

# EXHIBIT A-G

# EXHIBIT G



**Missouri Department of Health and Senior Services**

P.O. Box 570, Jefferson City, MO 65102-0570 Phone: 573-751-6400 FAX: 573-751-6010  
RELAY MISSOURI for Hearing and Speech Impaired and Voice dial: 711

**Randall W. Williams, MD, FACOG**  
Director



**Michael L. Parson**  
Governor

May 20, 2019

Cathy Williams, Interim President & CEO  
Reproductive Health Services of Planned Parenthood  
425 Forest Park Avenue  
St. Louis, MO 63108

**Re: POC Rejection / Incomplete Investigation**

Dear Ms. Williams:

On April 9, 2019, our Bureau of Ambulatory Care received your Plan of Correction as a result of a Licensure inspection conducted on March 13, 2019. Your Plan of Correction is not acceptable as submitted. The following issues need additional clarification and/or information in order for the Plan of Correction to be acceptable, and we recommend that you submit an amended Plan of Correction that addresses these issues promptly. These areas are as follows:

In reference to the deficiency identified in *L-1076*- Regarding patient #10, the Statement of Deficiencies (SOD) misidentified Staff AA as the physician who induced the medication abortion and will be updated to reflect the removal of that statement (revised SOD attached). Second, in accordance with section 188.027.6 RSMo, the physician performing the physician portion of the informed consent must be the same physician who performs or induces the abortion. A supervising physician who is merely present in the building without taking any active role in performing or inducing the abortion—while a resident or fellow actually performs or induces the abortion—does not “perform or induce” the abortion under the statute. Your proposed Plan of Correction states that, in the two specific instances cited in the SOD, the supervising physician who carried out the physician portion of the informed consent actively participated in inducing the abortion. But our investigation commenced on April 3, 2019, has identified additional instances in which medical records indicate that the physician who carried out the physician portion of the informed consent differed from the physician who performed or induced the abortion. We have been unable to verify the fact or extent of your compliance with this requirement because several physicians identified in those records have refused to participate in interviews. The Plan of Correction fails to provide adequate assurance of compliance and fails to identify the systemic changes that will be implemented to ensure that the deficient practice will not recur. The description must be specific, realistic and complete.

In reference to the deficiency identified in *L-1103*- A pelvic examination must be completed prior to every abortion for the purpose of “*determining the duration of gestation, identifying preexisting medical or other complications, and detecting factors which could influence the choice of the procedure, anesthesia, or preoperative and postoperative management*” in accordance with 19 CSR 30-30.060(2)(D) (emphasis added). Inspectors found that pelvic examinations were performed immediately prior to the actual abortion procedure in the case of surgical abortions, not meeting the purpose of the

[www.health.mo.gov](http://www.health.mo.gov)

Healthy Missourians for life.

The Missouri Department of Health and Senior Services will be the leader in promoting, protecting and partnering for health.

AN EQUAL OPPORTUNITY / AFFIRMATIVE ACTION EMPLOYER: Services provided on a nondiscriminatory basis.

requirement, which as noted above includes “detecting factors which could influence the choice of the procedure.” Additionally, your policy indicates a pelvic examination is completed for medication abortions only “when indicated (e.g., vaginal bleeding or abdominal/pelvic pain, or as required by Missouri regulations).” This suggests that there may be times when a pelvic examination would not be required by Missouri regulations, which is not correct under 19 CSR 30-30.060(2)(D). The Plan of Correction fails to identify the systemic changes that will be implemented to ensure that the purpose of the rule is met and the deficient practice will not recur. The description must be specific, realistic and complete.

In reference to the deficiency identified in *L-1131*- Please provide more specific information regarding the frequency and type of audits that will be completed to ensure compliance is maintained.

Please submit a revised Plan of Correction with the above mentioned information as soon as possible via email to [BAC@health.mo.gov](mailto:BAC@health.mo.gov) or fax to (573) 751-6648 or mail to Missouri Department of Health and Senior Services, Bureau of Ambulatory Care, P.O. Box 570, Jefferson City, MO 65102-0570. I have attached a detailed instruction sheet for your reference.

On April 3, 2019, you were notified of a complaint investigation regarding Reproductive Health Services of Planned Parenthood of the St. Louis Region (RHS). As part of the investigation, interviews were requested with your physician abortion providers. To date, RHS has been unable to produce some physician abortion providers, as identified in the medical records, for interview with Department Inspectors. As a result of the investigation, more than thirty (30) potential deficient practices were identified, including but not limited to those discussed above. Please note that the Department cannot complete our investigation as required until we interview the physicians involved in the care provided in the potential deficient practices, noted above, at the facility. Historically, RHS has always provided physicians for interview. This is also the standard practice across all regulated provider types.

The Department is in receipt of your licensure renewal application, received on May 16, 2019. As I have informed RHS staff since April 3, 2019, the complaint investigation needs to be completed and any deficiencies resolved before the expiration of RHS’s license on May 31, 2019. And on April 22, 2019, RHS was also notified in relation to the the requested physician interviews of the prohibition in 19 CSR 30-30.050(2)(I), which states: “No license shall be issued or renewed by the department until the department has inspected the facility and determined that it is in compliance with all requirements of applicable statutes and regulations.” As indicated above, until the Department interviews the physicians, we cannot complete our investigation and determine compliance with all applicable statutes and regulations.

Sincerely,



William Koebel, Administrator  
Section for Health Standards and Licensure  
Missouri Department of Health and Senior Services