

SENATE BILL 676

J1, E1, J2

5lr1214
CF 5lr1204

By: **Senators Young, Feldman, Kelley, Madaleno, Manno, Montgomery, Pinsky,
and Raskin**

Introduced and read first time: February 6, 2015

Assigned to: Judicial Proceedings

A BILL ENTITLED

1 AN ACT concerning

2 **Richard E. Israel and Roger “Pip” Moyer Death With Dignity Act**

3 FOR the purpose of authorizing a qualified patient to request aid in dying by making
4 certain requests; prohibiting an individual from requesting aid in dying on behalf of
5 a patient; requiring a written request for aid in dying to meet certain requirements;
6 establishing certain requirements for witnesses to a written request for aid in dying;
7 requiring a written request for aid in dying to be in a certain form; requiring an
8 attending physician who receives a written request for aid in dying to make a certain
9 determination and to accept certain documents or certain knowledge as proof of
10 certain residency; requiring an attending physician to provide certain information to
11 a patient for a certain purpose and to refer a patient to a consulting physician, under
12 certain circumstances; requiring a consulting physician to fulfill certain duties;
13 requiring an attending physician or a consulting physician to refer a patient to a
14 certain individual for a competency evaluation, under certain circumstances;
15 prohibiting an attending physician from providing a patient with medication for aid
16 in dying until a certain individual providing the competency evaluation makes a
17 certain determination and communicates the determination to certain individuals in
18 a certain manner; requiring an attending physician to take certain actions, under
19 certain circumstances; requiring a pharmacist to dispense medication for aid in
20 dying, under certain circumstances; authorizing an attending physician to sign a
21 qualified patient’s death certificate, under certain circumstances; requiring the
22 qualified patient’s death certificate to list a certain cause of death; requiring an
23 attending physician to ensure that the medical record of a qualified patient
24 documents or contains certain information; providing that certain records or
25 information are not subject to subpoena or discovery and may not be introduced into
26 evidence in certain proceedings, except for a certain purpose; requiring a certain
27 individual to dispose of certain medication in a lawful manner; providing that the
28 death of a patient by reason of self-administration of certain medication shall be
29 deemed to be a death from certain natural causes, for certain purposes; making void
30 a certain provision of certain legal instruments; prohibiting a certain provision of

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 law enacted by this Act from being construed to prohibit a certain cause of action;
2 providing that this Act does not authorize certain individuals to end a patient's life
3 by certain means; providing that actions taken in accordance with this Act do not
4 constitute certain actions; making certain provisions in an insurance policy or
5 certain other agreements issued on or after a certain date invalid; prohibiting certain
6 obligations existing on a certain date or certain actions taken in relation to certain
7 insurance policies from being conditioned on or affected by the making or rescinding
8 of a request for aid in dying; prohibiting a qualified patient's act of
9 self-administering medication for aid in dying from having certain effects under
10 certain insurance policies; prohibiting a person from being subject to certain liability
11 or certain action for participating in good faith compliance with this Act; prohibiting
12 certain persons or entities from subjecting a person to certain actions for
13 participating or refusing to participate in good faith compliance with this Act;
14 providing that a patient's request for aid in dying or an attending physician's
15 prescription of medication in good faith compliance with this Act does not constitute
16 neglect or provide the sole basis for an appointment of a guardian or conservator;
17 authorizing a health care provider to prohibit another health care provider from
18 participating in aid in dying on certain premises, under certain circumstances;
19 authorizing a health care provider to subject another health care provider to certain
20 sanctions, under certain circumstances; providing that certain authorization does
21 not prohibit a health care provider from participating in aid in dying, under certain
22 circumstances, or prohibit a patient from contracting with a certain physician for a
23 certain purpose; providing that participation by a health care provider in aid in dying
24 is voluntary; prohibiting a health care facility from requiring certain physicians to
25 participate in aid in dying; requiring an attending physician to provide certain
26 information to a patient and transfer a copy of certain medical records, under certain
27 circumstances; authorizing a health care facility to adopt certain policies;
28 establishing certain penalties for certain violations; providing that certain provisions
29 of this Act do not limit certain liability; providing that certain penalties do not
30 preclude certain penalties applicable under other law for certain conduct;
31 establishing that a licensed health care professional does not violate the statutory
32 prohibition on assisted suicide by taking certain actions in accordance with this Act;
33 defining certain terms; and generally relating to aid in dying.

34 BY repealing and reenacting, without amendments,
35 Article – Criminal Law
36 Section 3–102
37 Annotated Code of Maryland
38 (2012 Replacement Volume and 2014 Supplement)

39 BY repealing and reenacting, with amendments,
40 Article – Criminal Law
41 Section 3–103
42 Annotated Code of Maryland
43 (2012 Replacement Volume and 2014 Supplement)

44 BY adding to

1 Article – Health – General

2 Section 5–6A–01 through 5–6A–16 to be under the new subtitle “Subtitle 6A. The
3 Richard E. Israel and Roger “Pip” Moyer Death With Dignity Act”

4 Annotated Code of Maryland

5 (2009 Replacement Volume and 2014 Supplement)

6 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

7 That the Laws of Maryland read as follows:

8 **Article – Criminal Law**

9 3–102.

10 With the purpose of assisting another individual to commit or attempt to commit
11 suicide, an individual may not:

12 (1) by coercion, duress, or deception, knowingly cause another individual
13 to commit suicide or attempt to commit suicide;

14 (2) knowingly provide the physical means by which another individual
15 commits or attempts to commit suicide with knowledge of that individual’s intent to use
16 the physical means to commit suicide; or

17 (3) knowingly participate in a physical act by which another individual
18 commits or attempts to commit suicide.

19 3–103.

20 (a) A licensed health care professional does not violate § 3–102 of this subtitle by
21 administering or prescribing a procedure or administering, prescribing, or dispensing a
22 medication to relieve pain, even if the medication or procedure may hasten death or
23 increase the risk of death, unless the licensed health care professional knowingly
24 administers or prescribes the procedure or administers, prescribes, or dispenses the
25 medication to cause death.

26 (b) A licensed health care professional does not violate § 3–102 of this subtitle by
27 withholding or withdrawing a medically administered life–sustaining procedure:

28 (1) in compliance with Title 5, Subtitle 6 of the Health – General Article;
29 or

30 (2) in accordance with reasonable medical practice.

31 **(C) A LICENSED HEALTH CARE PROFESSIONAL DOES NOT VIOLATE § 3–102**
32 **OF THIS SUBTITLE BY TAKING ANY ACTION IN ACCORDANCE WITH TITLE 5,**
33 **SUBTITLE 6A OF THE HEALTH – GENERAL ARTICLE.**

1 **(3) COMMUNICATE THE INFORMED DECISION TO A HEALTH CARE**
2 **PROVIDER, INCLUDING COMMUNICATING THROUGH AN INDIVIDUAL FAMILIAR WITH**
3 **THE PATIENT’S MANNER OF COMMUNICATING; AND**

4 **(4) SELF-ADMINISTER MEDICATION.**

5 **(F) “CONSULTING PHYSICIAN” MEANS A LICENSED PHYSICIAN WHO IS**
6 **QUALIFIED BY SPECIALTY OR EXPERIENCE TO CONFIRM A PROFESSIONAL**
7 **DIAGNOSIS AND PROGNOSIS REGARDING A PATIENT’S TERMINAL ILLNESS.**

8 **(G) “HEALTH CARE FACILITY” MEANS:**

9 **(1) A HOSPITAL, AS DEFINED IN § 19-301 OF THIS ARTICLE;**

10 **(2) A HOSPICE FACILITY, AS DEFINED IN § 19-901 OF THIS ARTICLE;**

11 **(3) AN ASSISTED LIVING PROGRAM, AS DEFINED IN § 19-1801 OF THIS**
12 **ARTICLE; OR**

13 **(4) A NURSING HOME, AS DEFINED IN § 19-1401 OF THIS ARTICLE.**

14 **(H) “HEALTH CARE PROVIDER” MEANS:**

15 **(1) AN INDIVIDUAL LICENSED OR CERTIFIED UNDER THE HEALTH**
16 **OCCUPATIONS ARTICLE TO PROVIDE HEALTH CARE OR DISPENSE MEDICATION IN**
17 **THE ORDINARY COURSE OF BUSINESS OR PRACTICE OF A PROFESSION; OR**

18 **(2) A HEALTH CARE FACILITY.**

19 **(I) “INFORMED DECISION” MEANS A DECISION BY A PATIENT THAT IS:**

20 **(1) BASED ON AN UNDERSTANDING AND ACKNOWLEDGMENT OF THE**
21 **RELEVANT FACTS; AND**

22 **(2) MADE AFTER RECEIVING THE INFORMATION REQUIRED UNDER §**
23 **5-6A-04(C) OF THIS SUBTITLE.**

24 **(J) “LICENSED MENTAL HEALTH PROFESSIONAL” MEANS A LICENSED**
25 **PSYCHIATRIST OR A LICENSED PSYCHOLOGIST.**

26 **(K) “LICENSED PHYSICIAN” MEANS A PHYSICIAN WHO IS LICENSED TO**
27 **PRACTICE MEDICINE IN THE STATE.**

1 (L) “LICENSED PSYCHIATRIST” MEANS A PSYCHIATRIST WHO IS LICENSED
2 TO PRACTICE MEDICINE IN THE STATE.

3 (M) “LICENSED PSYCHOLOGIST” MEANS A PSYCHOLOGIST WHO IS LICENSED
4 TO PRACTICE PSYCHOLOGY IN THE STATE.

5 (N) “PALLIATIVE CARE” MEANS HEALTH CARE CENTERED ON A
6 TERMINALLY ILL PATIENT AND THE PATIENT’S FAMILY THAT:

7 (1) OPTIMIZES THE PATIENT’S QUALITY OF LIFE BY ANTICIPATING,
8 PREVENTING, AND TREATING THE PATIENT’S SUFFERING THROUGHOUT THE
9 CONTINUUM OF THE PATIENT’S TERMINAL ILLNESS;

10 (2) ADDRESSES THE PHYSICAL, EMOTIONAL, SOCIAL, AND SPIRITUAL
11 NEEDS OF THE PATIENT;

12 (3) FACILITATES PATIENT AUTONOMY, THE PATIENT’S ACCESS TO
13 INFORMATION AND PATIENT CHOICE; AND

14 (4) INCLUDES DISCUSSIONS BETWEEN THE PATIENT AND A HEALTH
15 CARE PROVIDER CONCERNING THE PATIENT’S GOALS FOR TREATMENT AND
16 APPROPRIATE TREATMENT OPTIONS AVAILABLE TO THE PATIENT, INCLUDING
17 HOSPICE CARE AND COMPREHENSIVE PAIN AND SYMPTOM MANAGEMENT.

18 (O) “PATIENT” MEANS AN INDIVIDUAL WHO IS UNDER THE CARE OF A
19 PHYSICIAN.

20 (P) “PHARMACIST” MEANS A PHARMACIST WHO IS LICENSED TO PRACTICE
21 PHARMACY IN THE STATE.

22 (Q) “QUALIFIED PATIENT” MEANS A PATIENT WHO:

23 (1) IS AN ADULT;

24 (2) IS COMPETENT;

25 (3) IS A RESIDENT OF THE STATE; AND

26 (4) HAS A TERMINAL ILLNESS.

27 (R) “RELATIVE” MEANS:

28 (1) A SPOUSE;

- 1 **(2) A CHILD;**
2 **(3) A GRANDCHILD;**
3 **(4) A SIBLING;**
4 **(5) A PARENT; OR**
5 **(6) A GRANDPARENT.**

6 **(S) “SELF-ADMINISTER” MEANS A QUALIFIED PATIENT’S ACT OF TAKING**
7 **MEDICATION PRESCRIBED UNDER § 5-6A-07(A) OF THIS SUBTITLE.**

8 **(T) “TERMINAL ILLNESS” MEANS A MEDICAL CONDITION THAT, WITHIN**
9 **REASONABLE MEDICAL JUDGMENT, INVOLVES A PROGNOSIS FOR A PATIENT THAT**
10 **LIKELY WILL RESULT IN THE PATIENT’S DEATH WITHIN 6 MONTHS.**

11 **(U) “WRITTEN REQUEST” MEANS A WRITTEN REQUEST FOR AID IN DYING.**

12 **5-6A-02.**

13 **(A) A QUALIFIED PATIENT MAY REQUEST AID IN DYING BY:**

14 **(1) MAKING AN INITIAL ORAL REQUEST TO THE PATIENT’S**
15 **ATTENDING PHYSICIAN;**

16 **(2) AFTER MAKING AN INITIAL ORAL REQUEST, MAKING A WRITTEN**
17 **REQUEST TO THE PATIENT’S ATTENDING PHYSICIAN, IN ACCORDANCE WITH §**
18 **5-6A-03 OF THIS SUBTITLE; AND**

19 **(3) MAKING A SECOND ORAL REQUEST TO THE PATIENT’S ATTENDING**
20 **PHYSICIAN, AT LEAST:**

21 **(I) 15 DAYS AFTER MAKING THE INITIAL ORAL REQUEST; AND**

22 **(II) 48 HOURS AFTER MAKING THE WRITTEN REQUEST.**

23 **(B) NOTWITHSTANDING ANY OTHER PROVISION OF LAW, NO OTHER**
24 **INDIVIDUAL, INCLUDING AN AGENT UNDER AN ADVANCE DIRECTIVE, AN**
25 **ATTORNEY-IN-FACT UNDER A DURABLE POWER OF ATTORNEY, A GUARDIAN, OR A**
26 **CONSERVATOR, MAY REQUEST AID IN DYING ON BEHALF OF A PATIENT.**

1 **5-6A-03.**

2 (A) A WRITTEN REQUEST FOR AID IN DYING REQUIRED UNDER §
3 **5-6A-02(A)(2)** OF THIS SECTION SHALL BE:

4 (1) IN SUBSTANTIALLY THE SAME FORM SET FORTH IN SUBSECTION
5 (C) OF THIS SECTION;

6 (2) SIGNED AND DATED BY THE PATIENT; AND

7 (3) WITNESSED BY AT LEAST TWO INDIVIDUALS WHO, IN THE
8 PRESENCE OF THE PATIENT, ATTEST THAT TO THE BEST OF THEIR KNOWLEDGE AND
9 BELIEF THE PATIENT IS:

10 (I) OF SOUND MIND; AND

11 (II) ACTING VOLUNTARILY AND NOT BEING COERCED TO SIGN
12 THE WRITTEN REQUEST.

13 (B) (1) ONLY ONE OF THE WITNESSES UNDER SUBSECTION (A)(3) OF THIS
14 SECTION MAY BE:

15 (I) A RELATIVE OF THE PATIENT BY BLOOD, MARRIAGE, OR
16 ADOPTION;

17 (II) AT THE TIME THE WRITTEN REQUEST IS SIGNED BY THE
18 PATIENT, ENTITLED TO ANY BENEFIT ON THE PATIENT'S DEATH; OR

19 (III) AN OWNER, OPERATOR, OR EMPLOYEE OF A HEALTH CARE
20 FACILITY IN WHICH THE PATIENT IS RECEIVING MEDICAL TREATMENT OR IS A
21 RESIDENT.

22 (2) (I) 1. SUBJECT TO SUBPARAGRAPH (II) OF THIS
23 PARAGRAPH, IF A PATIENT IS AN INPATIENT OR A RESIDENT OF A HEALTH CARE
24 FACILITY AT THE TIME THE WRITTEN REQUEST TO THE PATIENT'S ATTENDING
25 PHYSICIAN IS SIGNED, ONE OF THE WITNESSES SHALL BE AN INDIVIDUAL
26 DESIGNATED BY THE HEALTH CARE FACILITY; AND

27 2. AT LEAST 48 HOURS BEFORE SIGNING THE WRITTEN
28 REQUEST TO THE PATIENT'S ATTENDING PHYSICIAN, THE PATIENT SHALL SUBMIT A
29 WRITTEN REQUEST TO THE HEALTH CARE FACILITY TO DESIGNATE A WITNESS.

1 (ii) IF A HEALTH CARE FACILITY FAILS TO DESIGNATE A
2 WITNESS WITHIN 48 HOURS AFTER RECEIVING A WRITTEN REQUEST FROM A
3 PATIENT TO DESIGNATE A WITNESS, NO WITNESS IS REQUIRED TO BE AN INDIVIDUAL
4 DESIGNATED BY THE HEALTH CARE FACILITY.

5 (3) THE PATIENT’S ATTENDING PHYSICIAN MAY NOT BE A WITNESS.

6 (c) A WRITTEN REQUEST UNDER THIS SECTION SHALL BE IN
7 SUBSTANTIALLY THE FOLLOWING FORM:

8 MARYLAND REQUEST FOR MEDICATION FOR AID IN DYING

9 BY: _____ DATE OF BIRTH: _____
10 (PRINT NAME) (MONTH/DAY/YEAR)

11 I, _____, AM AN ADULT OF SOUND MIND.
12 I AM A RESIDENT OF THE STATE OF MARYLAND.
13 I AM SUFFERING FROM _____, WHICH MY ATTENDING
14 PHYSICIAN HAS DETERMINED WILL, MORE LIKELY THAN NOT, RESULT IN DEATH
15 WITHIN 6 MONTHS. I HAVE BEEN FULLY INFORMED OF MY DIAGNOSIS, MY
16 PROGNOSIS, THE NATURE OF MEDICATION TO BE PRESCRIBED TO AID ME IN DYING,
17 THE POTENTIAL ASSOCIATED RISKS, THE EXPECTED RESULT, THE FEASIBLE
18 ALTERNATIVES, AND THE ADDITIONAL HEALTH CARE TREATMENT OPTIONS,
19 INCLUDING PALLIATIVE CARE AND HOSPICE.
20 I HAVE ORALLY REQUESTED THAT MY ATTENDING PHYSICIAN PRESCRIBE
21 MEDICATION THAT I MAY SELF-ADMINISTER FOR AID IN DYING, AND I NOW CONFIRM
22 THIS REQUEST. I AUTHORIZE MY ATTENDING PHYSICIAN TO CONTACT A
23 PHARMACIST TO FILL THE PRESCRIPTION FOR THE MEDICATION, ON MY REQUEST.

24 INITIAL ONE:
25 _____ I HAVE INFORMED MY FAMILY OF MY DECISION AND TAKEN THEIR OPINIONS
26 INTO CONSIDERATION.
27 _____ I HAVE DECIDED NOT TO INFORM MY FAMILY OF MY DECISION.
28 _____ I HAVE NO FAMILY TO INFORM OF MY DECISION.

29 I UNDERSTAND THAT I HAVE THE RIGHT TO RESCIND THIS REQUEST AT ANY TIME.
30 I UNDERSTAND THE FULL IMPORT OF THIS REQUEST AND I EXPECT TO DIE IF AND
31 WHEN I TAKE THE MEDICATION TO BE PRESCRIBED. I FURTHER UNDERSTAND THAT,
32 ALTHOUGH MOST DEATHS OCCUR WITHIN 3 HOURS, MY DEATH MAY TAKE LONGER,
33 AND MY ATTENDING PHYSICIAN HAS COUNSELED ME ABOUT THIS POSSIBILITY.
34 I MAKE THIS REQUEST VOLUNTARILY AND WITHOUT RESERVATION, AND I ACCEPT
35 FULL RESPONSIBILITY FOR MY DECISION TO REQUEST AID IN DYING.

1 **SIGNED:** _____ **DATED:** _____

2 **DECLARATION OF WITNESSES**

3 **I UNDERSTAND THAT, UNDER MARYLAND LAW, A WITNESS TO A REQUEST FOR**
 4 **MEDICATION FOR AID IN DYING MAY NOT BE THE PATIENT'S ATTENDING PHYSICIAN.**
 5 **FURTHER, ONLY ONE OF THE WITNESSES MAY BE:**

6 1. **A RELATIVE OF THE PATIENT BY BLOOD, MARRIAGE, OR ADOPTION;**

7 2. **AT THE TIME THE WRITTEN REQUEST IS SIGNED BY THE PATIENT,**
 8 **ENTITLED TO ANY BENEFIT ON THE PATIENT'S DEATH; OR**

9 3. **AN OWNER, OPERATOR, OR EMPLOYEE OF A HEALTH CARE FACILITY IN**
 10 **WHICH THE PATIENT IS RECEIVING MEDICAL TREATMENT OR IS A RESIDENT.**

11 **BY SIGNING BELOW ON THE DATE THE PERSON NAMED ABOVE SIGNS, I DECLARE**
 12 **THAT:**

13 **(CHECK ONE)**

14 _____ **I AM:**

15 _____ **I AM NOT:**

16 1. **A RELATIVE OF THE PATIENT BY BLOOD, MARRIAGE, OR ADOPTION;**

17 2. **AT THE TIME THE REQUEST IS SIGNED, ENTITLED TO ANY BENEFIT ON**
 18 **THE PATIENT'S DEATH; OR**

19 3. **AN OWNER, OPERATOR, OR EMPLOYEE OF A HEALTH CARE FACILITY AT**
 20 **WHICH THE PATIENT IS RECEIVING MEDICAL TREATMENT OR IS A RESIDENT; AND**

21 **THE PERSON MAKING AND SIGNING THE ABOVE REQUEST:**

22 1. **IS PERSONALLY KNOWN TO ME OR HAS PROVIDED PROOF OF IDENTITY;**

23 2. **SIGNED THIS REQUEST IN MY PRESENCE ON THE DATE OF THE PERSON'S**
 24 **SIGNATURE;**

25 3. **APPEARS TO BE OF SOUND MIND AND NOT UNDER DURESS, FRAUD, OR**
 26 **UNDUE INFLUENCE; AND**

4. IS NOT A PATIENT FOR WHOM I AM THE ATTENDING PHYSICIAN.

PRINTED NAME OF WITNESS 1 _____

SIGNATURE OF WITNESS 1 _____ DATE _____

PRINTED NAME OF WITNESS 2 _____

SIGNATURE OF WITNESS 2 _____ DATE _____

5-6A-04.

(A) (1) WHEN AN ATTENDING PHYSICIAN IS PRESENTED WITH A PATIENT'S WRITTEN REQUEST, THE ATTENDING PHYSICIAN SHALL DETERMINE WHETHER THE PATIENT:

(I) IS A QUALIFIED PATIENT;

(II) HAS MADE AN INFORMED DECISION; AND

(III) HAS VOLUNTARILY REQUESTED AID IN DYING.

(2) A PATIENT IS NOT A QUALIFIED PATIENT SOLELY DUE TO AGE, DISABILITY, OR A SPECIFIC ILLNESS.

(B) FOR PURPOSES OF DETERMINING THAT A PATIENT IS A QUALIFIED PATIENT, AN ATTENDING PHYSICIAN SHALL ACCEPT AS PROOF OF THE PATIENT'S RESIDENCY IN THE STATE:

(1) POSSESSION OF A VALID MARYLAND DRIVER'S LICENSE OR IDENTIFICATION CARD ISSUED BY THE MOTOR VEHICLE ADMINISTRATION;

(2) REGISTRATION TO VOTE IN THE STATE;

(3) EVIDENCE OF OWNING OR LEASING PROPERTY IN THE STATE;

(4) A COPY OF A MARYLAND RESIDENT TAX RETURN FOR THE MOST RECENT TAX YEAR; OR

(5) BASED ON THE PATIENT'S TREATMENT HISTORY AND MEDICAL RECORDS, THE ATTENDING PHYSICIAN'S PERSONAL KNOWLEDGE OF THE PATIENT'S RESIDENCY IN THE STATE.

(C) AN ATTENDING PHYSICIAN SHALL ENSURE A PATIENT MAKES AN INFORMED DECISION BY INFORMING THE PATIENT OF:

- 1 **(1) THE PATIENT'S MEDICAL DIAGNOSIS;**
- 2 **(2) THE PATIENT'S PROGNOSIS;**
- 3 **(3) THE POTENTIAL RISKS ASSOCIATED WITH SELF-ADMINISTERING**
4 **THE MEDICATION TO BE PRESCRIBED FOR AID IN DYING;**
- 5 **(4) THE PROBABLE RESULT OF SELF-ADMINISTERING THE**
6 **MEDICATION TO BE PRESCRIBED FOR AID IN DYING; AND**
- 7 **(5) ANY FEASIBLE ALTERNATIVES AND HEALTH CARE TREATMENT**
8 **OPTIONS, INCLUDING PALLIATIVE CARE AND HOSPICE.**

9 **(D) SUBJECT TO § 5-6A-06 OF THIS SUBTITLE, IF THE ATTENDING**
10 **PHYSICIAN DETERMINES THAT A PATIENT IS A QUALIFIED PATIENT, HAS MADE AN**
11 **INFORMED DECISION, AND HAS VOLUNTARILY REQUESTED AID IN DYING, THE**
12 **ATTENDING PHYSICIAN SHALL REFER THE PATIENT TO A CONSULTING PHYSICIAN**
13 **TO CARRY OUT THE DUTIES REQUIRED UNDER § 5-6A-05 OF THIS SUBTITLE.**

14 **5-6A-05.**

15 **A CONSULTING PHYSICIAN TO WHOM A PATIENT HAS BEEN REFERRED UNDER**
16 **§ 5-6A-04(D) OF THIS SUBTITLE SHALL:**

- 17 **(1) EXAMINE THE PATIENT AND THE PATIENT'S RELEVANT MEDICAL**
18 **RECORDS;**
- 19 **(2) CONFIRM THE ATTENDING PHYSICIAN'S DIAGNOSIS THAT THE**
20 **PATIENT HAS A TERMINAL ILLNESS;**
- 21 **(3) IF REQUIRED UNDER § 5-6A-06 OF THIS SUBTITLE, REFER THE**
22 **PATIENT FOR A COMPETENCY EVALUATION;**
- 23 **(4) VERIFY THAT THE PATIENT IS A QUALIFIED PATIENT, HAS MADE**
24 **AN INFORMED DECISION, AND HAS VOLUNTARILY REQUESTED AID IN DYING; AND**
- 25 **(5) DOCUMENT THE FULFILLMENT OF THE CONSULTING PHYSICIAN'S**
26 **DUTIES UNDER THIS SECTION IN WRITING.**

27 **5-6A-06.**

1 **(A) IF, IN THE MEDICAL OPINION OF THE ATTENDING PHYSICIAN OR THE**
2 **CONSULTING PHYSICIAN, A PATIENT MAY BE SUFFERING FROM A CONDITION THAT**
3 **IS CAUSING IMPAIRED JUDGMENT OR IS OTHERWISE NOT COMPETENT, THE**
4 **ATTENDING PHYSICIAN OR THE CONSULTING PHYSICIAN SHALL REFER THE**
5 **PATIENT TO A LICENSED MENTAL HEALTH PROFESSIONAL FOR A COMPETENCY**
6 **EVALUATION.**

7 **(B) AN ATTENDING PHYSICIAN MAY NOT PROVIDE THE PATIENT**
8 **MEDICATION FOR AID IN DYING UNTIL THE LICENSED MENTAL HEALTH**
9 **PROFESSIONAL PROVIDING THE COMPETENCY EVALUATION:**

10 **(1) DETERMINES THAT THE PATIENT IS COMPETENT AND IS NOT**
11 **SUFFERING FROM A CONDITION THAT IS CAUSING IMPAIRED JUDGMENT; AND**

12 **(2) COMMUNICATES THIS DETERMINATION TO THE ATTENDING**
13 **PHYSICIAN AND THE CONSULTING PHYSICIAN IN WRITING.**

14 **5-6A-07.**

15 **(A) AFTER THE ATTENDING PHYSICIAN AND THE CONSULTING PHYSICIAN**
16 **HAVE FULFILLED THE REQUIREMENTS IN §§ 5-6A-04 AND 5-6A-05 OF THIS**
17 **SUBTITLE, AND AFTER THE QUALIFIED PATIENT SUBMITS A SECOND ORAL REQUEST**
18 **FOR AID IN DYING, AS REQUIRED IN § 5-6A-02 OF THIS SUBTITLE, THE ATTENDING**
19 **PHYSICIAN SHALL:**

20 **(1) INFORM THE QUALIFIED PATIENT THAT IT IS THE DECISION OF**
21 **THE QUALIFIED PATIENT AS TO WHETHER AND WHEN TO SELF-ADMINISTER THE**
22 **MEDICATION PRESCRIBED FOR AID IN DYING;**

23 **(2) (I) INFORM THE QUALIFIED PATIENT THAT THE QUALIFIED**
24 **PATIENT MAY WISH TO NOTIFY NEXT OF KIN OF THE REQUEST FOR AID IN DYING;**
25 **AND**

26 **(II) INFORM THE QUALIFIED PATIENT THAT A FAILURE TO**
27 **NOTIFY NEXT OF KIN IS NOT A BASIS FOR DENIAL OF THE REQUEST FOR AID IN**
28 **DYING;**

29 **(3) COUNSEL THE QUALIFIED PATIENT CONCERNING THE**
30 **IMPORTANCE OF:**

31 **(I) HAVING ANOTHER INDIVIDUAL PRESENT WHEN THE**
32 **QUALIFIED PATIENT SELF-ADMINISTERS THE MEDICATION PRESCRIBED FOR AID IN**
33 **DYING; AND**

1 (II) NOT TAKING THE MEDICATION IN A PUBLIC PLACE;

2 (4) INFORM THE QUALIFIED PATIENT THAT THE QUALIFIED PATIENT
3 MAY RESCIND THE REQUEST FOR AID IN DYING AT ANY TIME AND IN ANY MANNER;

4 (5) VERIFY, IMMEDIATELY BEFORE WRITING THE PRESCRIPTION FOR
5 MEDICATION FOR AID IN DYING, THAT THE QUALIFIED PATIENT IS MAKING AN
6 INFORMED DECISION;

7 (6) FULFILL THE DOCUMENTATION REQUIREMENTS ESTABLISHED
8 UNDER § 5-6A-08 OF THIS SUBTITLE; AND

9 (7) (I) IF THE ATTENDING PHYSICIAN HOLDS A DISPENSING
10 PERMIT FROM THE STATE BOARD OF PHYSICIANS AND WISHES TO DISPENSE THE
11 MEDICATION, DISPENSE TO THE PATIENT:

12 1. THE PRESCRIBED MEDICATION FOR AID IN DYING;
13 AND

14 2. ANY ANCILLARY MEDICATIONS NEEDED TO MINIMIZE
15 THE PATIENT'S DISCOMFORT; OR

16 (II) IF THE ATTENDING PHYSICIAN DOES NOT HOLD A
17 DISPENSING PERMIT, OR DOES NOT WISH TO DISPENSE THE MEDICATION FOR AID IN
18 DYING, AND THE PATIENT REQUESTS AND PROVIDES WRITTEN CONSENT FOR THE
19 MEDICATION FOR AID IN DYING TO BE DISPENSED BY A PHARMACIST:

20 1. CONTACT A PHARMACIST;

21 2. INFORM THE PHARMACIST OF THE PRESCRIPTION
22 FOR MEDICATION FOR AID IN DYING; AND

23 3. SUBMIT THE PRESCRIPTION FOR MEDICATION FOR
24 AID IN DYING TO THE PHARMACIST BY ANY MEANS AUTHORIZED BY LAW.

25 (B) A PHARMACIST WHO HAS BEEN CONTACTED AND INFORMED BY AN
26 ATTENDING PHYSICIAN AND TO WHOM AN ATTENDING PHYSICIAN HAS SUBMITTED A
27 PRESCRIPTION FOR MEDICATION FOR AID IN DYING IN ACCORDANCE WITH THE
28 REQUIREMENTS OF SUBSECTION (A) OF THIS SECTION, SHALL DISPENSE THE
29 MEDICATION FOR AID IN DYING AND ANY ANCILLARY MEDICATION TO THE
30 QUALIFIED PATIENT, THE ATTENDING PHYSICIAN, OR AN EXPRESSLY-IDENTIFIED
31 AGENT OF THE QUALIFIED PATIENT.

1 **(C) IF THE QUALIFIED PATIENT SELF-ADMINISTERS MEDICATION FOR AID**
2 **IN DYING AND DIES:**

3 **(1) THE ATTENDING PHYSICIAN MAY SIGN THE QUALIFIED PATIENT'S**
4 **DEATH CERTIFICATE; AND**

5 **(2) THE QUALIFIED PATIENT'S DEATH CERTIFICATE SHALL LIST THE**
6 **UNDERLYING TERMINAL ILLNESS AS THE CAUSE OF DEATH.**

7 **5-6A-08.**

8 **WITH RESPECT TO A REQUEST BY A QUALIFIED PATIENT FOR AID IN DYING,**
9 **THE ATTENDING PHYSICIAN SHALL ENSURE THAT THE MEDICAL RECORD OF THE**
10 **QUALIFIED PATIENT DOCUMENTS OR CONTAINS:**

11 **(1) THE BASIS FOR DETERMINING THAT THE QUALIFIED PATIENT IS**
12 **AN ADULT AND A RESIDENT OF THE STATE;**

13 **(2) ALL ORAL AND WRITTEN REQUESTS BY THE QUALIFIED PATIENT**
14 **FOR MEDICATION FOR AID IN DYING;**

15 **(3) THE ATTENDING PHYSICIAN'S:**

16 **(I) DIAGNOSIS OF THE QUALIFIED PATIENT'S TERMINAL**
17 **ILLNESS AND PROGNOSIS; AND**

18 **(II) DETERMINATION THAT THE QUALIFIED PATIENT IS**
19 **COMPETENT, HAS MADE AN INFORMED DECISION, AND HAS VOLUNTARILY**
20 **REQUESTED AID IN DYING;**

21 **(4) DOCUMENTATION THAT THE CONSULTING PHYSICIAN HAS**
22 **FULFILLED THE PHYSICIAN'S DUTIES UNDER § 5-6A-05 OF THIS SUBTITLE;**

23 **(5) A REPORT OF THE OUTCOME OF AND DETERMINATIONS MADE**
24 **DURING THE COMPETENCY EVALUATION, IF:**

25 **(I) THE QUALIFIED PATIENT WAS REFERRED FOR A**
26 **COMPETENCY EVALUATION IN ACCORDANCE WITH § 5-6A-06 OF THIS SUBTITLE;**
27 **AND**

28 **(II) THE COMPETENCY EVALUATION WAS PROVIDED;**

1 **(6) DOCUMENTATION OF THE ATTENDING PHYSICIAN'S OFFER TO**
2 **THE QUALIFIED PATIENT TO RESCIND THE QUALIFIED PATIENT'S REQUEST FOR**
3 **MEDICATION FOR AID IN DYING AT THE TIME THE ATTENDING PHYSICIAN WROTE**
4 **THE PRESCRIPTION FOR THE MEDICATION FOR THE QUALIFIED PATIENT; AND**

5 **(7) A STATEMENT BY THE ATTENDING PHYSICIAN:**

6 **(I) INDICATING THAT ALL REQUIREMENTS FOR AID IN DYING**
7 **UNDER THIS SUBTITLE HAVE BEEN MET; AND**

8 **(II) SPECIFYING THE STEPS TAKEN TO CARRY OUT THE**
9 **QUALIFIED PATIENT'S REQUEST FOR AID IN DYING, INCLUDING THE MEDICATION**
10 **PRESCRIBED FOR AID IN DYING.**

11 **5-6A-09.**

12 **RECORDS OR INFORMATION COLLECTED OR MAINTAINED UNDER THIS**
13 **SUBTITLE ARE NOT SUBJECT TO SUBPOENA OR DISCOVERY AND MAY NOT BE**
14 **INTRODUCED INTO EVIDENCE IN ANY JUDICIAL OR ADMINISTRATIVE PROCEEDING,**
15 **EXCEPT TO RESOLVE MATTERS CONCERNING COMPLIANCE WITH THIS SUBTITLE OR**
16 **AS OTHERWISE SPECIFICALLY PROVIDED BY LAW.**

17 **5-6A-10.**

18 **AN INDIVIDUAL WHO, AFTER A PATIENT'S DEATH, IS IN POSSESSION OF**
19 **MEDICATION PRESCRIBED FOR AID IN DYING THAT HAS NOT BEEN**
20 **SELF-ADMINISTERED SHALL DISPOSE OF THE MEDICATION IN A LAWFUL MANNER.**

21 **5-6A-11.**

22 **(A) FOR ALL LEGAL RIGHTS AND OBLIGATIONS AND OTHER PURPOSES**
23 **GOVERNED BY THE LAWS OF THE STATE, WHETHER CONTRACTUAL, CIVIL,**
24 **CRIMINAL, OR OTHERWISE, THE DEATH OF A PATIENT BY REASON OF**
25 **SELF-ADMINISTRATION OF MEDICATION PRESCRIBED UNDER THIS SUBTITLE SHALL**
26 **BE DEEMED TO BE A DEATH FROM NATURAL CAUSES, SPECIFICALLY AS A RESULT OF**
27 **THE TERMINAL ILLNESS FROM WHICH THE PATIENT SUFFERED.**

28 **(B) A PROVISION IN A CONTRACT OR OTHER LEGAL INSTRUMENT THAT IS**
29 **CONTRARY TO SUBSECTION (A) OF THIS SECTION IS VOID.**

30 **(C) SUBSECTION (A) OF THIS SECTION MAY NOT BE CONSTRUED TO**
31 **PROHIBIT THE PROSECUTION OF A PERSON FOR MURDER OR ATTEMPTED MURDER**
32 **IF THE PERSON, WITH THE INTENT OR EFFECT OF CAUSING THE PATIENT'S DEATH:**

1 (1) WILLFULLY ALTERS OR FORGES A REQUEST FOR AID IN DYING;

2 (2) CONCEALS OR DESTROYS A RESCISSION OF A REQUEST FOR AID IN
3 DYING;

4 (3) COERCES OR EXERTS UNDUE INFLUENCE ON A PATIENT TO
5 COMPLETE A REQUEST FOR AID IN DYING; OR

6 (4) COERCES OR EXERTS UNDUE INFLUENCE ON A PATIENT TO
7 DESTROY A RESCISSION OF A REQUEST FOR AID IN DYING.

8 (D) (1) THIS SUBTITLE DOES NOT AUTHORIZE A PHYSICIAN OR ANY
9 OTHER PERSON TO END A PATIENT'S LIFE BY LETHAL INJECTION, MERCY KILLING,
10 OR ACTIVE EUTHANASIA.

11 (2) ACTIONS TAKEN IN ACCORDANCE WITH THIS SUBTITLE DO NOT,
12 FOR ANY PURPOSE, CONSTITUTE SUICIDE, ASSISTED SUICIDE, MERCY KILLING, OR
13 HOMICIDE.

14 5-6A-12.

15 (A) A PROVISION IN AN INSURANCE POLICY, AN ANNUITY, A CONTRACT, OR
16 ANY OTHER AGREEMENT, ISSUED OR MADE ON OR AFTER OCTOBER 1, 2015, IS NOT
17 VALID TO THE EXTENT THAT THE PROVISION WOULD ATTACH CONSEQUENCES TO OR
18 OTHERWISE RESTRICT OR INFLUENCE AN INDIVIDUAL'S DECISION TO MAKE OR
19 RESCIND A REQUEST FOR AID IN DYING UNDER THIS SUBTITLE.

20 (B) AN OBLIGATION UNDER A CONTRACT EXISTING ON OCTOBER 1, 2015,
21 MAY NOT BE CONDITIONED ON OR AFFECTED BY THE MAKING OR RESCINDING OF A
22 REQUEST FOR AID IN DYING UNDER THIS SUBTITLE.

23 (C) THE SALE, PROCUREMENT, OR ISSUANCE OF A LIFE, A HEALTH, OR AN
24 ACCIDENT INSURANCE OR ANNUITY POLICY OR THE RATE CHARGED FOR A LIFE, A
25 HEALTH, OR AN ACCIDENT INSURANCE OR ANNUITY POLICY MAY NOT BE
26 CONDITIONED ON OR AFFECTED BY THE MAKING OR RESCINDING OF A REQUEST FOR
27 AID IN DYING UNDER THIS SUBTITLE.

28 (D) A QUALIFIED PATIENT'S ACT OF SELF-ADMINISTERING MEDICATION
29 FOR AID IN DYING MAY NOT HAVE AN EFFECT UNDER A LIFE, A HEALTH, OR AN
30 ACCIDENT INSURANCE OR ANNUITY POLICY THAT DIFFERS FROM THE EFFECT
31 UNDER THE POLICY OF THE PATIENT'S DEATH FROM NATURAL CAUSES.

1 **5-6A-13.**

2 (A) EXCEPT AS PROVIDED IN § 5-6A-14(C) OF THIS SUBTITLE:

3 (1) A PERSON MAY NOT BE SUBJECT TO CIVIL OR CRIMINAL LIABILITY
4 OR PROFESSIONAL DISCIPLINARY ACTION FOR PARTICIPATING IN GOOD FAITH
5 COMPLIANCE WITH THIS SUBTITLE, INCLUDING BEING PRESENT WHEN A QUALIFIED
6 PATIENT SELF-ADMINISTERS MEDICATION PRESCRIBED FOR AID IN DYING; AND

7 (2) A PROFESSIONAL ORGANIZATION OR ASSOCIATION, A HEALTH
8 CARE PROVIDER, OR A HEALTH OCCUPATION BOARD MAY NOT SUBJECT A PERSON
9 TO CENSURE, DISCIPLINE, SUSPENSION, LOSS OF LICENSE, LOSS OF PRIVILEGES,
10 LOSS OF MEMBERSHIP, OR OTHER PENALTY FOR PARTICIPATING OR REFUSING TO
11 PARTICIPATE IN GOOD FAITH COMPLIANCE WITH THIS SUBTITLE.

12 (B) A PATIENT'S REQUEST FOR AID IN DYING OR AN ATTENDING
13 PHYSICIAN'S PRESCRIPTION OF MEDICATION MADE IN GOOD FAITH COMPLIANCE
14 WITH THIS SUBTITLE DOES NOT:

15 (1) CONSTITUTE NEGLIGENCE FOR ANY PURPOSE OF LAW; OR

16 (2) PROVIDE THE SOLE BASIS FOR THE APPOINTMENT OF A
17 GUARDIAN OR CONSERVATOR.

18 **5-6A-14.**

19 (A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS
20 INDICATED.

21 (2) "NOTIFY" MEANS PROVIDE A SEPARATE STATEMENT IN WRITING
22 TO A HEALTH CARE PROVIDER SPECIFICALLY INFORMING THE HEALTH CARE
23 PROVIDER, BEFORE THE HEALTH CARE PROVIDER'S PARTICIPATION IN AID IN
24 DYING, OF A HEALTH CARE PROVIDER'S POLICY ABOUT PARTICIPATION IN AID IN
25 DYING.

26 (3) (I) "PARTICIPATE IN AID IN DYING" MEANS PERFORM THE
27 DUTIES OF AN ATTENDING PHYSICIAN, A CONSULTING PHYSICIAN, OR A LICENSED
28 MENTAL HEALTH PROFESSIONAL UNDER THIS SUBTITLE.

29 (II) "PARTICIPATE IN AID IN DYING" DOES NOT INCLUDE:

1 **1. MAKING AN INITIAL DETERMINATION THAT A**
2 **PATIENT HAS A TERMINAL DISEASE AND INFORMING THE PATIENT OF THE MEDICAL**
3 **PROGNOSIS;**

4 **2. PROVIDING INFORMATION ABOUT THIS SUBTITLE TO**
5 **A PATIENT, ON THE REQUEST OF THE PATIENT; OR**

6 **3. PROVIDING A PATIENT, ON REQUEST OF THE**
7 **PATIENT, WITH A REFERRAL TO ANOTHER PHYSICIAN.**

8 **(B) (1) A HEALTH CARE PROVIDER MAY PROHIBIT ANOTHER HEALTH**
9 **CARE PROVIDER FROM PARTICIPATING IN AID IN DYING UNDER THIS SUBTITLE ON**
10 **THE PREMISES OF THE PROHIBITING HEALTH CARE PROVIDER, IF THE PROHIBITING**
11 **HEALTH CARE PROVIDER HAS NOTIFIED ALL HEALTH CARE PROVIDERS WITH**
12 **PRIVILEGES TO PRACTICE ON THE PREMISES OF THE PROHIBITING HEALTH CARE**
13 **PROVIDER'S POLICY REGARDING PARTICIPATING IN AID IN DYING.**

14 **(2) THIS SUBSECTION DOES NOT PROHIBIT A HEALTH CARE**
15 **PROVIDER FROM PROVIDING HEALTH CARE SERVICES TO A PATIENT THAT DO NOT**
16 **CONSTITUTE PARTICIPATING IN AID IN DYING UNDER THIS SUBTITLE.**

17 **(C) A HEALTH CARE PROVIDER MAY SUBJECT ANOTHER HEALTH CARE**
18 **PROVIDER TO THE FOLLOWING SANCTIONS IF THE SANCTIONING HEALTH CARE**
19 **PROVIDER HAS NOTIFIED THE SANCTIONED HEALTH CARE PROVIDER, BEFORE THE**
20 **SANCTIONED HEALTH CARE PROVIDER PARTICIPATES IN AID IN DYING, THAT THE**
21 **SANCTIONING HEALTH CARE PROVIDER PROHIBITS PARTICIPATION IN AID IN**
22 **DYING:**

23 **(1) LOSS OF PRIVILEGES, LOSS OF MEMBERSHIP, OR OTHER**
24 **SANCTIONS PROVIDED UNDER THE MEDICAL STAFF BYLAWS, POLICIES, AND**
25 **PROCEDURES OF THE SANCTIONING HEALTH CARE PROVIDER IF THE SANCTIONED**
26 **HEALTH CARE PROVIDER IS A MEMBER OF THE SANCTIONING HEALTH CARE**
27 **PROVIDER'S MEDICAL STAFF AND PARTICIPATES IN AID IN DYING WHILE ON THE**
28 **HEALTH CARE FACILITY PREMISES OF THE SANCTIONING HEALTH CARE PROVIDER;**

29 **(2) TERMINATION OF A LEASE OR OTHER PROPERTY CONTRACT OR**
30 **OTHER NONMONETARY REMEDIES PROVIDED BY A LEASE CONTRACT, NOT**
31 **INCLUDING LOSS OR RESTRICTION OF MEDICAL STAFF PRIVILEGES OR EXCLUSION**
32 **FROM A PROVIDER PANEL IF THE SANCTIONED HEALTH CARE PROVIDER**
33 **PARTICIPATES IN AID IN DYING WHILE ON THE PREMISES OF THE SANCTIONING**
34 **HEALTH CARE PROVIDER OR ON PROPERTY THAT IS OWNED BY OR UNDER THE**
35 **DIRECT CONTROL OF THE SANCTIONING HEALTH CARE PROVIDER; OR**

1 **(3) TERMINATION OF A CONTRACT OR OTHER NONMONETARY**
2 **REMEDIES PROVIDED BY CONTRACT IF THE SANCTIONED HEALTH CARE PROVIDER**
3 **PARTICIPATES IN AID IN DYING WHILE ACTING IN THE COURSE AND SCOPE OF THE**
4 **SANCTIONED HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR**
5 **INDEPENDENT CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER.**

6 **(D) SUBSECTION (B) OF THIS SECTION DOES NOT PROHIBIT:**

7 **(1) A HEALTH CARE PROVIDER FROM PARTICIPATING IN AID IN**
8 **DYING:**

9 **(I) WHILE ACTING OUTSIDE THE COURSE AND SCOPE OF THE**
10 **HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR INDEPENDENT**
11 **CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER; OR**

12 **(II) OFF THE PREMISES OF THE SANCTIONING HEALTH CARE**
13 **PROVIDER OR OFF OF ANY PROPERTY THAT IS OWNED BY OR UNDER THE DIRECT**
14 **CONTROL OF THE SANCTIONING HEALTH CARE PROVIDER; OR**

15 **(2) A PATIENT FROM CONTRACTING WITH THE PATIENT'S ATTENDING**
16 **PHYSICIAN OR CONSULTING PHYSICIAN TO ACT OUTSIDE THE COURSE AND SCOPE**
17 **OF THE HEALTH CARE PROVIDER'S CAPACITY AS AN EMPLOYEE OR INDEPENDENT**
18 **CONTRACTOR OF THE SANCTIONING HEALTH CARE PROVIDER.**

19 **5-6A-15.**

20 **(A) (1) PARTICIPATION BY A HEALTH CARE PROVIDER IN AID IN DYING**
21 **UNDER THIS SUBTITLE IS VOLUNTARY; AND**

22 **(2) A HEALTH CARE FACILITY MAY NOT REQUIRE THE PHYSICIANS ON**
23 **THE MEDICAL STAFF OF THE FACILITY TO PARTICIPATE IN AID IN DYING.**

24 **(B) IF A PATIENT REQUESTS OR INDICATES AN INTEREST IN AID IN DYING,**
25 **AND THE ATTENDING PHYSICIAN OF THE PATIENT DOES NOT WISH TO PARTICIPATE**
26 **IN AID IN DYING, THE ATTENDING PHYSICIAN SHALL INFORM THE PATIENT THAT**
27 **THE ATTENDING PHYSICIAN DOES NOT WISH TO PARTICIPATE.**

28 **(C) ON REQUEST, AN ATTENDING PHYSICIAN EXPEDITIOUSLY SHALL**
29 **TRANSFER A COPY OF A PATIENT'S RELEVANT MEDICAL RECORDS TO ANOTHER**
30 **ATTENDING PHYSICIAN, IF:**

31 **(1) THE PATIENT REQUESTS OR INDICATES AN INTEREST IN AID IN**
32 **DYING;**

1 **(2) THE ORIGINAL ATTENDING PHYSICIAN IS UNABLE OR UNWILLING**
2 **TO PARTICIPATE IN AID IN DYING FOR THE PATIENT; AND**

3 **(3) THE PATIENT TRANSFERS THE PATIENT'S CARE TO ANOTHER**
4 **ATTENDING PHYSICIAN.**

5 **(D) A HEALTH CARE FACILITY MAY ADOPT WRITTEN POLICIES PROHIBITING**
6 **A PHYSICIAN ASSOCIATED WITH THE HEALTH CARE FACILITY FROM PARTICIPATING**
7 **IN AID IN DYING, IN ACCORDANCE WITH THIS SUBTITLE.**

8 **5-6A-16.**

9 **(A) A PERSON WHO WILLFULLY ALTERS OR FORGES A WRITTEN REQUEST**
10 **MADE UNDER §§ 5-6A-02 AND 5-6A-03 OF THIS SUBTITLE OR CONCEALS OR**
11 **DESTROYS A RESCISSION OF A WRITTEN REQUEST WITHOUT THE AUTHORIZATION**
12 **OF THE PATIENT AND WITH THE INTENT OR EFFECT OF CAUSING THE PATIENT'S**
13 **DEATH IS GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT TO IMPRISONMENT**
14 **NOT EXCEEDING 10 YEARS OR A FINE NOT EXCEEDING \$10,000 OR BOTH.**

15 **(B) A PERSON WHO COERCES OR EXERTS UNDUE INFLUENCE ON A PATIENT**
16 **TO MAKE A WRITTEN REQUEST UNDER §§ 5-6A-02 AND 5-6A-03 OF THIS SUBTITLE**
17 **FOR THE PURPOSE OF ENDING THE PATIENT'S LIFE OR TO DESTROY A RESCISSION**
18 **OF A WRITTEN REQUEST IS GUILTY OF A FELONY AND ON CONVICTION IS SUBJECT**
19 **TO IMPRISONMENT NOT EXCEEDING 10 YEARS OR A FINE NOT EXCEEDING \$10,000**
20 **OR BOTH.**

21 **(C) THIS SUBTITLE DOES NOT LIMIT ANY LIABILITY FOR CIVIL DAMAGES**
22 **RESULTING FROM ANY OTHER NEGLIGENT CONDUCT OR INTENTIONAL MISCONDUCT**
23 **BY ANY PERSON.**

24 **(D) THE PENALTIES PROVIDED IN THIS SECTION DO NOT PRECLUDE**
25 **CRIMINAL PENALTIES APPLICABLE UNDER ANY OTHER LAW FOR CONDUCT THAT IS**
26 **INCONSISTENT WITH THE PROVISIONS OF THIS SUBTITLE.**

27 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
28 October 1, 2015.