

By: Representatives Gipson, Alday, Arnold, Bain, Bell, Boyd, Brown (20th), Byrd, Carpenter, Chism, Hamilton, Jennings, Martinson, Nelson, Pigott, Rogers (14th), Rogers (61st), Rushing, Taylor, Turner, Weathersby, Moore, Monsour, Baker, Aldridge, Beckett, Formby, Mettetal, Eure, Bennett, Denny, Kinkade, Shirley, Willis, Crawford, Gunn To: Judiciary B

HOUSE BILL NO. 1400
(As Sent to Governor)

1 AN ACT TO CREATE NEW SECTIONS 41-41-131 THROUGH 41-41-145,
2 MISSISSIPPI CODE OF 1972, TO PROHIBIT THE PERFORMING OR INDUCING
3 OF AN ABORTION AT OR AFTER 20 WEEKS GESTATIONAL AGE; TO PROHIBIT
4 THE PERFORMING OR INDUCING OF AN ABORTION UNTIL A PHYSICIAN MAKES
5 A DETERMINATION OF THE PROBABLE GESTATIONAL AGE OF THE UNBORN
6 CHILD; TO PROVIDE FOR CERTAIN EXCEPTIONS; TO PROVIDE FOR THE
7 PROTECTION OF PRIVACY IN COURT PROCEEDINGS OF THE IDENTITY OF THE
8 WOMAN ON WHOM AN ABORTION HAS BEEN PERFORMED OR INDUCED; TO AMEND
9 SECTION 73-25-29, MISSISSIPPI CODE OF 1972, TO PROVIDE THAT A
10 PHYSICIAN WHO PERFORMS OR INDUCES AN ABORTION IN VIOLATION OF THIS
11 ACT IS SUBJECT TO DISCIPLINARY ACTION; AND FOR RELATED PURPOSES.

12 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

13 **SECTION 1.** (1) The findings indicate that:

14 (a) Abortion can cause serious physical and
15 psychological (both short- and long-term) complications for women,
16 including, but not limited to: uterine perforation, uterine
17 scarring, cervical perforation or other injury, infection,
18 bleeding, hemorrhage, blood clots, failure to actually terminate
19 the pregnancy, incomplete abortion (retained tissue), pelvic
20 inflammatory disease, endometritis, missed ectopic pregnancy,
21 cardiac arrest, respiratory arrest, renal failure, metabolic
22 disorder, shock, embolism, coma, placenta previa in subsequent



23 pregnancies, preterm birth in subsequent pregnancies, free fluid
24 in the abdomen, organ damage, adverse reactions to anesthesia and
25 other drugs, psychological or emotional complications such as
26 depression, anxiety, sleeping disorders, and death;

27 (b) Abortion has a higher medical risk when the
28 procedure is performed later in pregnancy. Compared to an
29 abortion at eight (8) weeks gestation or earlier, the relative
30 risk increases exponentially at higher gestations. *L. Bartlett et*
31 *al., risk factors for legal induced abortion-related mortality in*
32 *the United States, Obstetrics & Gynecology 103(4):729 (2004);*

33 (c) In fact, the incidence of major complications is
34 highest after twenty (20) weeks gestation. *J. Pregler & A.*
35 *DeCherney, Women's Health; Principles and Clinical Practice 232*
36 *(2002);*

37 (d) According to the Alan Guttmacher Institute, the
38 risk of death associated with abortion increases with the length
39 of pregnancy, from one (1) death for every one million (1,000,000)
40 abortions at or before eight (8) weeks gestation to one (1) per
41 twenty-nine thousand (29,000) abortions at sixteen (16) to twenty
42 (20) weeks and one (1) per eleven thousand (11,000) abortions at
43 twenty-one (21) or more weeks (citing *L. Bartlett et al., risk*
44 *factors for legal induced abortion-related mortality in the United*
45 *States, Obstetrics & Gynecology 103(4):729-737 (2004);*

46 (e) After the first trimester, the risk of hemorrhage
47 from an abortion, in particular, is greater, and the resultant



48 complications may require a hysterectomy, other reparative
49 surgery, or a blood transfusion;

50 (f) The State of Mississippi has a legitimate concern
51 for the public's health and safety. *Williamson v. Lee Optical*,
52 *348 U.S. 483, 486 (1985)*;

53 (g) The State of Mississippi "has legitimate interests
54 from the outset of pregnancy in protecting the health of women."
55 *Planned Parenthood of Southeastern Pennsylvania v. Casey, 505 U.S.*
56 *833.847 (1992)*. More specifically, the State of Mississippi "has
57 a legitimate concern with the health of women who undergo
58 abortions." *Akron v. Akron Ctr. for Reproductive Health, Inc.,*
59 *462 U.S. 416, 428-29 (1983)*;

60 (h) In addition, substantial medical evidence
61 recognizes that an unborn child is capable of experiencing pain by
62 not later than twenty (20) weeks gestational age:

63 (i) Pain receptors (nociceptors) are present
64 throughout the unborn child's entire body and nerves link these
65 receptors to the brain's thalamus and subcortical plate by no
66 later than twenty (20) weeks.

67 (ii) By eight (8) weeks after conception, the
68 unborn child reacts to touch. After twenty (20) weeks, the unborn
69 child reacts to stimuli that would be recognized as painful if
70 applied to an adult human, for example, by recoiling.



71 (iii) In the unborn child, application of such
72 painful stimuli is associated with significant increases in stress
73 hormones known as the stress response.

74 (iv) Subjection to such painful stimuli is
75 associated with long-term harmful neurodevelopmental effects, such
76 as altered pain sensitivity and, possibly, emotional, behavioral,
77 and learning disabilities later in life.

78 (v) For the purposes of surgery on unborn
79 children, fetal anesthesia is routinely administered and is
80 associated with a decrease in stress hormones compared to their
81 level when painful stimuli are applied without such anesthesia.

82 (vi) The position, asserted by some medical
83 experts, that the unborn child is incapable of experiencing pain
84 until a point later in pregnancy than twenty (20) weeks after
85 conception predominately rests on the assumption that the ability
86 to experience pain depends on the cerebral cortex and requires
87 nerve connections between the thalamus and the cortex. However,
88 recent medical research and analysis, especially since 2007,
89 provides strong evidence for the conclusion that a functioning
90 cortex is not necessary to experience pain.

91 (vii) Substantial evidence indicates that children
92 born missing the bulk of the cerebral cortex, those with
93 hydranencephaly, nevertheless experience pain.



94 (viii) In adults, stimulation or ablation of the
95 cerebral cortex does not alter pain perception, while stimulation
96 or ablation of the thalamus does.

97 (ix) Substantial evidence indicates that
98 structures used for pain processing in early development differ
99 from those of adults, using different neural elements available at
100 specific times during development, such as the subcortical plate,
101 to fulfill the role of pain processing.

102 (x) The position, asserted by some medical
103 experts, that the unborn child remains in a coma-like sleep state
104 that precludes the unborn child experiencing pain is inconsistent
105 with the documented reaction of unborn children to painful stimuli
106 and with the experience of fetal surgeons who have found it
107 necessary to sedate the unborn child with anesthesia to prevent
108 the unborn child from thrashing about in reaction to invasive
109 surgery.

110 (i) The state has a compelling state interest in
111 protecting the lives of unborn children from the stage at which
112 substantial medical evidence indicates that these children are
113 capable of feeling pain;

114 (j) The compelling state interest in protecting the
115 lives of unborn children from the stage at which substantial
116 medical evidence indicates that an unborn child is capable of
117 feeling pain is intended to be separate from and independent of
118 the compelling state interest in protecting the lives of unborn



119 children from the stage of viability, and neither state interest
120 is intended to replace the other; and

121 (k) Restricting elective abortions at or later than
122 twenty (20) weeks gestational age, as provided by Sections
123 41-41-131 through 41-41-145, does not impose an undue burden or a
124 substantial obstacle on a woman's ability to have an abortion
125 because:

126 (i) The State of Mississippi has an interest in
127 protecting maternal health from the outset of pregnancy, and women
128 face substantial risks from abortion as gestation increases;

129 (ii) The woman has adequate time to decide whether
130 to have an abortion in the first twenty (20) weeks gestation; and

131 (iii) Sections 41-41-131 through 41-41-145 do not
132 apply to abortions that are necessary to avert the death or
133 substantial and irreversible physical impairment of a major bodily
134 function of the pregnant woman or abortions that are performed on
135 unborn children with severe fetal abnormalities.

136 (2) The Legislature intends that every application of
137 Sections 41-41-131 through 41-41-145 to every individual woman
138 shall be severable from each other. In the unexpected event that
139 the application of Sections 41-41-131 through 41-41-145 is found
140 to impose an impermissible undue burden on any pregnant woman or
141 group of pregnant women, the application of Sections 41-41-131
142 through 41-41-145 to those women shall be severed from the
143 remaining applications of Sections 41-41-131 through 41-41-145



144 that do not impose an undue burden, and those remaining
145 applications shall remain in force and unaffected, consistent with
146 Section 13 of this act.

147 **SECTION 2.** The following shall be codified as Section
148 41-41-131, Mississippi Code of 1972:

149 41-41-131. Sections 41-41-131 through 41-41-145 may be cited
150 as the Women's Health Protection and Preborn Pain Act.

151 **SECTION 3.** The following shall be codified as Section
152 41-41-133, Mississippi Code of 1972:

153 41-41-133. As used in Sections 41-41-131 through 41-41-145:

154 (a) "Abortion" means the use or prescription of any
155 instrument, medicine, drug or any other substance or device to
156 terminate the pregnancy of a woman known to be pregnant with an
157 intention other than to increase the probability of a live birth,
158 to preserve the life or health of the child after live birth or to
159 remove a dead fetus.

160 (b) "Gestational age" means the time that has elapsed
161 since the first day of the woman's last menstrual period as
162 determined using methods consistent with standard medical practice
163 in the community.

164 (c) "Severe fetal abnormality" means a life-threatening
165 physical condition that, in reasonable medical judgment,
166 regardless of the provision of life-saving medical treatment, is
167 incompatible with life outside the womb.



168 (d) "Major bodily function" includes, but is not
169 limited to, functions of the immune system, normal cell growth,
170 and digestive, bowel, bladder, neurological, brain, respiratory,
171 circulatory, endocrine and reproductive functions.

172 **SECTION 4.** The following shall be codified as Section
173 41-41-135, Mississippi Code of 1972:

174 41-41-135. Except as otherwise provided by Section
175 41-41-141, a physician may not perform, or induce or attempt to
176 perform or induce an abortion without, before the procedure:

177 (a) Making a determination of the probable gestational
178 age of the unborn child; or

179 (b) Possessing and relying on a determination of the
180 probable gestational age of the unborn child made by another
181 physician. The physician making such a determination must do so
182 in accordance with reasonable medical judgment.

183 **SECTION 5.** The following shall be codified as Section
184 41-41-137, Mississippi Code of 1972:

185 41-41-137. Except as otherwise provided by Section
186 41-41-141, a person may not perform or induce or attempt to
187 perform or induce an abortion on a woman if it has been
188 determined, by the physician performing, inducing, or attempting
189 to perform or induce the abortion or by another physician on whose
190 determination that physician relies, that the probable gestational
191 age of the unborn child is twenty (20) or more weeks.



192 **SECTION 6.** The following shall be codified as Section
193 41-41-139, Mississippi Code of 1972:

194 41-41-139. (1) This section applies only to an abortion
195 authorized under Section 41-41-141(1) in which:

196 (a) The probable gestational age of the unborn child is
197 twenty (20) or more weeks; or

198 (b) The probable gestational age of the unborn child
199 has not been determined but could reasonably be twenty (20) or
200 more weeks.

201 (2) A physician performing or inducing an abortion under
202 subsection (1) of this section shall terminate the pregnancy in
203 the manner that, in the physician's reasonable medical judgment,
204 provides the best opportunity for the unborn child to survive.

205 **SECTION 7.** The following shall be codified as Section
206 41-41-141, Mississippi Code of 1972:

207 41-41-141. (1) The prohibitions and requirements under
208 Sections 41-41-135, 41-41-137 and 41-41-139(2) do not apply if
209 there exists a condition in which an abortion is necessary to
210 preserve the life of the pregnant woman whose life is endangered
211 by a physical disorder, physical illness or physical injury,
212 including a life-endangering physical condition caused by or
213 arising from the pregnancy itself, or when continuation of the
214 pregnancy will create a serious risk of substantial and
215 irreversible impairment of a major bodily function (as



216 specifically defined in Section 3(d) of Section 41-41-133) of the
217 pregnant woman.

218 (2) The prohibitions and requirements under Sections
219 41-41-135, 41-41-137 and 41-41-139(2) do not apply to an abortion
220 performed or induced on an unborn child who has a severe fetal
221 abnormality if the mother is informed twenty-four (24) hours
222 before the abortion that supportive care, including, but not
223 limited to, counseling and medical care by maternal-fetal medical
224 specialists, obstetricians, neonatologists, anesthesia
225 specialists, clergy, social workers, and specialty nurses focused
226 on alleviating fear and ensuring that the woman and her family
227 experience the life and death of their child in a comfortable and
228 supportive environment, is available should she choose to carry
229 her pregnancy to term.

230 **SECTION 8.** The following shall be codified as Section
231 41-41-143, Mississippi Code of 1972:

232 41-41-143. (1) Except as otherwise provided by this
233 section, in a civil or criminal proceeding or action involving an
234 act prohibited under Sections 41-41-131 through 41-41-145, the
235 identity of the woman on whom an abortion has been performed or
236 induced or attempted to be performed or induced is not subject to
237 public disclosure if the woman does not give consent to
238 disclosure.

239 (2) Unless the court makes a ruling under subsection (3) of
240 this section to allow disclosure of the woman's identity, the



241 court shall issue orders to the parties, witnesses, and counsel
242 and shall direct the sealing of the record and exclusion of
243 individuals from courtrooms or hearing rooms to the extent
244 necessary to protect the woman's identity from public disclosure.

245 (3) A court may order the disclosure of information that is
246 confidential under this section if:

247 (a) A motion is filed with the court requesting release
248 of the information and a hearing on that request; and

249 (b) Notice of the hearing is served on each interested
250 party.

251 (4) If the conditions specified in subsection (3) of this
252 section are fulfilled, then after an in camera hearing, for each
253 order issued under subsection (2) of this section that is
254 challenged by a motion under subsection (3) of this section, the
255 court shall either vacate the order or issue specific written
256 findings explaining why the anonymity of the woman should be
257 preserved from public disclosure, why the order is essential to
258 that end, how the order is narrowly tailored to serve that
259 interest, and why no reasonable less restrictive alternative
260 exists.

261 **SECTION 9.** The following shall be codified as Section
262 41-41-145, Mississippi Code of 1972:

263 41-41-145. (1) Sections 41-41-131 through 41-41-145 shall
264 be construed, as a matter of state law, to be enforceable up to
265 but no further than the maximum possible extent consistent with



266 federal constitutional requirements, even if that construction is
267 not readily apparent, as such constructions are authorized only to
268 the extent necessary to save Sections 41-41-131 through 41-41-145
269 from judicial invalidation. Judicial reformation of statutory
270 language is explicitly authorized only to the extent necessary to
271 save the statutory provision from invalidity.

272 (2) If any court determines that a provision of Sections
273 41-41-131 through 41-41-145 is unconstitutionally vague, the court
274 shall interpret the provision, as a matter of state law, to avoid
275 the vagueness problem and shall enforce the provision to the
276 maximum possible extent. If a federal court finds any provision
277 of Sections 41-41-131 through 41-41-145 or its application to any
278 person, group of persons, or circumstances to be
279 unconstitutionally vague and declines to impose the saving
280 construction described by this subsection, the Mississippi Supreme
281 Court shall provide an authoritative construction of the
282 objectionable statutory provisions that avoids the constitutional
283 problems while enforcing the statute's restrictions to the maximum
284 possible extent, and shall agree to answer any question certified
285 from a federal appellate court regarding the statute.

286 (3) State executive or administrative officials may not
287 decline to enforce Sections 41-41-131 through 41-41-145, or adopt
288 a construction of Sections 41-41-131 through 41-41-145 in a way
289 that narrows their applicability, based on the official's own
290 beliefs about what the state or federal constitution requires,



291 unless the official is enjoined by a state or federal court from
292 enforcing Sections 41-41-131 through 41-41-145.

293 (4) Sections 41-41-131 through 41-41-145 may not be
294 construed to authorize the prosecution of or a cause of action to
295 be brought against a woman on whom an abortion is performed or
296 induced or attempted to be performed or induced in violation of
297 Sections 41-41-131 through 41-41-145.

298 **SECTION 10.** Section 73-25-29, Mississippi Code of 1972, is
299 amended as follows:

300 73-25-29. The grounds for the nonissuance, suspension,
301 revocation or restriction of a license or the denial of
302 reinstatement or renewal of a license are:

303 (1) Habitual personal use of narcotic drugs, or any
304 other drug having addiction-forming or addiction-sustaining
305 liability.

306 (2) Habitual use of intoxicating liquors, or any
307 beverage, to an extent which affects professional competency.

308 (3) Administering, dispensing or prescribing any
309 narcotic drug, or any other drug having addiction-forming or
310 addiction-sustaining liability otherwise than in the course of
311 legitimate professional practice.

312 (4) Conviction of violation of any federal or state law
313 regulating the possession, distribution or use of any narcotic
314 drug or any drug considered a controlled substance under state or
315 federal law, a certified copy of the conviction order or judgment



316 rendered by the trial court being prima facie evidence thereof,
317 notwithstanding the pendency of any appeal.

318 (5) Procuring, or attempting to procure, or aiding in,
319 an abortion that is not medically indicated.

320 (6) Conviction of a felony or misdemeanor involving
321 moral turpitude, a certified copy of the conviction order or
322 judgment rendered by the trial court being prima facie evidence
323 thereof, notwithstanding the pendency of any appeal.

324 (7) Obtaining or attempting to obtain a license by
325 fraud or deception.

326 (8) Unprofessional conduct, which includes, but is not
327 limited to:

328 (a) Practicing medicine under a false or assumed
329 name or impersonating another practitioner, living or dead.

330 (b) Knowingly performing any act which in any way
331 assists an unlicensed person to practice medicine.

332 (c) Making or willfully causing to be made any
333 flamboyant claims concerning the licensee's professional
334 excellence.

335 (d) Being guilty of any dishonorable or unethical
336 conduct likely to deceive, defraud or harm the public.

337 (e) Obtaining a fee as personal compensation or
338 gain from a person on fraudulent representation of a disease or
339 injury condition generally considered incurable by competent
340 medical authority in the light of current scientific knowledge and



341 practice can be cured or offering, undertaking, attempting or
342 agreeing to cure or treat the same by a secret method, which he
343 refuses to divulge to the board upon request.

344 (f) Use of any false, fraudulent or forged
345 statement or document, or the use of any fraudulent, deceitful,
346 dishonest or immoral practice in connection with any of the
347 licensing requirements, including the signing in his professional
348 capacity any certificate that is known to be false at the time he
349 makes or signs such certificate.

350 (g) Failing to identify a physician's school of
351 practice in all professional uses of his name by use of his earned
352 degree or a description of his school of practice.

353 (9) The refusal of a licensing authority of another
354 state or jurisdiction to issue or renew a license, permit or
355 certificate to practice medicine in that jurisdiction or the
356 revocation, suspension or other restriction imposed on a license,
357 permit or certificate issued by such licensing authority which
358 prevents or restricts practice in that jurisdiction, a certified
359 copy of the disciplinary order or action taken by the other state
360 or jurisdiction being prima facie evidence thereof,
361 notwithstanding the pendency of any appeal.

362 (10) Surrender of a license or authorization to
363 practice medicine in another state or jurisdiction or surrender of
364 membership on any medical staff or in any medical or professional
365 association or society while under disciplinary investigation by



366 any of those authorities or bodies for acts or conduct similar to
367 acts or conduct which would constitute grounds for action as
368 defined in this section.

369 (11) Final sanctions imposed by the United States
370 Department of Health and Human Services, Office of Inspector
371 General or any successor federal agency or office, based upon a
372 finding of incompetency, gross misconduct or failure to meet
373 professionally recognized standards of health care; a certified
374 copy of the notice of final sanction being prima facie evidence
375 thereof. As used in this paragraph, the term "final sanction"
376 means the written notice to a physician from the United States
377 Department of Health and Human Services, Officer of Inspector
378 General or any successor federal agency or office, which
379 implements the exclusion.

380 (12) Failure to furnish the board, its investigators or
381 representatives information legally requested by the board.

382 (13) Violation of any provision(s) of the Medical
383 Practice Act or the rules and regulations of the board or of any
384 order, stipulation or agreement with the board.

385 (14) Violation(s) of the provisions of Sections
386 41-121-1 through 41-121-9 relating to deceptive advertisement by
387 health care practitioners. This paragraph shall stand repealed on
388 July 1, 2016.



389 (15) Performing or inducing an abortion on a woman in
390 violation of any provision of Sections 41-41-131 through
391 41-41-145.

392 In addition to the grounds specified above, the board shall
393 be authorized to suspend the license of any licensee for being out
394 of compliance with an order for support, as defined in Section
395 93-11-153. The procedure for suspension of a license for being
396 out of compliance with an order for support, and the procedure for
397 the reissuance or reinstatement of a license suspended for that
398 purpose, and the payment of any fees for the reissuance or
399 reinstatement of a license suspended for that purpose, shall be
400 governed by Section 93-11-157 or 93-11-163, as the case may be.
401 If there is any conflict between any provision of Section
402 93-11-157 or 93-11-163 and any provision of this chapter, the
403 provisions of Section 93-11-157 or 93-11-163, as the case may be,
404 shall control.

405 **SECTION 11.** Sections 41-41-131 through 41-41-145 may not be
406 construed to repeal, by implication or otherwise, any other
407 provision of Mississippi law regulating or restricting abortion
408 not specifically addressed by Sections 41-41-131 through
409 41-41-145. An abortion that complies with Sections 41-41-131
410 through 41-41-145 but violates any other law is unlawful. An
411 abortion that complies with another state law but violates
412 Sections 41-41-131 through 41-41-145 is unlawful as provided in
413 Sections 41-41-131 through 41-41-145.



414 **SECTION 12.** (1) If some or all of the provisions of
415 Sections 41-41-131 through 41-41-145 are ever temporarily or
416 permanently restrained or enjoined by judicial order, all other
417 provisions of Mississippi law regulating or restricting abortion
418 shall be enforced as though the restrained or enjoined provisions
419 had not been adopted; however, whenever the temporary or permanent
420 restraining order or injunction is stayed or dissolved, or
421 otherwise ceases to have effect, the provisions shall have full
422 force and effect.

423 (2) *Mindful of Leavitt v. Jane L., 518 U.S. 137 (1996)*, in
424 which in the context of determining the severability of a state
425 statute regulating abortion the United States Supreme Court held
426 that an explicit statement of legislative intent is controlling,
427 it is the intent of the Legislature that every provision, section,
428 subsection, paragraph, sentence, clause, phrase or word in
429 Sections 41-41-131 through 41-41-145, and every application of the
430 provisions in Sections 41-41-131 through 41-41-145, are severable
431 from each other. If any application of any provision in Sections
432 41-41-131 through 41-41-145 to any person, group of persons, or
433 circumstances is found by a court to be invalid, the remaining
434 applications of that provision to all other persons and
435 circumstances shall be severed and may not be affected. All
436 constitutionally valid applications of Sections 41-41-131 through
437 41-41-145 shall be severed from any applications that a court
438 finds to be invalid, leaving the valid applications in force,



439 because it is the Legislature's intent and priority that the valid
440 applications be allowed to stand alone. Even if a reviewing court
441 finds a provision of Sections 41-41-131 through 41-41-145 to
442 impose an undue burden in a large or substantial fraction of
443 relevant cases, the applications that do not represent an undue
444 burden shall be severed from the remaining provisions and shall
445 remain in force, and shall be treated as if the Legislature had
446 enacted a statute limited to the persons, group of persons, or
447 circumstances for which the statute's application does not present
448 an undue burden. The Legislature further declares that it would
449 have passed Sections 41-41-131 through 41-41-145, and each
450 provision, section, subsection, sentence, clause, phrase or word,
451 and all constitutional applications of Sections 41-41-131 through
452 41-41-145, irrespective of the fact that any provision, section,
453 subsection, paragraph, sentence, clause, phrase or word, or
454 applications of Sections 41-41-131 through 41-41-145, were to be
455 declared unconstitutional or to represent an undue burden.

456 (3) If Sections 41-41-131 through 41-41-145 are found by any
457 court to be invalid or to impose an undue burden as applied to any
458 person, group of persons, or circumstances, the prohibition shall
459 apply to that person or group of persons or circumstances on the
460 earliest date on which Sections 41-41-131 through 41-41-145 can be
461 constitutionally applied.

462 (4) If any provisions of Sections 41-41-131 through
463 41-41-145 is found by any court to be unconstitutionally vague,



464 then the applications of the provision that do not present
465 constitutional vagueness problems shall be severed and remain in
466 force.

467 **SECTION 13.** This act shall take effect and be in force from
468 and after July 1, 2014.

