



119th MAINE LEGISLATURE

FIRST REGULAR SESSION-1999

Legislative Document

No. 2173

H.P. 1523

House of Representatives, April 8, 1999

An Act to Create the Maine Surrogacy Law.

Reference to the Committee on Judiciary suggested and ordered printed.

W. Mayo

OSEPH W. MAYO, Clerk

Presented by Representative GERRY of Auburn. (By Request)

	Be it enacted by the People of the State of Maine as follows:
2	Sec. 1. 19-A MRSA c. 52 is enacted to read:
4	
	CHAPTER 52
6	
0	SURROGACY
8	§1521. Short title
10	<u>31521. SHOLE CICLE</u>
10	This chapter is known and may be cited as the "Maine
12	Surrogacy Act."
14	§1522. Definitions
16	As used in this chapter, unless the context indicates
	otherwise, the following terms have the following meanings.
18	
	1. Artificial insemination. "Artificial insemination"
20	means the introduction of semen into a woman's vagina, cervical
	canal or uterus through extracorporeal or noncoital means.
22	
24	2. Birth mother. "Birth mother" means a woman who gestates
24	an embryo conceived by natural or artificial insemination or in vitro fertilization, zygote transfer or as a result of a
26	surrogacy arrangement.
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28	3. Donor. "Donor" means an individual who contributes a
	gamete for the purpose of artificial insemination, in vitro
30	<u>fertilization or implantation in a woman or a woman who</u>
	<u>contributes a zygote.</u>
32	
~ ~	4. Gamete. "Gamete" means a human ovum or a human
34	spermatozoon.
36	5. Health care provider. "Health care provider" means a
50	person who is duly licensed, certified or otherwise authorized to
38	administer health care in the ordinary course of business or
	practice of a profession.
40	
	Informed consent. "Informed consent" means a voluntary
42	decision made by a competent person who exercises care for that
	<u>person's own welfare about whether or not to participate in a</u>
44	proposed medical procedure or contractual arrangement that is
	based on a full awareness of:
46	
48	A. The medical and psychological risks;
-10	B. The legal, financial and contractual rights and
50	obligations; and
	XX==3MV+YMV/MMY

2	C. The available alternatives, including the alternative of not participating in any procedure or arrangement, and each
4	alternative's attendant risks and obligations.
6	7. Intended parents; intended father; intended mother. "Intended parents" means persons who are married to each other
8	including a woman, known in this chapter as "intended mother," and a man, known in this chapter as "intended father," and who,
10	complying with the requirements of this chapter, enter into a surrogacy arrangement.
12	8. In vitro fertilization. "In vitro fertilization" means
14	the employment of all medical and laboratory procedures that are necessary to effectuate the extracorporeal combining of gametes
16	to allow fertilization to occur.
18	9. Party. "Party" means an intended parent, the surrogate or, if the surrogate is married, her husband.
20	
22	10. Surrogacy or surrogacy arrangement. "Surrogacy" or "surrogacy arrangement" means any arrangement by which a woman agrees to be impregnated using either the intended father's
24	sperm, the intended mother's egg or their zygote with the intent that the intended parents are to become the parents of the
26	resulting child after the child's birth.
28	11. Surrogacy contract. "Surrogacy contract" means a written contract that complies with the requirements of section
30	1525, subsection 5.
32	12. Surrogate. "Surrogate" means a woman who agrees, pursuant to a surrogacy arrangement, to bear a child for the
34	intended parents.
36	13. Zygote. "Zygote" means the cell mass that results from fertilization of an ovum prior to implantation in the surrogate.
38	14. Zygote transfer. "Zygote transfer" means effectuating
40	the transfer of a zygote into the uterine cavity employing all medical and laboratory procedures necessary.
42	
44	§1523. Surrogacy arrangement
46	1. Validity. A surrogacy arrangement is valid and enforceable only if it complies with this section.
48	A. The arrangement must be by written contract that:

(1) Contains the elements set forth in section 1525, 2 subsection 5; 4 (2) Is entered into by the parties who meet the eligibility requirements of section 1524: and 6 (3) Is judicially authorized under section 1525. 8 B. The parties must undergo the medical and nonmedical 10 evaluations required under section 1524. §1524. Bligibility 12 1. Age. The parties to a surrogacy arrangement must be 21 14 years of age or older. 16 2. Intended mother unable to bear child. The intended mother must be medically determined to be physiologically unable 18 to bear a child without risk to her health or to the child's 20 health. 22 3. Prior pregnancy and delivery. A woman may not be a surrogate unless: 24 A. She has a documented history of at least one pregnancy 26 and viable delivery; 28 B. She is in good health without recurrent conditions that may affect pregnancy; and 30 C. She meets the requirements under subsection 5, 32 paragraphs B and C. 34 4. Nonmedical evaluations. Each party must be evaluated as follows. 36 A. A nonmedical evaluation must be performed on each party 38 by a psychiatrist, psychologist, pastoral counselor or social worker who is licensed, certified or authorized to 40 practice under the laws and rules of this State and who shall maintain a record of the findings and conclusions and 42 make a copy available to the person evaluated. Each party shall waive any privilege against disclosure of confidential 44 communications and disclose a copy of the findings to the other parties prior to entering the surrogacy contract. 46 Each party shall file a copy of the findings with the court unless good cause is shown. 48 B. The person conducting the nonmedical evaluation shall 50 determine the party's suitability to parent by considering:

2	(1) The ability and disposition of the party being evaluated to give a child love, affection and guidance;
4	and
6	(2) The ability of the party to adjust to and assume the inherent risks of the surrogacy contract.
8	
10	C. A home study of each party involved must be conducted by a licensed child placing agency or the Department of Human Services to assess the ability and disposition of the party
12	to provide the child with food, clothing, shelter, medical care and other basic necessities. Each party shall file a
14	copy of the findings with the court.
16	5. Medical evaluations. The parties must undergo the following medical evaluations.
18	
20	A. Semen may not be used in an insemination procedure unless the sperm donor has been medically evaluated and the results, documented in accordance with rules adopted by the
22	Department of Human Services, demonstrate the medical acceptability of the person as a sperm donor.
24	
26	B, A woman may not be a surrogate unless the woman has been medically evaluated and the results, documented in
28	accordance with rules adopted by the Department of Human
-	<u>Services, demonstrate the medical acceptability of the woman</u> to be a surrogate.
30	
32	C. A woman may not undergo an insemination procedure unless the woman has been medically evaluated and the results, documented in accordance with rules adopted by the
34	Department of Human Services, demonstrate the medical acceptability of the woman to undergo insemination.
36	
	6. Medical counseling. The surrogate and the intended
38	parents must receive genetic counseling if the surrogate is 35 years of age or older.
40	
	§1525. Judicial authorization
42	
44	1. Jurisdiction. A petition for authorization of a surrogacy arrangement must be brought in the Probate Court for
~ ~	the county in which the surrogate or the intended parents reside
46	at the time the petition is filed. The surrogate or the intended parents must have resided in this State for at least 6 months
48	prior to the date the petition for authorization is filed.

	2. Petition for authorization hearing. Prior to natural or
2	artificial insemination of or in vitro fertilization and zygote
	transfer into a surrogate, the parties to a surrogacy arrangement
4	<u>shall jointly petition the Probate Court for judicial authorization of the surrogacy arrangement.</u>
6	auchorizacion of the surrogacy arrangement.
v	A. The petition must contain:
8	Re INC PECILIVA MADE CONCLAM.
	(1) The full name, including the intended mother's and
10	surrogate's names before marriage, if different; age;
	and place and duration of residence of each party;
12	
	(2) The date and place of the intended parents'
14	marriage:
16	(3) The date and place of the marriage of the
	surrogate, if she is married;
18	SWEEN AROUNDED TO THE TRANSPORT
	(4) A copy of the duly executed surrogacy contract;
20	<u>┶┉╡┥┈┉╵╴┉╄┰╔</u> ┪┉┉╀╫ <u>┉╜╵</u> ݿ┉╸╄┖┸╫┪┍╌╴╄╫╫ <u>╄╌┡┉┡╌╹┸╶</u> ┇╨╟┪┍╌╴Ӿ╺╨╝┹╛╖╫┸╺╽
	(5) All required written consents;
22	
	(6) All evaluations and reports required by this
24	chapter; and
26	(7) The name and address of the health care provider
	who will perform the procedure.
28	
	3. Time of hearing; notice. The court shall hold a hearing
30	within 90 days after the filing of a petition for authorization.
32	A. Separate hearings for each party may be held if one or
24	more parties request separate hearings.
34	D has mentel beelth anostitioned shild aloging encours
36	B. Any mental health practitioner, child placing agency, health care provider or any other person who conducted
30	nearth care provider of any other person who conducted nonmedical or medical evaluation or counseling pursuant to
38	section 1524, subsections 4, 5 and 6 must be given notice of
	the filing of the petition and the time and place of the
40	hearing by the parties at least 10 days prior to the hearing.
	<u></u>
42	4. Hearing. This subsection governs the hearing on a
	surrogacy arrangement.
44	
	A. The parties must be present at the hearing.
46	
	B. The parties may offer additional evidence the court
48	determines relevant, and the court may require the
	<u>submission of additional information as it determines</u>
50	<u>appropriate.</u>

2	C. All hearings must be closed to the public. Only
	essential officers of the court, parties, witnesses and
4	counsel may be admitted.
6	D. Papers and records pertaining to the hearing are subject to inspection only upon consent of all parties or upon a
8	showing of good cause supported by a court order.
10	5. Mandatory terms of surrogacy contract. The surrogacy
10	contract must include the following provisions:
12	
	A. The consent of the surrogate that she will surrender
14	custody of the child or accept the obligation of parenthood
	if she gives notice of intent to keep the child as provided
16	<u>in paragraph D;</u>
18	B. The consent of the husband of the surrogate, if the
20	surrogate is married, that he will surrender custody of the
20	child or accept the obligation of parenthood if the
22	<u>surrogate gives notice of intent to keep the child as</u> provided in paragraph D;
22	provided in paradraph by
24	C. The consent of the intended parents that they will
	accept the obligations of parenthood, unless the surrogate
26	gives notice of intent to keep the child as provided in
	paragraph D;
28	
	D. The right of either party to withdraw from the contract
30	within 72 hours after signing the contract and prior to the
	<u>surrogates undergoing in vitro fertilization and zygote</u>
32	transfer. Any fees paid to the surrogate must be returned
	to the intended parents.
34	
	E. If the surrogate receives a fee, a provision that fees
36	are limited to:
38	(1) Pregnancy-related medical expenses, including
50	expenses related to any complications occurring within
40	6 weeks after delivery and expenses related to the
	medical evaluation;
42	
	(2) Actual lost wages related to pregnancy, delivery
44	and postpartum recovery, if absence from employment is
	recommended in writing by the attending physician;
46	
	(3) Health, disability and life insurance during the
48	term of pregnancy and 6 weeks after delivery;
50	(4) Reasonable attorney's fees and court costs;

2	(5) Counseling fees and costs associated with the nonmedical evaluations and home studies for the
4	surrogate and her husband, if the surrogate is married; and
6	ano (6) A maximum of an additional \$1,000 per month during
8	the course of the pregnancy;
10	F. The signatures of the intended parents, the surrogate, and, if she is married, the surrogate's husband; and
12	G. A provision that clearly states the parental rights of a
14	natural parent under state law and that by signing the contract the birth mother waives these rights permanently.
16	This provision must be typed entirely in capital letters in a font size no smaller than any other font size used in the
18	contract.
20	6. Order. The court may issue an order validating the surrogacy arrangement if, after the hearing, the court makes the
22	following findings:
24	A. All parties to the surrogacy arrangement have given their informed consent;
26	B. The surrogacy contract conforms to all of the
28	requirements of subsection 5 and does not contain prohibited or unconscionable terms;
30	
32	C. Evaluations and counseling, pursuant to section 1524, subsections 4, 5 and 6, have been completed, and the parties have been determined by the persons performing the
34	evaluations or counseling to be qualified to enter into the surrogacy arrangement under this chapter; and
36	D. The surrogacy arrangement is in the best interest of the
38	child.
40	7. Effect of validation. The effect of a judicial order validating the surrogacy arrangement is the automatic termination
42	of the parental rights of the surrogate and her husband, if the surrogate is married, after the birth of a child born as a result
44	of the arrangement and a vesting of those rights solely in the intended parents.
46	
48	<u>§1526. Birth registration</u>
50	The certificate of birth must be completed in accordance with Title 22, chapter 703. The birth certificate must name the

intended parents as the parents.

	intended parents as the parents.
2	<u>\$1527. In vitro fertilization and sygote transfer</u>
4	<u></u>
6	1. Eligibility. In vitro fertilization and zygote transfer must be performed in accordance with rules adopted by the Department of Human Services and may be available only to a woman:
8	▝▖▖▖▝▖▝▝▝▖▝▝▖▖▝▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖▖
10	A. Who is 21 years of age or older;
12	B. Who has been medically evaluated, and the results, documented in accordance with rules adopted by the
14	Department of Human Services, demonstrate the medical acceptability of the woman to undergo the in vitro fertilization and zygote transfer procedure;
16	
18	C. Who receives counseling pursuant to section 1524, subsections 4, 5 and 6 and provides written certification of the counseling and evaluation to the health care provider
20	performing the in vitro fertilization and zygote transfer procedure; and
22	
24	D. Whose husband, if the surrogate is married, receives appropriate counseling pursuant to section 1524, subsections 4, 5 and 6 and:
26	
28	(1) Successfully completes the medical evaluation if he is a gamete donor in the in vitro fertilization procedure;
30	
32	(2) Provides written certification of the nonmedical counseling and any evaluation to the health care provider performing the in vitro fertilization
34	procedure; and
36	(3) Indicates, in writing, acceptance of the legal rights and responsibilities of parenthood for any
38	resulting child, unless the husband contributes his sperm for the in vitro fertilization procedure.
40	
42	2. Provision of gamete by intended mother or intended father. The intended mother or the intended father shall provide a gamete to be used to impregnate the surrogate.
44	2 Description of search has a first the second
46	3. Provision of gamete by surrogate. If the intended mother does not provide a gamete, the surrogate shall provide a gamete.
48	

	4. Gamete donors. A gamete may not be used for an in vitro
2	fertilization procedure unless the gamete donor has been
	medically evaluated and the results, documented in accordance
4	with rules adopted by the Department of Human Services,
6	demonstrate the medical acceptability of the person as a gamete donor.
0	donor.
8	5. Requirements before procedure. Before performing the
	procedure to impregnate the surrogate:
10	
10	A. The health care provider performing the procedure must
12	receive written certification that the parties successfully
14	completed the medical and nonmedical evaluations and
7.4	counseling pursuant to section 1524, subsections 4, 5 and 6;
16	B. The surrogate contract has been authorized pursuant to
	section 1525; and
18	
	C. All parties to the surrogacy arrangement provide the
20	health care provider performing the procedure with written
	indication of their informed consent to the surrogacy
22	arrangement.
24	6. In accordance with rules. The procedure to impregnate a
67	surrogate may be performed only in accordance with rules adopted
26	by the Department of Human Services.
	<u> </u>
28	<u>§1528. Health care decisions</u>
20	
30	1. Health of birth mother and fetus. The birth mother
32	shall make all decisions regarding the health of the birth mother and the fetus.
72	and the recus.
34	2. Health of child after birth. In the case of surrogacy,
	unless the surrogacy arrangement otherwise provides, the birth
36	mother or, in the event of her disability, the intended parents
	shall make health care decisions concerning the resulting child.
38	
	<u>§1529. Rules of parentage</u>
40	
	1. Mother-child relationship. A woman is the mother of a
42	child to whom she has given birth, except as otherwise provided
	in this chapter.
44	2 Pather shild polationships another that the
46	2. Father-child relationship: presumptions. A man is presumed to be the father of a child if:
-110	breammen to be the raduel of a culturity it:
48	A. He and the child's mother are or have been married to
••	each other and the child is born during the marriage or

	within 300 days after the marriage is terminated for any
2	reason or after a decree of separation is entered by a court;
4	B. Before the child's birth, he and the child's mother have attempted to marry each other by a marriage solemnized in
б	apparent compliance with law, although the attempted marriage is or could be declared void, voidable or otherwise
8	invalid and:
10	(1) If the attempted marriage could be declared
12	invalid only by a court, the child is born during the attempted marriage or within 300 days after its
14	termination for any reason; or
16	(2) If the attempted marriage is invalid without a court order, the child is born within 300 days after
18	the termination of cohabitation:
20	<u>C. After the child's birth, he and the child's mother have</u> married or attempted to marry each other by a marriage
22	solemnized in apparent compliance with law, although the attempted marriage is or could be declared void, voidable or
24	otherwise invalid and:
26	(1) He has acknowledged his paternity of the child in a writing filed with the appropriate court or state
28	agency;
30	(2) With his consent, he is named as the child's father on the birth certificate; or
32	(3) He is obligated to support the child under a
34	written voluntary promise or by court order:
36	D. While the child is under the age of majority, he receives the child into his home and openly holds out the
38	child as his child; or
40	E. As an unmarried donor of sperm for use in artificial insemination or in vitro fertilization, he and an unmarried
42	woman, who under subsection 1 would be the mother of the child, follow the procedures in section 1523 and agree in
44	writing in advance of the procedure that the donor will be the father.
46	3. Rebuttal of presumption. A presumption under subsection
48	2 may be rebutted in an appropriate action only by clear and convincing evidence.

	A. The existence of the father-child relationship presumed
2	under subsection 1, paragraph A, B or C may not, however, be
-	rebutted by evidence that the child was conceived by means
4	of artificial insemination or in vitro fertilization, if the
	presumptive father complies with the requirements of section
6	1527 or 1531.
8	B. In the absence of compliance under paragraph A, the
	presumptive father's consent must be conclusively presumed
10	by his failure to object to paternity by filing an action to
	dispute paternity within 30 days after he knew or should
12	have known of the child's birth.
7.4	C If 2 on more presentions of potentity spice that
14	C. If 2 or more presumptions of paternity arise that conflict with each other, the presumption that on the facts
16	
16	is founded on the weightier considerations of policy and
1.0	logic controls. The presumption is rebutted by a court
18	decree establishing paternity of the child by another man.
20	4. Termination and transfer of parental rights to intended
20	parents. Parental rights established under this chapter must be
22	terminated and transferred to the intended parents or to the
<i>L L</i>	surrogate and her husband, if the surrogate is married, pursuant
24	
24	to section 1525, subsection 7. This chapter may not be construed
26	to apply to cases other than surrogacy,
20	5. Effect of noncompliance. Noncompliance with the
	D. FLINGL OF INTRODUCTIONS NOTCOMPTIANCE WITH THE
20	
28	requirements of this chapter does not affect the determination of
-	requirements of this chapter does not affect the determination of parentage under this section. Breach of a judicially authorized
28 30	requirements of this chapter does not affect the determination of parentage under this section. Breach of a judicially authorized surrogacy arrangement does not affect transfer of parentage under
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	fertilization, zygote transfer procedure or surrogacy arrangement
2	do not substantially comply with the applicable provisions of this chapter, the court may impose a support obligation on the
4	parties. In imposing this support obligation, the court may consider the seriousness of and the reasons for noncompliance in
б	order to determine which of the parties, if any, should be liable for support.
8	
10	4. Support liability even when noncompliance. If any person intentionally or knowingly fails to comply with this chapter and the effect of noncompliance is the authorization of a
12	procedure in violation of this chapter, that person may be liable for support of the resulting child.
14	E Surrout obligation over the contrast broughed)
16	5. Support obligation even when contract breached. A breach of a surrogacy contract by the intended parents does not affect their support obligation.
18	<u>§1532. Intestate and testate succession</u>
20	JIJJ2. INCESCALE AND LESCALE SUCCESSION
22	1. Child of parents only. Subject to subsection 2, a child is considered a child only of the child's parent or parents, and the parent or parents are considered the parent or parents of the
24	child, as determined under section 1529, for purposes of:
26	A. Intestate succession;
28	B. Taking against the will of any person;
30	C. Taking under the will of any person, unless the will otherwise provides; and
32	D. Being entitled to any support or similar allowance
34	during the administration of a parent's estate.
36	2. Child born of surrogate. For purposes of subsection 1, a child born of a surrogate is the child of the intended parents
38	from the moment of the child's birth.
40	§1533. Actions on contract
42	1. No specific performance. The court may not order specific performance for a breach by the surrogate of a surrogacy
44	contract term that:
46	A. Requires her to become impregnated;
48	B. Requires her to have an abortion; or
50	C. Forbids her to have an abortion.

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2	2. Contract voidable. If the surrogate fails to become
	pregnant after the surrogacy arrangement has been judicially
4	approved pursuant to section 1525, the contract is voidable at
6	the option of either party.
0	3. Breach of material term by intended parents. If the
8	intended parents breach a material term of the contract, the
U	surrogate may:
10	<u> </u>
	A. Recover health care expenses that the intended parents
12	were required to pay;
14	B. Collect the fees provided for in the contract; and
16	C. If the breach is refusal to accept the child, the
	surrogate may file notice to keep the child and the intended
18	parents are liable for support. If the birth certificate
	has been issued, the surrogate may petition to reissue the
20	birth certificate with the surrogate's name listed as the
	parent of the resulting child.
22	
	4. Action by surrogate. Any action by the surrogate for
24	damages must be brought in the Probate Court in which the
24	petition for authorization was filed under section 1525.
26	
20	R1524 Tichilities and immunities for populations of
	<u>§1534. Liabilities and immunities for participants of</u>
28	natural or artificial insemination, in vitro
28	
	natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy
28	<pre>natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or</pre>
28 30	natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the
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28 30 32	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under
28 30 32	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may
28 30 32 34 36	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for
28 30 32 34	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may
28 30 32 34 36 38	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions.
28 30 32 34 36	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent
28 30 32 34 36 38 40	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions.
28 30 32 34 36 38	 natural or artificial insemination, in vitro fertilization, sygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter:
28 30 32 34 36 38 40 42	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent
28 30 32 34 36 38 40	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and
28 30 32 34 36 38 40 42 44	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and B. May be jointly and severally liable for child support to
28 30 32 34 36 38 40 42	 natural or artificial insemination, in vitro fertilization, zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and
28 30 32 34 36 38 40 42 44	 natural or artificial insemination, in vitro fertilization, sygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and B. May be jointly and severally liable for child support to the resulting child under the laws of this State.
28 30 32 34 36 38 40 42 44 46	 natural or artificial insemination. in vitro fertilization. zygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and B. May be jointly and severally liable for child support to the resulting child under the laws of this State. 3. Not exclusive. The sanctions provided in this section
28 30 32 34 36 38 40 42 44 46	 natural or artificial insemination, in vitro fertilization, sygote transfer and surrogacy 1. Immunities. A person may not be subject to civil or criminal liability for nonnegligent actions taken pursuant to the requirements of this chapter. A physician or other health care provider whose actions under this chapter are in accord with reasonable medical standards may not be subject to criminal or civil liability or discipline for unprofessional conduct with respect to those actions. 2. Liabilities. A person who acts in negligent noncompliance with this chapter: A. Is liable for resulting damages; and B. May be jointly and severally liable for child support to the resulting child under the laws of this State.

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2 §1535. Prohibited actions and penalties

- 1. No fee or commission. A person or entity may not promote or in any other way solicit for or induce a fee,
 commission or other valuable consideration, or with the intent or expectation of receiving a fee, induce any party or parties to
 enter into a surrogacy arrangement.
- 10 **2. Restrictions on use of zygotes.** A zygote:
- 12 A. May not be maintained ex utero in the noncryo-preserved state beyond 14 days post-fertilization development; and
- B. That has been donated for use in research may not be
 transferred to a uterine cavity.

18 **§1536. Rules**

- The Department of Human Services shall adopt rules to carry out its duties under this chapter. Rules adopted pursuant to
 this section are major substantive rules under Title 5, chapter 375, subchapter II-A.
- <u>§1537. Application</u>
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This chapter does not apply to cases other than surrogacy.

Sec. 2. Guidelines pending adoption of rules. Until the
 Department of Human Services adopts rules to carry out its duties
 under the Maine Revised Statutes, Title 19-A, chapter 52, medical
 evaluations and procedures must be conducted in accordance with
 the relevant sections of guidelines published by the American
 Fertility Society.

SUMMARY

This bill establishes procedures for surrogacy 40 arrangements. It requires medical and nonmedical evaluations of the parties, specifies contract provisions and requires approval 42 of the contract by the Probate Court.