

SENATE BILL No. 287

April 21, 2015, Introduced by Senators MARLEAU, COLBECK, ROBERTSON, PROOS, NOFS, BRANDENBURG, CASPERSON, O'BRIEN, EMMONS, HUNE, GREEN, PAVLOV, HILDENBRAND, BOOHER, ZORN, KNOLLENBERG, GREGORY, ROCCA and JONES and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled
"Public health code,"
(MCL 333.1101 to 333.25211) by adding sections 17019, 17519, 20187,
and 21418.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 SEC. 17019. (1) AT THE TIME A PHYSICIAN INFORMS A PATIENT OF
2 THE RESULTS OF A PRENATAL TEST THAT HAS DETECTED A LIFE-LIMITING
3 CONDITION, THE PHYSICIAN OR A QUALIFIED PERSON ASSISTING THE
4 PHYSICIAN SHALL DO ALL OF THE FOLLOWING:

5 (A) MAKE AVAILABLE TO THE PATIENT REFERRAL INFORMATION FOR
6 PERINATAL HOSPICE CARE OFFERED BY A PERINATAL HOSPICE PROGRAM
7 CERTIFIED BY THE DEPARTMENT UNDER SECTION 21418.

8 (B) IN A CASE WHERE A LIFE-LIMITING CONDITION WILL CAUSE, OR

1 HAS A REASONABLE PROBABILITY OF CAUSING, A STILLBIRTH, INFORM THE
2 PATIENT THAT THE STATE, UNDER SECTION 2834, RECOGNIZES THE DEATH OF
3 A FETUS THAT HAS COMPLETED AT LEAST 20 WEEKS OF GESTATION OR WEIGHS
4 AT LEAST 400 GRAMS WITH A CERTIFICATE OF STILLBIRTH.

5 (2) AT THE TIME A PHYSICIAN INFORMS A PATIENT OF THE RESULTS
6 OF A PRENATAL TEST THAT HAS DETECTED A PRENATALLY DIAGNOSED
7 CONDITION, THE PHYSICIAN OR A QUALIFIED PERSON ASSISTING THE
8 PHYSICIAN SHALL PROVIDE THE FOLLOWING:

9 (A) UP-TO-DATE AND SCIENTIFICALLY ACCURATE INFORMATION ON
10 HEALTH OUTCOMES, INCLUDING CLINICAL COURSE, LIFE EXPECTANCY, AND
11 DEVELOPMENT POTENTIAL FOR INDIVIDUALS WITH THE PRENATALLY DIAGNOSED
12 CONDITION.

13 (B) INFORMATION ON EARLY INTERVENTION SERVICES FOR THE
14 FUNCTIONAL DEVELOPMENT AND EDUCATION OF A CHILD BORN WITH A
15 PRENATALLY DIAGNOSED CONDITION, INCLUDING, BUT NOT LIMITED TO,
16 REFERRAL INFORMATION FOR "EARLY ON MICHIGAN".

17 (C) REFERRAL INFORMATION FOR PEER SUPPORT GROUPS INCLUDING,
18 BUT NOT LIMITED TO, SUPPORT GROUPS FOR PARENTS OF CHILDREN WITH THE
19 PRENATALLY DIAGNOSED CONDITION AND ADVOCACY ORGANIZATIONS FOR
20 INDIVIDUALS WITH THE PRENATALLY DIAGNOSED CONDITION.

21 (D) REFERRAL INFORMATION FOR ADOPTION INCLUDING ADOPTION
22 AGENCIES THAT PLACE CHILDREN WITH PRENATALLY DIAGNOSED CONDITIONS
23 AND ORGANIZATIONS THAT MAINTAIN REGISTRIES OF FAMILIES WHO WISH TO
24 ADOPT CHILDREN WITH PRENATALLY DIAGNOSED CONDITIONS.

25 (3) AS USED IN THIS SECTION:

26 (A) "LIFE-LIMITING CONDITION" MEANS A MEDICAL CONDITION
27 IDENTIFIED BY PRENATAL DIAGNOSTIC TESTING THAT WILL, WITH

1 REASONABLE CERTAINTY, RESULT IN THE DEATH OF THE CHILD EITHER
2 BEFORE BIRTH OR WITHIN 1 YEAR AFTER BIRTH.

3 (B) "PERINATAL HOSPICE CARE" MEANS THAT TERM AS DEFINED IN
4 SECTION 21418.

5 (C) "PRENATALLY DIAGNOSED CONDITION" MEANS A MEDICAL CONDITION
6 IDENTIFIED BY PRENATAL DIAGNOSTIC TESTING THAT WILL EITHER
7 TEMPORARILY OR PERMANENTLY REQUIRE MEDICAL TREATMENT OR OTHER
8 SUPPORT SERVICES AFTER BIRTH BUT WILL NOT, WITH REASONABLE
9 CERTAINTY, RESULT IN THE DEATH OF THE CHILD WITHIN 1 YEAR AFTER
10 BIRTH.

11 (D) "QUALIFIED PERSON ASSISTING THE PHYSICIAN" MEANS THAT TERM
12 AS DEFINED IN SECTION 17015.

13 SEC. 17519. A PHYSICIAN SHALL COMPLY WITH SECTION 17019.

14 SEC. 20187. A HEALTH FACILITY OR AGENCY THAT PROVIDES
15 OBSTETRIC CARE AND THAT PROVIDES SOCIAL WORK OR CHAPLAINCY SERVICES
16 IN CONJUNCTION WITH ITS HEALTH SERVICES SHALL PROVIDE ITS SOCIAL
17 WORKERS AND CHAPLAINS, AS APPROPRIATE, WITH INFORMATION ABOUT
18 PERINATAL HOSPICE PROGRAMS CERTIFIED BY THE DEPARTMENT UNDER
19 SECTION 21418.

20 SEC. 21418. (1) THE DEPARTMENT SHALL DO ALL OF THE FOLLOWING:

21 (A) ESTABLISH CRITERIA FOR CERTIFYING AS A PERINATAL HOSPICE
22 PROGRAM A HOSPICE THAT PROVIDES PERINATAL HOSPICE CARE. IN
23 ESTABLISHING CRITERIA FOR THE CERTIFICATION OF A PERINATAL HOSPICE
24 PROGRAM, THE DEPARTMENT MAY REFERENCE EXISTING CRITERIA ESTABLISHED
25 BY RECOGNIZED MEDICAL AUTHORITIES OR ASSOCIATIONS THAT SPECIALIZE
26 IN HOSPICE CARE.

27 (B) ACCEPT AND REVIEW APPLICATIONS FOR CERTIFICATION FROM A

1 HOSPICE SEEKING CERTIFICATION AS A PERINATAL HOSPICE PROGRAM. IF
2 THE DEPARTMENT REJECTS AN APPLICATION FOR CERTIFICATION OF A
3 PERINATAL HOSPICE PROGRAM, THE DEPARTMENT SHALL PROVIDE A WRITTEN
4 EXPLANATION AS TO THE REASON THE APPLICATION FOR CERTIFICATION WAS
5 REJECTED.

6 (C) POST ON THIS STATE'S WEBSITE, IN A PRINTABLE FORMAT, A
7 LIST OF HOSPICES IN THIS STATE THAT HAVE BEEN CERTIFIED BY THE
8 DEPARTMENT FOR PROVIDING PERINATAL HOSPICE CARE.

9 (2) THE DEPARTMENT MAY CREATE, OPERATE, AND MAINTAIN A
10 PRENATAL DIAGNOSIS CLEARINGHOUSE THAT CONTAINS INFORMATION
11 REGARDING PRENATALLY DIAGNOSED MEDICAL CONDITIONS. THE
12 CLEARINGHOUSE SHALL BE CREATED, OPERATED, AND MAINTAINED AS
13 PROVIDED IN THIS SECTION.

14 (3) THE DEPARTMENT MAY, BY CONTRACT, DELEGATE THE CREATION,
15 OPERATION, AND MAINTENANCE OF THE CLEARINGHOUSE TO AN ORGANIZATION
16 OR INSTITUTION OF HIGHER LEARNING IN THIS STATE CONTINGENT ON THE
17 DELEGATE INCURRING ALL OF THE COST RELATED TO DESIGNING,
18 MAINTAINING, AND OPERATING THE CLEARINGHOUSE. A CONTRACTED DELEGATE
19 SHALL DO ALL OF THE FOLLOWING:

20 (A) CREATE, AND UPDATE AS NEEDED, A LIST OF MEDICAL CONDITIONS
21 THAT CAN AFFECT A DEVELOPING UNBORN CHILD AND CAN BE DETECTED BY
22 PRENATAL DIAGNOSTIC TESTS.

23 (B) PROVIDE THE LIST DESCRIBED IN SUBDIVISION (A) TO THE
24 DEPARTMENT AND TO A PROSPECTIVE QUALIFIED CONTRIBUTOR UPON REQUEST.

25 (C) DEVELOP CRITERIA FOR APPROVING A QUALIFIED CONTRIBUTOR WHO
26 REQUESTS AUTHORIZATION TO CONTRIBUTE INFORMATION FOR POSTING ON THE
27 CLEARINGHOUSE AND PROVIDE NOTICE OF APPROVAL OR DENIAL OF

1 AUTHORIZATION TO AN ORGANIZATION OR INDIVIDUAL WHO REQUESTS
2 AUTHORIZATION AS A QUALIFIED CONTRIBUTOR IN ACCORDANCE WITH THE
3 ESTABLISHED CRITERIA.

4 (D) FOR EACH MEDICAL CONDITION IDENTIFIED IN SUBDIVISION (A),
5 PROVIDE DIRECTLY, OR SOLICIT FROM A QUALIFIED CONTRIBUTOR,
6 INFORMATION TO BE PLACED ON THE CLEARINGHOUSE THAT DESCRIBES THE
7 CONDITION, KNOWN TREATMENT OPTIONS OR SUPPORTIVE SERVICES, AND
8 INFORMATION ON GOVERNMENT AGENCIES OR PROGRAMS AND PRIVATE
9 ORGANIZATIONS THAT PROVIDE SERVICE OR SUPPORT TO INDIVIDUALS WITH
10 THAT CONDITION OR TO THEIR CAREGIVERS.

11 (E) NOT LESS THAN ANNUALLY, REVIEW THE INFORMATION POSTED ON
12 THE CLEARINGHOUSE TO CONFIRM THAT REFERRAL INFORMATION IS STILL
13 ACCURATE WITH REGARD TO SUPPORT ORGANIZATIONS AND LINKS TO OTHER
14 WEBSITES.

15 (4) AS USED IN THIS SECTION:

16 (A) "LICENSED MEDICAL PROFESSIONAL" MEANS A PERSON LICENSED OR
17 OTHERWISE AUTHORIZED TO PRACTICE MEDICINE UNDER ARTICLE 15.

18 (B) "LIFE-LIMITING CONDITION" MEANS THAT TERM AS DEFINED IN
19 SECTION 17019.

20 (C) "PRENATAL DIAGNOSIS CLEARINGHOUSE" OR "CLEARINGHOUSE"
21 MEANS AN INTERNET WEBSITE CONTAINING INFORMATION REGARDING
22 PRENATALLY DIAGNOSED MEDICAL CONDITIONS AS PROVIDED IN THIS ACT.

23 (D) "PERINATAL HOSPICE CARE" MEANS COMPREHENSIVE MEDICAL AND
24 SUPPORTIVE CARE TO A PREGNANT WOMAN AND HER FAMILY THAT INCLUDES
25 SUPPORT FROM THE TIME OF DIAGNOSIS OF A LIFE-LIMITING CONDITION
26 THROUGH THE TIME OF BIRTH AND DEATH OF THE CHILD. PERINATAL HOSPICE
27 CARE INCLUDES, BUT IS NOT LIMITED TO, CARE BY MATERNAL-FETAL

1 MEDICAL SPECIALISTS, OBSTETRICIANS, NEONATOLOGISTS, ANESTHESIA
2 SPECIALISTS, CLERGY, SOCIAL WORKERS, AND SPECIALTY NURSES.

3 (E) "QUALIFIED CONTRIBUTOR" MEANS A LICENSED MEDICAL
4 PROFESSIONAL, AN ACADEMIC FACULTY MEMBER, OTHER INDIVIDUAL WITH
5 RECOGNIZED KNOWLEDGE OR EXPERTISE REGARDING A PRENATALLY
6 DIAGNOSABLE MEDICAL CONDITION, OR AN ORGANIZATION DEDICATED TO
7 RESEARCH, TREATMENT, OR SUPPORT FOR INDIVIDUALS WITH A SPECIFIC
8 MEDICAL CONDITION.

9 Enacting section 1. This amendatory act takes effect 90 days
10 after the date it is enacted into law.