

# MAINE STATE LEGISLATURE

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# 129th MAINE LEGISLATURE

## FIRST REGULAR SESSION-2019

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Legislative Document

No. 673

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H.P. 494

House of Representatives, February 7, 2019

**An Act To Amend the Laws Governing the Circumstances of Death  
That Must Be Reported to the Office of Chief Medical Examiner**

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Reference to the Committee on Judiciary suggested and ordered printed.

A handwritten signature in cursive script that reads "R B. Hunt".

ROBERT B. HUNT  
Clerk

Presented by Representative MOONEN of Portland.  
Cosponsored by Representative: BAILEY of Saco.

1 **Be it enacted by the People of the State of Maine as follows:**

2 **Sec. 1. 22 MRSA §3025, sub-§1**, as amended by PL 2011, c. 420, Pt. D, §2 and  
3 affected by §6, is further amended to read:

4 **1. Circumstances of death that must be reported.** A medical examiner case may  
5 exist and must be reported as provided in section 3026 when remains are found that may  
6 be human and raise suspicion that death has occurred under any of the following  
7 circumstances:

8 A. Death is suspected of having been caused by any type of physical injury,  
9 including poisoning, regardless of whether the suspected manner of death is  
10 homicide, suicide or accident. This circumstance must be reported irrespective of  
11 whether the deceased had been attended by a physician, was a patient in a hospital,  
12 survived for a considerable time following the physical injury or died from terminal  
13 natural causes consequent to and following the physical injury;

14 B. Suddenly when the person is in apparent good health and has no specific natural  
15 disease sufficient to explain death;

16 C. During diagnostic or therapeutic procedures under circumstances indicating gross  
17 negligence or when clearly due to trauma or poisoning unrelated to the ordinary risks  
18 of those procedures;

19 D. Death when the person is in custody pursuant to an arrest, confined in a state  
20 correctional or detention facility, county jail, other county correctional or detention  
21 facility or local lockup or is on the way to or from a courthouse or any of these places  
22 while in the custody of a law enforcement officer or county or state corrections  
23 official;

24 E. Death while the person is a patient or resident of a facility of the Department of  
25 Health and Human Services or residential care facility maintained or licensed by the  
26 Department of Health and Human Services, unless clearly certifiable by an attending  
27 physician as due to specific natural causes;

28 F. Death suspected of being due to a threat to the public health when the authority of  
29 the medical examiner is needed to adequately study the case for the protection of the  
30 public health;

31 G. Death suspected of not having been certified, including, but not limited to, bodies  
32 brought into the State and any buried remains uncovered other than by legal  
33 exhumation;

34 H. Deaths suspected of being medical examiner cases which may have been  
35 improperly certified or inadequately examined, including, but not limited to, bodies  
36 brought into the State under those circumstances;

37 I. Sudden infant death syndrome deaths and all other deaths of children under the age  
38 of 18 unless clearly certifiable by an attending physician as due to specific natural  
39 causes unrelated to abuse or neglect;

40 J. Whenever human or possibly human remains are discovered not properly interred  
41 or disposed of, for which the responsibility to do so cannot be readily determined; or

1 K. Any cause when there is no attending physician capable of certifying the death as  
2 due to natural causes. When a person dies who is under the care of a religious  
3 practitioner who uses prayer and spiritual means of healing, the fact that the deceased  
4 has been under such religious care does not warrant suspicion of foul play or  
5 investigation beyond that warranted by the other facts of the case.

6 In the absence of any of the circumstances outlined in this subsection, the fact that a  
7 patient dies within 24 hours of admission to a hospital or other health care facility need  
8 not be reported to the Office of Chief Medical Examiner.

9 In any case in which the necessity of a report is questionable, a report must be made.

10 **Sec. 2. 22 MRSA §3025, sub-§1-A, ¶A**, as enacted by PL 2003, c. 433, §4, is  
11 amended to read:

12 A. Deaths due to the consequences of ~~long-term alcohol use~~, long-term exposure to  
13 environmental or occupational toxins or long-term exposure to carcinogens;

14 **Sec. 3. 32 MRSA §1405, 2nd ¶**, as amended by PL 2017, c. 284, Pt. GGG, §1, is  
15 further amended to read:

16 The body of a deceased person may not be cremated within 48 hours after death  
17 unless the person died of a contagious or infectious disease, and in no event may the body  
18 of a deceased person be cremated, buried at sea, used by medical science or removed  
19 from the State until the person, firm or corporation in charge of the disposition has  
20 received a certificate from a duly appointed medical examiner or medicolegal death  
21 investigator appointed pursuant to Title 22, section 3023-A that the medical examiner or  
22 medicolegal death investigator has made personal inquiry into the cause and manner of  
23 death and is satisfied that further examination or judicial inquiry concerning the cause  
24 and manner of death is not necessary. This certificate, a certified copy of the death  
25 certificate and a burial transit permit when presented by the authorized person as defined  
26 in Title 22, section 2846 is sufficient authority for cremation, burial at sea, use by medical  
27 science or removal from the State, and the person, firm or corporation in charge of the  
28 disposition may not refuse to cremate or otherwise dispose of the body solely because  
29 these documents are presented by such an authorized person. The certificate must be  
30 retained by the person, firm or corporation in charge of the cremation or disposition for a  
31 period of 15 years. For the certificate, the medical examiner must receive a fee of \$25  
32 payable by the person requesting the certificate. This fee may be waived at the discretion  
33 of the Chief Medical Examiner.

## 34 SUMMARY

35 This bill amends the law governing the Department of the Attorney General, Office  
36 of Chief Medical Examiner as follows.

37 1. It clarifies that, absent certain other circumstances, the fact that a patient dies  
38 within 24 hours of admission to a hospital or other health care facility need not be  
39 reported to the Office of Chief Medical Examiner.

- 1           2. It removes the requirement that deaths due to the consequences of long-term  
2 alcohol use be reported to the Office of Chief Medical Examiner.
  
- 3           3. It allows a duly appointed medicolegal death investigator, in addition to a medical  
4 examiner, to certify that further examination or judicial inquiry concerning the cause and  
5 manner of death of a person is not necessary.