only applies to the extent it does not compromise federal funding.

Wisconsin's Private Employer Health Care Purchasing Alliance, a voluntary program for private employers, may not include coverage for abortion unless the abortion is needed to preserve the woman's life. Further, coverage for abortions that are "medically necessary" may be obtained only by an optional rider or supplemental coverage provision that is offered and provided on an individual basis and for which an additional premium is paid. Under no circumstances is an employer required to provide coverage for abortion.

Wisconsin prohibits abortion coverage in the state health insurance Exchange required under the federal healthcare law except in cases of life endangerment, rape, incest, or possible "grave, long-lasting physical health damage."

Wisconsin offers "Choose Life" license plates, the proceeds of which benefit pregnancy resource centers.

**LEGAL RECOGNITION AND PROTECTION OF UNBORN CHILDREN AND NEWLY BORN INFANTS**

Wisconsin grants children born alive after an abortion attempt the same legal status and rights as any other child.

Under Wisconsin law, the killing of an unborn child at any stage of gestation is defined as a form of homicide.

Wisconsin defines a nonfatal assault on an unborn child as a crime.

It allows wrongful death (civil) actions when a viable unborn child is killed through a negligent or criminal act.

Wisconsin 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 defines substance abuse during pregnancy as "child abuse" under civil child-welfare statutes.
BIOETHICS LAWS

• Wisconsin does not ban human cloning, destructive embryo research, or fetal experimentation.
• Wisconsin provides funding for destructive embryo research.
• It requires that healthcare providers offer pregnant women information on options to donate umbilical cord blood following delivery.
• Wisconsin maintains no comprehensive measures regulating assisted reproductive technologies or human egg harvesting.

PATIENT PROTECTION LAWS

• Under Wisconsin law, assisting in a suicide is a felony.

HEALTHCARE FREEDOM OF CONSCIENCE

PARTICIPATION IN ABORTION AND CONTRACEPTION

• A physician or other person associated with, employed by, or on staff with a hospital who objects in writing and on moral or religious grounds is not required to participate in abortions.
• A healthcare provider’s conscientious objection to participating in abortion may not be a basis for damages, discrimination in employment or education, disciplinary action, or other recriminatory action.
• An individual or entity is not required, because of the receipt of any grant, contract, or loan under state or federal law, to participate in or make its facilities available for the performance of an abortion if such action is contrary to stated religious or moral beliefs.
• A hospital’s conscientious, moral, or religious objection to permitting or performing an abortion may not be a basis for civil damages.
• Wisconsin has a “contraceptive equity” requirement, meaning health insurance coverage must include coverage for contraception. No exemption is provided for employers or insurers with moral or religious objections to contraception.

PARTICIPATION IN RESEARCH HARMFUL TO HUMAN LIFE

• Wisconsin 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 not be legal except to save the life of the mother based on existing law enacted before Roe.
RECOMMENDATIONS
FOR WISCONSIN

WOMEN’S PROTECTION PROJECT PRIORITIES

• Enhanced penalties and enforcement mechanisms for the state’s abortion-related laws
• Women’s Health Protection Act (abortion facility regulations)
• Drug-Induced Abortion Information and Reporting Act
• Parental Involvement Enhancement Act
• Child Protection Act

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)

PATIENT PROTECTION ACT PRIORITIES

• Joint Resolution Opposing Suicide by Physician
• Charlie Gard Act (formerly the Life Sustaining Care Act)
• Pain Management Education Act

ADDITIONAL PRIORITIES

ABORTION
• Defunding the Abortion Industry and Advancing Women’s Health Act

LEGAL RECOGNITION AND PROTECTION FOR THE UNBORN
• 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

HEALTHCARE FREEDOM OF CONSCIENCE
• Healthcare Freedom of Conscience Act