### **HOUSE BILL NO. 99**

# IN THE LEGISLATURE OF THE STATE OF ALASKA TWENTY-NINTH LEGISLATURE - FIRST SESSION

#### BY REPRESENTATIVE DRUMMOND

Introduced: 2/9/15

Referred:

### A BILL

# FOR AN ACT ENTITLED

- 1 "An Act relating to the voluntary termination of life by terminally ill individuals; and
- 2 providing for an effective date."

### 3 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

- \* **Section 1.** AS 11.41.115 is amended by adding a new subsection to read:
- 5 (g) In a prosecution under AS 11.41.100(a)(1) or 11.41.110(a)(1) or (2), it is an
- 6 affirmative defense that the defendant was performing an action allowed under
- 7 AS 13.55.
- \* Sec. 2. AS 11.41.120 is amended by adding a new subsection to read:
- 9 (c) In a prosecution under this section, it is an affirmative defense that the defendant was performing an action allowed under AS 13.55.
- \* **Sec. 3.** AS 13 is amended by adding a new chapter to read:
- 12 Chapter 55. Voluntary Termination of Life.
- 13 Sec. 13.55.010. Individuals allowed to terminate life. (a) A qualified
- individual may terminate the qualified individual's life under this chapter. To be

1	qualified, an individual shall
2	(1) be a resident of this state;
3	(2) be an adult;
4	(3) have been determined by a court, the individual's attending
5	physician, the individual's consulting physician, the individual's psychiatrist, or the
6	individual's psychologist to be capable;
7	(4) have been determined by the individual's attending physician and
8	consulting physician to be suffering from a terminal disease; and
9	(5) have voluntarily expressed the wish to die.
10	(b) An individual does not qualify under (a) of this section solely because of
11	the individual's age or disability.
12	Sec. 13.55.020. Attending physician and pharmacist authority. If a
13	qualified individual's attending physician complies with this chapter, the attending
14	physician may
15	(1) dispense medication directly to the qualified individual, including
16	ancillary medications intended to facilitate the desired effect or minimize the qualified
17	individual's discomfort; or
18	(2) write a prescription for the medication for the qualified individual
19	and personally or by mail deliver the prescription for the medication to a pharmacist,
20	who may dispense the medication to the qualified individual, the attending physician,
21	or an expressly identified agent of the qualified individual.
22	Sec. 13.55.030. Requests for medication. (a) To receive medication under this
23	chapter, a qualified individual shall make an oral request and a written request to the
24	qualified individual's attending physician. The qualified individual shall repeat the oral
25	request to the qualified individual's attending physician more than 15 days after
26	making the initial oral request.
27	(b) Notwithstanding (a) of this section, if a qualified individual is not
28	physically able to speak, a qualified individual may make an oral request by whatever
29	means the qualified individual can use to make the request, including electronic
30	means, as long as the request is made in person.
31	(c) Notwithstanding (a) of this section, if a qualified individual is not

physically able to sign a wr	itten request,	, the qualified	individual	may dii	rect a	ınothe
individual to sign for the qua	lified individ	lual.				

Sec. 13.55.040. Right to rescind request. When a qualified individual makes the second oral request under AS 13.55.030, the attending physician shall offer the qualified individual an opportunity to rescind the initial oral request and the written request. A qualified individual may rescind a request at any time and in any manner without regard to the qualified individual's mental state. An attending physician may not dispense or prescribe medication under this chapter unless the attending physician offers the qualified individual an opportunity to rescind the request.

**Sec. 13.55.050. Written request requirements.** (a) A written request for medication under this chapter must be in substantially the form described in AS 13.55.060, signed and dated by the qualified individual, and witnessed by at least two other individuals. The attending physician may not witness the request. The witnesses shall, in the presence of the qualified individual, attest that, to the best of their knowledge and belief, the qualified individual is capable, acting voluntarily, and not under undue influence to sign the request.

# (b) Only one witness may be

- (1) a relative of the qualified individual by blood, marriage, or adoption;
- (2) an individual who, at the time the qualified individual signs the request, would be entitled to a portion of the estate of the qualified individual at death under a will or by operation of law; or
- (3) an owner, operator, or employee of a health care facility where the qualified individual is receiving medical treatment or is a resident.
- (c) If the qualified individual is an inpatient in a long-term care facility when the qualified individual signs the request, one of the witnesses shall be an individual designated by the facility who has the qualifications established by the department by regulation. In this subsection, "long-term care facility" includes an assisted living home as defined in AS 47.32.900 and a nursing facility as defined in AS 47.32.900.
- **Sec. 13.55.060. Form for written request.** A request for a medication under this chapter must be in substantially the following form:

1	REQUEST FOR MEDICATION TO END MIT LIFE
2	I,, am an adult of sound mind.
3	I am suffering from, which my attending physician
4	has determined is a terminal disease and which has been medically confirmed
5	by a consulting physician.
6	I have been fully informed of my diagnosis, prognosis, the nature of the
7	medication to be prescribed and potential associated risks, the expected result,
8	and the feasible alternatives, including comfort care, hospice care, and pain
9	control.
10	I request that my attending physician prescribe medication that will end
11	my life in a humane and dignified manner.
12	INITIAL ONE OF THE FOLLOWING:
13	I have informed my family of my decision and taken their
14	opinions into consideration.
15	I have decided not to inform my family of my decision.
16	I have no family to inform of my decision.
17	I understand that I have the right to rescind this request at any time.
18	I understand the full import of this request, and I expect to die when I
19	take the medication to be prescribed. I further understand that, although most
20	deaths occur within three hours, my death may take longer, and my attending
21	physician has counseled me about this possibility.
22	I make this request voluntarily and without reservation, and I accept
23	full moral responsibility for my actions.
24	Signed:
25	Dated:
26	DECLARATION OF WITNESSES
27	We declare that the person signing this request
28	(1) is personally known to us or has provided proof of
29	identity;
30	(2) in our presence signed or directed another person to
31	sign this request;

1	(3) is not an individual for whom either of us is the
2	attending physician; and
3	(4) to the best of our knowledge and belief,
4	(A) has the ability to make and communicate
5	health care decisions to health care providers; and
6	(B) is acting voluntarily and not under undue
7	influence.
8	Witness 1 Date:
9	Witness 2 Date:
10	NOTE: One witness may not be a relative (by blood, marriage, or
11	adoption) of the individual signing this request, may not be entitled to a portion
12	of the individual's estate on death, and may not own, operate, or be employed
13	at a health care facility where the person is an individual or resident. If the
14	individual is an inpatient at a health care facility, one of the witnesses shall be
15	an individual designated by the facility.
16	Sec. 13.55.070. Attending physician duties and authority. (a) The attending
17	physician shall
18	(1) make the initial determination of whether an individual has a
19	terminal disease, is capable, and has made the request for medication voluntarily;
20	(2) request that the individual demonstrate that the individual is a
21	resident of this state;
22	(3) inform the individual of the
23	(A) individual's medical diagnosis;
24	(B) individual's prognosis;
25	(C) potential risks associated with taking the medication;
26	(D) probable result of taking the medication; and
27	(E) feasible alternatives, including comfort care, hospice care,
28	and pain control;
29	(4) refer the individual to a consulting physician for medical
30	confirmation of the diagnosis and for a determination that the individual is capable and
31	acting voluntarily;

1	(5) refer the individual for counseling if appropriate under
2	AS 13.55.090;
3	(6) recommend that the qualified individual notify the qualified
4	individual's next of kin;
5	(7) counsel the qualified individual about the importance of having
6	another person present when the qualified individual takes the medication prescribed
7	under this chapter and of not taking the medication in a public place;
8	(8) inform the qualified individual that the qualified individual has an
9	opportunity to rescind the request at any time and in any manner and offer the
10	qualified individual an opportunity to rescind the request at the end of the 15-day
11	waiting period under AS 13.55.030;
12	(9) immediately before dispensing or prescribing medication under this
13	chapter, verify that the qualified individual is making an informed decision;
14	(10) fulfill the requirements of AS 13.55.130 for medical record
15	documentation;
16	(11) ensure that all appropriate steps are carried out under this chapter
17	before dispensing or prescribing medication to enable a qualified individual to end the
18	qualified individual's life under this chapter; and
19	(12) if the attending physician has a current federal Drug Enforcement
20	Administration registration number and complies with applicable regulations, dispense
21	medication directly, including ancillary medications intended to facilitate the desired
22	effect or minimize the qualified individual's discomfort, or, with the qualified
23	individual's written consent,
24	(A) contact a pharmacist and inform the pharmacist of a
25	prescription for the medication; and
26	(B) deliver the written prescription personally or by mail to the
27	pharmacist who will dispense the medication to the qualified individual, the
28	attending physician, or an agent of the qualified individual who is expressly
29	identified as an agent by the qualified individual.
30	(b) Notwithstanding any other provision of law to the contrary, the attending
31	physician may sign the qualified individual's death certificate.

1	Sec. 13.55.080. Confirmation by consulting physician. Before an individual
2	becomes a qualified individual under this chapter, a consulting physician shall
3	examine the individual and the individual's relevant medical records, confirm in
4	writing the attending physician's diagnosis that the individual is suffering from a
5	terminal disease, and verify that the individual is capable, is acting voluntarily, and
6	has made an informed decision.
7	Sec. 13.55.090. Counseling referral. If the attending physician or the
8	consulting physician determines that an individual may be suffering from a psychiatric
9	or psychological disorder or depression causing impaired judgment, either physician
10	shall refer the individual for counseling, and the attending physician may not dispense
11	or prescribe medication until the person performing the counseling determines that the
12	individual is not suffering from depression or a psychiatric or psychological disorder
13	causing impaired judgment.
14	Sec. 13.55.100. Informed decision. An attending physician may not dispense
15	or prescribe medication unless the qualified individual has made an informed decision.
16	Immediately before dispensing or prescribing medication under this chapter, the
17	attending physician shall verify that the qualified individual is making an informed
18	decision.
19	Sec. 13.55.110. Family notification. The attending physician may not deny a
20	qualified individual's request for medication if the qualified individual declines or is
21	unable to notify the qualified individual's next of kin.
22	Sec. 13.55.120. Waiting periods. An attending physician may not dispense
23	medication or write a prescription for medication for a qualified individual unless
24	more than 15 days have elapsed between the qualified individual's initial oral request
25	and the writing of the prescription and more than 48 hours have elapsed between the
26	qualified individual's written request and the writing of the prescription.
27	Sec. 13.55.130. Medical record documentation requirements. Before a
28	qualified individual receives medication under this chapter, the medical record of the
29	qualified individual must contain
30	(1) all oral requests by a qualified individual for medication under this

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chapter;

1	(2) all written requests by a qualified individual for medication under
2	this chapter;
3	(3) the attending physician's diagnosis, prognosis, and determination
4	that the individual is capable, is acting voluntarily, and has made an informed
5	decision;
6	(4) the consulting physician's diagnosis, prognosis, and verification that
7	the individual is capable, is acting voluntarily, and has made an informed decision;
8	(5) if counseling is performed, a report of the determinations made
9	during counseling and the outcome;
10	(6) the attending physician's offer to the qualified individual to rescind
11	the qualified individual's request at the time of the qualified individual's second oral
12	request under AS 13.55.030;
13	(7) a note by the attending physician indicating that all requirements
14	under this chapter have been met and indicating the steps taken to carry out the
15	request, including a statement describing the medication prescribed.
16	Sec. 13.55.140. Effect on construction of wills and contracts. A provision in
17	a will or a contract, whether written or oral, is not valid to the extent that the provision
18	requires, prohibits, imposes a condition on, or otherwise addresses whether an
19	individual may make or rescind a request for medication under this chapter.
20	Sec. 13.55.150. Immunity. (a) A person is not subject to civil or criminal
21	liability or professional disciplinary action, including disciplinary action by a licensing
22	authority, for participating in good faith compliance with this chapter, including being
23	present when a qualified individual takes the prescribed medication to end the
24	qualified individual's life under this chapter.
25	(b) A professional organization or association or health care provider may not
26	subject a person to censure, discipline, suspension, loss of license, loss of privileges,
27	loss of membership, or other penalty for participating in or refusing to participate in
28	good faith compliance with this chapter.
29	(c) A request by an individual for, or provision by an attending physician of,
30	medication in good faith compliance with this chapter does not provide the sole basis
31	for the appointment of a guardian or conservator of the individual.

1	Sec. 13.55.160. No duty to participate. A health care provider is not under a
2	duty, whether by contract, statute, or other legal requirement, to dispense medication,
3	prescribe medication, or otherwise participate in the provision of medication to a
4	qualified individual under this chapter. If a health care provider is unable or unwilling
5	to carry out a qualified individual's request under AS 13.55.030 and the qualified
6	individual transfers the qualified individual's care to another health care provider, the
7	transferring health care provider shall provide to the other health care provider, at the
8	qualified individual's request, a copy of the qualified individual's relevant medical
9	records.

Sec. 13.55.170. Prohibition against participation; sanctions. (a) Notwithstanding another provision of law to the contrary, a health care provider may prohibit another health care provider from participating in this chapter on the premises of the prohibiting health care provider if the prohibiting health care provider notifies the other health care provider of the prohibiting health care provider's policy regarding not participating in this chapter. This subsection does not prevent a health care provider from providing health care services to an individual if the health care services do not constitute participating in this chapter.

- (b) Notwithstanding AS 13.55.150 and 13.55.160, a health care provider may sanction another health care provider as follows if the sanctioning health care provider notifies the sanctioned health care provider before participating under this chapter that the sanctioning health care provider prohibits participating in this chapter:
- (1) loss of privileges, loss of membership, or other sanction provided under the bylaws, policies, or procedures of the sanctioning health care provider if the sanctioned health care provider is a member of the sanctioning health care provider's medical staff and is participating in this chapter while on the health care facility premises of the sanctioning health care provider; in this paragraph, "health care facility premises" does not include the private medical office of the sanctioned health care provider even if located on the health care facility premises of the sanctioning health care provider;
- (2) termination of lease or other contract or imposition of nonmonetary remedies provided by the lease or other contract if the sanctioned health care provider

1	is participating in this chapter while on the premises of the sanctioning health care
2	provider or on property that is owned by or under the direct control of the sanctioning
3	health care provider; in this paragraph, "remedies" does not include the loss of
4	restriction of medical staff privileges or exclusion from a provider panel; or
5	(3) termination of a contract or imposing other nonmonetary remedies
6	provided by a contract if the sanctioned health care provider is participating in this
7	chapter while acting in the course and scope of the sanctioned health care provider's
8	capacity as an employee, except as a member of the sanctioning health care provider's
9	medical staff, or independent contractor of the sanctioning health care provider; this
10	paragraph does not prevent
11	(A) a health care provider from participating in this chapter
12	while acting outside the course and scope of the health care provider's capacity
13	as an employee or independent contractor; or
14	(B) an individual from contracting with the individual's
15	attending physician or consulting physician to act outside the course and scope
16	of the physician's capacity as an employee or independent contractor of the
17	sanctioning health care provider.
18	(c) A health care provider who imposes sanctions under (b) of this section shall
19	follow all procedures that are provided under an applicable contract, the applicable
20	terms of employment, or law for imposing the sanctions.
21	(d) Suspension or termination of staff membership or privileges under (b) of
22	this section is not reportable under AS 08.64.336.
23	(e) In this section,
24	(1) "notifies" means delivers a written statement to the health care
25	provider specifically informing the health care provider before the health care
26	provider's participation in this chapter of the sanctioning health care provider's policy
27	about participation in activities covered by this chapter;
28	(2) "participating in this chapter" means performing the duties of ar

"performing the duties" does not include

attending physician under AS 13.55.070, the function of a consulting physician under

AS 13.55.080, or the counseling function under AS 13.55.090; in this paragraph,

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1	(A) making an initial determination that an individual has a
2	terminal disease and informing the individual of the medical prognosis;
3	(B) providing information about this chapter to an individual at
4	the request of the individual;
5	(C) providing an individual with a referral to another physician
6	at the request of the individual; or
7	(D) contracting with the individual's attending physician or
8	consulting physician to act outside the course and scope of the health care
9	provider's capacity as an employee or independent contractor of a sanctioning
10	health care provider.
11	Sec. 13.55.180. Criminal penalties. (a) A person commits the crime of abuse
12	of life termination process if the person, with the intent to cause the individual's death
13	or knowing that the death of the individual is substantially certain to result,
14	(1) without the authorization of the individual, falsely makes, completes, or
15	alters a request for medication or conceals or destroys a rescission of the individual's
16	request; or
17	(2) exerts undue influence on an individual to request medication for the
18	purpose of ending the individual's life or to destroy a rescission of the individual's
19	request.
20	(b) Abuse of life termination process is a class A felony and may be punished
21	as provided in AS 12.55.
22	(c) This chapter does not prevent the imposition of criminal penalties that
23	apply under another law for conduct that is inconsistent with this chapter.
24	Sec. 13.55.190. Civil penalties. This chapter does not limit liability for civil
25	damages resulting from a person's negligent conduct or intentional misconduct.
26	Sec. 13.55.200. Claims for costs incurred. A governmental entity that incurs
27	expenses that result from the termination by a qualified individual of the qualified
28	individual's life under this chapter in a public place may file a claim against the estate
29	of the individual to recover the costs and attorney fees related to enforcing the claim.
30	Sec. 13.55.210. Duties of department. (a) The department shall annually
31	review a sample of records maintained under this chapter.

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1	(b) After dispensing medication under this chapter, a health care provider shall
2	file with the department a copy of the record of dispensing the medication.
3	(c) The department shall adopt regulations under AS 44.62 (Administrative
4	Procedure Act) to facilitate the collection of information about compliance with this
5	chapter. The information collected is not a public record under AS 40.25.100, and the
6	department may not make the information available for inspection by the public.
7	(d) The department shall generate and make available to the public an annual
8	statistical report of the information collected under (c) of this section. The statistical
9	report may not disclose information that is confidential under (c) of this section, but
10	shall present the information in a manner that prevents the identification of particular
11	persons.
12	Sec. 13.55.220. Construction of chapter. (a) This chapter may not be
13	construed to authorize or require a health care provider to provide health care contrary
14	to generally accepted health care standards applicable to the health care provider.
15	(b) This chapter may not be construed to authorize a physician or another
16	person to end an individual's life by lethal injection, mercy killing, or active
17	euthanasia. An action allowed by this chapter is an affirmative defense to a criminal
18	charge of homicide, murder, manslaughter, criminally negligent homicide, suicide,
19	assisted suicide, mercy killing, or euthanasia under the law of this state.
20	Sec. 13.55.230. Insurance or annuity policies; contracts. Notwithstanding
21	AS 21.45.250 or another provision to the contrary, a person may not condition the
22	sale, procurement, issuance, rate, delivery, issuance for delivery, or other aspect of a
23	life, health, or accident insurance or annuity policy or another contract on the making
24	or rescission of a request by a qualified individual for medication under this chapter.
25	Sec. 13.55.240. Coordination with other law. A written or oral request for
26	medication under this chapter is not an advance health care directive under AS 13.52,
27	and AS 13.52 does not apply to an activity allowed by this chapter.
28	Sec. 13.55.900. Definitions. In this chapter, unless the context indicates
29	otherwise,
30	(1) "adult" means an individual who is 18 years of age or older;
31	(2) "attending physician" means the physician who has primary

1	responsibility for the care of the individual and treatment of the individual's terminal
2	disease;
3	(3) "capable" means that an individual has the ability to make and
4	communicate health care decisions to health care providers; in this paragraph,
5	"communicate" includes communication through a person familiar with the
6	individual's manner of communicating if the person is available;
7	(4) "consulting physician" means a physician who is qualified by
8	specialty or experience to make a professional diagnosis and prognosis about the
9	individual's disease;
10	(5) "counseling" means consultation as necessary between a
11	psychiatrist or psychologist and an individual to determine if the individual is capable
12	and not suffering from a psychiatric or psychological disorder or depression causing
13	impaired judgment;
14	(6) "department" means the Department of Health and Social Services;
15	(7) "health care facility" means a private, municipal, or state hospital;
16	independent diagnostic testing facility; primary care outpatient facility; skilled nursing
17	facility; kidney disease treatment center, including freestanding hemodialysis units;
18	intermediate care facility; ambulatory surgical facility; Alaska Pioneers' Home or
19	Alaska Veterans' Home administered by the department under AS 47.55; correctional
20	facility owned or administered by the state; private, municipal, or state facility
21	employing one or more public health nurses; and long-term care facility;
22	(8) "health care provider" means a person licensed, certified, or
23	otherwise authorized or permitted by the law of this state to administer health care or
24	dispense medication in the ordinary course of business or practice of a profession; in
25	this paragraph, "person" includes a health care facility;
26	(9) "informed decision" means a decision that is based on an
27	appreciation of the relevant facts and that is made after the attending physician fully
28	informs a qualified individual of the
29	(A) qualified individual's medical diagnosis;
30	(B) qualified individual's prognosis;
31	(C) potential risks associated with taking the medication to be

1	prescribed;
2	(D) probable result of taking the medication to be prescribed;
3	and
4	(E) feasible alternatives, including comfort care, hospice care,
5	and pain control;
6	(10) "medically confirmed" means that a consulting physician who has
7	examined the individual's relevant medical records has confirmed the medical opinion
8	of the attending physician;
9	(11) "medication" means medication to end a qualified individual's life
10	under this chapter;
11	(12) "physician" means a doctor of medicine or osteopathy who is
12	licensed under AS 08.64 to practice medicine or osteopathy;
13	(13) "prescription" means a prescription for medication to end a
14	qualified individual's life under this chapter;
15	(14) "qualified individual" means an individual who is qualified under
16	AS 13.55.010 to end the individual's life under this chapter;
17	(15) "request" means a request under AS 13.55.030;
18	(16) "terminal disease" means an incurable and irreversible disease
19	that has been medically confirmed and that will, within reasonable medical judgment,
20	produce death within six months;
21	(17) "undue influence" means the control of an individual by a person
22	who stands in a position of trust or confidence to exploit wrongfully the trust,
23	dependency, or fear of the individual to gain control over the decision making of the
24	individual.
25	* Sec. 4. The uncodified law of the State of Alaska is amended by adding a new section to
26	read:
27	APPLICABILITY. AS 13.55, enacted by sec. 3 of this Act, applies to a contract, will,
28	or life, health, or accident insurance or annuity policy if the contract, will, or policy is
29	delivered or issued for delivery on or after the effective date of sec. 3 of this Act.
30	* Sec. 5. The uncodified law of the State of Alaska is amended by adding a new section to
31	read:

- 1 TRANSITION: REGULATIONS. The Department of Health and Social Services may
- 2 adopt regulations authorized by AS 13.55, enacted by sec. 3 of this Act. The regulations take
- 3 effect under AS 44.62 (Administrative Procedure Act), but not before January 1, 2016.
- \* Sec. 6. Section 5 of this Act takes effect immediately under AS 01.10.070(c).
- \* Sec. 7. Except as provided in sec. 6 of this Act, this Act takes effect January 1, 2016.