



SPONSOR: Rep. Baumbach

HOUSE OF REPRESENTATIVES  
149th GENERAL ASSEMBLY

HOUSE AMENDMENT NO. 1  
TO  
HOUSE BILL NO. 160

AMEND House Bill No. 160 on line 17 by inserting “, including a mental capacity evaluation,” after “consultations” and before “as” therein.

FURTHER AMEND House Bill No. 160 by deleting lines 56 and 57 in their entirety and inserting in lieu thereof the following:

“(2) A person who at the time the request is signed would be entitled to any portion of the estate of the qualified patient upon death under any will, trust, or codicil thereto then existing, or by operation of law.”

FURTHER AMEND House Bill No. 160 by deleting line 60 in its entirety and inserting in lieu thereof the following:

“(c) The patient’s attending physician and consulting physician at the time the request for medication is signed may not serve as a witness under subsection (b) of this section.”

FURTHER AMEND House Bill No. 160 by inserting after line 60 and before line 61 the following:

“(d) Any individual serving as a witness must be 18 years of age or older.”

FURTHER AMEND House Bill No. 160 on line 64 by inserting after the period therein the following:

“The determination that the patient has made the request for medication voluntarily includes confirming the request does not arise from coercion or undue influence by another person by discussing the request for medication with the patient outside the presence of any other person, except an interpreter as required.”

FURTHER AMEND House Bill No. 160 on line 88 by deleting “Board of Medical Licensure and Discipline” after “the” and before the comma therein and inserting in lieu thereof “Office of Controlled Substances”.

FURTHER AMEND House Bill No. 160 by inserting after line 94 and before line 95 the following:

“(13) Counsel the patient on the importance of maintaining the medication prescribed under this chapter in a safe and secure location until the time the qualified patient will ingest it and how any unused medication should be safely and lawfully disposed of by any person in possession or control of any of the qualified patient’s unused medication after the qualified patient ends their life in a humane and dignified manner.”

FURTHER AMEND House Bill No. 160 by deleting lines 95 and 96 in their entirety and inserting in lieu thereof the following:

“(b) The attending physician may sign the qualified patient’s death certificate.

(c) The death certificate must list the underlying terminal illness as the cause of death.”

FURTHER AMEND House Bill No. 160 on line 179 by inserting "this" after the second occurrence of "to" therein.

FURTHER AMEND House Bill No. 160 by inserting after line 183 and before line 184 the following:

"(e) Nothing in this section shall be construed to limit the ability of an insurance or annuity provider from investigating a claim for benefits for a death."

FURTHER AMEND House Bill No. 160 on line 195 by deleting "the" after "end" and before "their" therein.

FURTHER AMEND House Bill No. 160 by inserting after line 254 and before line 255, and by redesignating subsequent section numbers accordingly, the following:

“§ 2519B. Liabilities.

(a) A person who without authorization of the patient willfully alters or forges a request for medication or conceals or destroys a rescission of a request for medication under this chapter with the intent or effect of causing the patient’s death is guilty of a class A felony.

(b) A person who coerces or exerts undue influence on a patient to make a request for medication or to destroy a rescission of a request for medication under this chapter with the intent or effect of causing the patient’s death is guilty of a class A felony.

(c) This chapter does not limit liability for civil damages resulting from negligent conduct or intentional misconduct not expressly provided for in this chapter.

(d) This chapter does not limit or preclude criminal penalties applicable under the Code.”

#### SYNOPSIS

This Amendment clarifies the definition of "counseling" to include mental capacity evaluations; clarifies the restrictions on who may serve as a witness in regard to potential benefits from the estate of the qualified patient; restricts both the attending physician and the consulting physician from serving as a witness; requires anyone serving as a witness be over the age of 18; adds to the attending physician's responsibilities the requirement to confirm the medication request is not the result of coercion or undue influence and the requirement to counsel the patient on safely storing the medication until it is ingested and how any unused medication should be safely and lawfully disposed of; clarifies that insurance or annuity providers are not precluded from investigating a claim for benefits for a death under the Act; clarifies that civil and criminal liability are not limited or precluded under the Act and provides additional provisions for criminal liability in certain circumstances; and makes technical corrections.