MAINE STATE LEGISLATURE

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	FIRST REGULAR SESSION
	ONE HUNDRED AND TWELFTH LEGISLATURE
Legislative	Document No. 66
H.P. 458	House of Representatives, February 21, 198
Referre ordered pri	ed to the Committee on Judiciary. Sent up for concurrence and inted.
	EDWIN H. PERT, Cler
Cospo	y Representative Murray of Bangor. sored by Representative Mitchell of Freeport, Senator Gill of and Representative Smith of Island Falls.
	STATE OF MAINE
	IN THE YEAR OF OUR LORD
	NINETEEN HUNDRED AND EIGHTY-FIVE
	AN ACT to Establish a Living Will.
Be it er follows:	acted by the People of the State of Maine as
22 1	RSA c. 710-A is enacted to read:
	CHAPTER 710-A
	LIVING WILL ACT
§2921.	Legislative intent
<u>It</u>	is the intent of the Legislature that adult
	of this State have the fundamental right to
control	decisions regarding administration of
inctruct	taining treatment by executing a declaration ing his physician to withhold or withdraw
	taining procedures in the event the person is
	minal condition and is unable to participate
	al treatment decisions

§2922. Definitions

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As used in this chapter, unless the context otherwise indicates, the following terms have the following meanings.

- 1. Attending physician. "Attending physician" means the physician selected by or assigned to the patient who has primary responsibility for the treatment and care of the patient.
- 9 2. Declaration. "Declaration" means a document 10 executed in accordance with the requirements of sec-11 tion 2923.
 - 3. Health care provider. "Health care provider" means a person who is licensed, certified or otherwise authorized by the law of this State to administer health care in the ordinary course of business or practice of a profession.
- 17 4. Life-sustaining procedure. "Life-sustaining 18 procedure" means any medical procedure or intervention that, when administered to a qualified patient, 20 will serve only to prolong the dying process and 21 shall not include food and hydration.
- 22 <u>5. Physician. "Physician" means a person li-</u> 23 censed to practice medicine in this State.
- 6. Qualified patient. "Qualified patient" means a patient who has executed a declaration in accordance with this Act and who has been determined by the attending physician to be in a terminal condition.
- 7. Terminal condition. "Terminal condition"
 means an incurable or irreversible condition that,
 without the administration of life-sustaining procedures, will, in the opinion of the attending physician, result in death within a short time.
- 33 §2923. Declaration relating to use of 34 life-sustaining procedures
- 1. Declaration; execution. Any competent adult may execute a declaration at any time directing that life-sustaining procedures be withheld or withdrawn,

1 2 3 4 5 6 7 8 9	provided that the declaration is to be given operative effect only if the declarant's condition is determined to be terminal and the declaration is not able to make treatment decisions. The declaration must be signed by the declarant or another at the declarant's direction, in the presence of 2 witnesses. A physician or health care provider may presume, in the absence of actual notice to the contrary, that the declaration complies with this Act and is valid.
11 12 13 14 15	2. Notice to physician. It is the responsibility of the declarant to notify his physician of the declaration. A physician or other health care provider who is provided a copy of the declaration shall make it a part of the declarant's medical records.
17 18 19	3. Suggested form. A declaration may, but need not, be in the following form: DECLARATION
20 21 22 23 24 25 26 27 28	If I should have an incurable or irreversible condition that will cause my death within a short time, it is my desire that my life not be prolonged by administration of life-sustaining procedures. If my condition is terminal and I am unable to participate in decisions regarding my medical treatment, I direct my attending physician to withhold or withdraw procedures that merely prolong the dying process and are not necessary to my comfort or freedom from pain.
30	Signed this day of month year
31	Signature
32	City, County and
33 34	State of Residence city county state
35 36	The declarant is known to me and voluntarily signed this document in my presence.
37	Witness

1 2	Address
3 4 5	Witness Address
6	§2924. Revocation of declaration
7 8 9 10 11 12 13 14 15	1. Revocation; communication. A declaration may be revoked at any time and in any manner by which the declarant is able to communicate his intent to revoke, without regard to mental or physical condition. A revocation is only effective as to the attending physician or any health care provider acting under the guidance of that physician upon communication to the physician or health care provider by the declarant or by another to whom the revocation was communicated.
17 18 19 20	2. Revocation part of medical record. The attending physician or health care provider shall make the revocation a part of the declarant's medical record.
21 22	§2925. Recording determination of terminal condition and contents of declaration
23 24 25 26 27 28	When an attending physician who has been notified of the existence and contents of a declaration determines that the declarant is in a terminal condition, the physician must record that determination and the contents of the declaration in the declarant's medical record.
29	§2926. Treatment of qualified patients
30 31 32 33 34	1. Decisions regarding use of life-sustaining procedures. A qualified patient has the right to make decisions regarding use of life-sustaining procedures as long as the patient is able to do so. If a qualified patient is not able to make those deci-

37 2. Comfort care; alleviation of pain. This Act does not prohibit the application of any medical pro-38

ing use of life-sustaining procedures.

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sions, the declaration shall govern decisions regard-

- 1 cedure or intervention, including the provision of
 2 nutrition and hydration, considered necessary to provide comfort care or to alleviate pain.
 - 3. Pregnancy. The declaration of a qualified patient known to the attending physician to be pregnant shall be given no force or effect as long as it is probable that the fetus could develop to the point of live birth with continued application of life-sustaining procedures.

§2927. Transfer of patients

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- 1. Physicians unwilling to comply with declaration. An attending physician who is unwilling to
 comply with the requirements of section 2925 or who
 is unwilling to comply with the declaration of a
 qualified patient in accordance with section 2926
 shall take all reasonable steps to effect the transfer of the declarant to another physician.
- 18 2. Health care facility policies precluding com-19 pliance with declaration. If the policies of a health care facility preclude compliance with the 20 declaration of a qualified patient under this chap-21 ter, that facility shall take all reasonable steps to 22 effect the transfer of the patient to a facility in 23 which the provisions of this chapter may be carried 24 25 out.

§2928. Immunities

- 27 l. Actions in the absence of actual notice of
 28 revocation of declaration. In the absence of actual
 29 notice of the revocation of a declaration, the fol30 lowing, while acting in accordance with the require31 ments of this chapter, are not subject to civil or
 32 criminal liability or guilty of unprofessional con33 duct:
- A. A physician who causes the withholding or withdrawal of life-sustaining procedures from a qualified patient;
 - B. A person who participates in the withholding or withdrawal of life-sustaining procedures under the direction or with the authorization of a physician; and

- 1 C. The health care facility in which the withholding or withdrawal occurs.
- 2. Actions in accord with reasonable medical standards. A physician is not subject to civil or criminal liability for actions under this chapter which are in accord with reasonable medical standards.

§2929. Penalties

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- 9 1. Willful failure to transfer. A physician who
 10 willfully fails to transfer in accordance with sec11 tion 2927 is guilty of a Class E crime.
 - 2. Failure to record determination of terminal condition. A physician who willfully fails to record the determination of terminal condition in accordance with section 2925 is guilty of a Class E crime.
 - 3. Concealing, canceling, defacing or obliterating declaration. Any person who willfully conceals, cancels, defaces or obliterates the declaration of another without the declarant's consent or who falsifies or forges a revocation of the declaration of another is guilty of a Class E crime.
- 4. Falsification or forgery of declaration. Any person who falsifies or forges the declaration of another or willfully conceals or withholds personal knowledge of a revocation as provided in section 2924, with the intent to cause a withholding or withdrawal of life-sustaining procedures, is guilty of a Class E crime.

29 §2930. General provisions

- 1. Death not suicide or homicide. Death resulting from the withholding or withdrawal of life-sustaining procedures pursuant to a declaration and in accordance with this chapter does not, for any purpose, constitute a suicide or homicide.
 - 2. Declaration not to affect insurance. The making of a declaration pursuant to section 2924 does not affect in any manner the sale, procurement or issuance of any policy of life insurance, nor is it

deemed to modify the terms of an existing policy of life insurance. No policy of life insurance is legally impaired or invalidated in any manner by the withholding or withdrawal of life-sustaining procedures from an insured qualified patient, notwithstanding any term of the policy to the contrary.

- 3. Requirement of declaration as condition for insurance or health care services. No physician, health care facility or other health care provider, insurer issuing disability insurance, self-insured employee welfare benefit plan or nonprofit hospital plan may require any person to execute a declaration as a condition for being insured for or receiving health care services.
- 4. Presumption concerning life-sustaining procedure. This chapter creates no presumption concerning the intention of an individual who has not executed a declaration with respect to the use, withholding or withdrawal of life-sustaining procedures in the event of a terminal condition.
 - 5. Patient's right concerning withholding or withdrawl of medical care. Nothing in this chapter may be interpreted to increase or decrease the right of a patient to make decisions regarding use of life-sustaining procedures as long as the patient is able to do so, nor impairs or supersedes any right or responsibility that any person has to effect the withholding or withdrawal of medical care in any lawful manner. In that respect, the provisions of this chapter are cumulative.
- 31 6. Mercy killing or euthanasia. This chapter 32 does not condone, authorize or approve mercy killing 33 or euthanasia.
- 34 §2931. Recognition of declarations executed in other states
 - A declaration executed in another state in compliance with the laws of that state shall be effective for the purposes of this chapter.

 As of October 1984, 22 states had enacted legislation creating some sort of "living will."

This bill is modeled after a draft prepared by the National Conference of Commissioners on Uniform State Laws and will do the following:

- 1. Authorize an adult person to control decisions regarding administration of life-sustaining treatment by executing a declaration instructing his physician to withhold or withdraw life-sustaining procedures in the event that the person is in a terminal condition and is unable to participate in medical treatment decisions:
- 2. Present a form which is simple, effective and acceptable to persons desiring to execute a declaration regarding the use of life-sustaining measures in the event of a terminal illness and acceptable to physicians and health care facilities who will be required to comply with such a declaration; and
- 20 3. Encourage a declaration consistent in scope 21 and procedure with that executed in other states.

It does not address treatment of persons who have not executed such a declaration; it does not cover treatment of minors; and it does not cover treatment decisions by proxy.

There is nothing in this bill which prohibits life-sustaining measures should the individual elect to have them.

This bill emanated from a resolution from the 1984 Blaine House Conference on Aging and is a priority of the Maine Committee on Aging.

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