MAINE STATE LEGISLATURE

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FIRST REGULAR SESSION

ONE HUNDRED AND THIRTEENTH LEGISLATURE

Legislative Document

No. 1423

S.P. 466
In Senate, May 4, 1987
Submitted by the Department of Human Services pursuant to
Joint Rule 24.

Reference to the Committee on Human Resources suggested and ordered printed. $\,$

JOY J. O'BRIEN, Secretary of the Senate

Presented by Senator WHITMORE of Androscoggin.
Cosponsored by Senator ESTES of York, Representative
MURPHY of Berwick, Representative LEBOWITZ of Bangor.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND EIGHTY-SEVEN

AN ACT to Adjust Time Limits and Clarify Responsibility for Certification and Registration of Deaths.
Be it enacted by the People of the State of Maine as follows:
Sec. 1. 22 MRSA §2842, first ¶ is amended to read:
Except as authorized by the department, a certificate of each death which occurs in this State shall be filed with the clerk of the municipality where death occurred within 3-days a reasonable period of time, as specified by department regulation, after the day on which death occurred and prior to the removal of the body from the State.

MRSA §2842, sub-§2, amended by PL Sec. 2. 22 1977, c. 382, is further amended to read:

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- 3 Medical certificate by physician. The medical certification of the cause of death shall be 5 pleted and signed within-24-hours-after-death-by-the physician-in-charge-of-the--patient-s--care--for--the 6 7 illness--or--condition--which--resulted-in-death in a timely fashion by a physician authorized to practice in the State who has knowledge of the patient's con-8 9 dition, in accordance with department regulations and 10 11 other laws detailing who can certify and in what time 12 frame, except when an-inquiry--as--to--the--cause--of death--is--required--by-law the death falls under the jurisdiction of the medical examiner as provided in 13 14 If the patient was a resident of a 15 section 3025. 16 nursing home licensed under section 1817 at the time 17 death and if the physician in charge of the 18 patient's care had not examined the patient within 48 19 hours prior to death, the physician in charge or other physician designated by the physician in charge 20 21 shall examine the body prior to completing the certi-22 fication of death process. Any physician who fails to 23 the medical certification of the cause of complete 24 death fully, and in a timely manner, or who fails 25 examine the body of a nursing home resident prior to 26 certifying cause of death as required by this section 27 shall be reported to the Board of Registration Medicine or the Board of Osteopathic Examination and 28 29 Registration, whichever is appropriate, by the Registrar of Vital Statistics of the Department of 30 31 Human Services.
 - Sec. 3. 22 MRSA §3025, sub-§4, as enacted by 1985, c. 611, §6, is amended to read:
 - Questionable cases and cases which may constitute exceptions. All questionable cases shall be Acceptance of any questionable case is to be determined by the Chief Medical Examiner acceptance is specifically ordered by the Attorney General or district attorney having jurisdiction.
- Deaths due to the consequences of long-term alcohol long-term exposure to environmental or occupational toxins or long-term exposure to carcinogens 42 shall be reported, but need not be accepted.

1 2	Sudden natural deaths in the elderly who have not had previous specific symptoms or who were not under
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3	treatment by a physician for the specific natural
4	cause that is considered to be the cause of death
5	shall be reported to the Office of the Chief Medical
6	Examiner. Those cases may be referred back to the
7	attending physician by the Chief Medical Examiner for
8	certification of the death, even though the attending
9	physician has not treated the patient for the specif-
10	ic natural disease that he will enter as his diagno-
11	sis as-required-in-section-20427-subsection-2.

12 STATEMENT OF FACT

13 time requirements for certification and Current 14 registration of deaths are unrealistic 15 inflexible. The frequent late registrations delay the settlements of wills and estates, pension 16 and completion of burial arrangements and pay-17 This bill makes the death registration pro-18 cess more responsive to public needs by allowing the 19 20 department to relax time limits and define more 21 flexibly who may certify, through the process of reg-22 ulation. This bill also substitutes reference to the 23 existing medical examiner laws for definition of med-24 examiner cases instead of providing an indepen-25 dent definition in this section.