HOUSE BILL No. 2150

By Committee on Vision 2020

1-28

AN ACT enacting the Kansas death with dignity act.

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Be it enacted by the Legislature of the State of Kansas:

Section 1. Sections 1 through 18, and amendments thereto, shall be known and may be cited as the Kansas death with dignity act.

- Sec. 2. As used in the Kansas death with dignity act:
- (a) "Adult" means a person who is 18 years of age or older.
- (b) "Adult care home" means the same as in K.S.A. 39-923, and amendments thereto.
- (c) "Attending physician" means the physician who has primary responsibility for the care of the patient and treatment of the patient's terminal disease.
- (d) "Capable" means that in the opinion of a court or in the opinion of the patient's attending physician, consulting physician or psychologist, a patient has the ability to make and communicate any health care decision to a health care provider, including communication through persons familiar with the patient's manner of communicating if those persons are available.
- (e) "Consulting physician" means a physician who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding the patient's disease.
- (f) "Counseling" means one or more consultations as necessary between a licensed psychologist and a patient for the purpose of determining that the patient is capable and not suffering from a psychiatric or psychological disorder or depression causing impaired judgment.
- (g) "Health care facility" means any licensed medical care facility, certified health maintenance organization, licensed mental health center or mental health clinic, licensed psychiatric hospital or other facility or office where services of a health care provider are provided directly to patients.
- (h) "Health care provider" means any person licensed or otherwise authorized by law to provide health care services in this state or a professional corporation organized pursuant to the professional corporation law of Kansas by persons who are authorized by law to form such corporation and who are health care providers as defined by this subsection, or an officer, employee or agent thereof acting in the course and scope of employment or agency.

(i) "Informed decision" means a decision by a qualified patient, to request and obtain a prescription to end such qualified patient's life in a humane and dignified manner, that is based on an appreciation of the relevant facts and after being fully informed by the attending physician of the:

- (1) Patient's medical diagnosis;
- (2) patient's prognosis;

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- (3) potential risks associated with taking the medication to be prescribed;
 - (4) probable result of taking the medication to be prescribed; and
- (5) any feasible alternative, including, but not limited to, hospice care and pain control.
- (j) "Medically confirmed" means the medical opinion of the attending physician has been confirmed by a consulting physician who has examined the patient and the patient's relevant medical records.
 - (k) "Patient" means a person who is under the care of a physician.
- (l) "Physician" means a person licensed to practice medicine and surgery in this state.
- (m) "Qualified patient" means a capable adult who is a resident of Kansas and has satisfied the requirements of the Kansas death with dignity act in order to obtain a prescription for medication to end such patient's life in a humane and dignified manner.
- (n) "Terminal disease" means an incurable and irreversible disease that has been medically confirmed and will, within reasonable medical judgment, produce death within six months.
- Sec. 3. (a) An adult who is capable, is a resident of Kansas and has been determined by such adult's attending physician and consulting physician to be suffering from a terminal disease, and who has voluntarily expressed such adult's wish to die, may make a written request for medication for the purpose of ending such adult's life in a humane and dignified manner in accordance with the provisions of the Kansas death with dignity act.
- (b) No person shall qualify under the provisions of the Kansas death with dignity act solely because of age or disability.
- Sec. 4. (a) A valid request for medication under the Kansas death with dignity act shall be in substantially the form described in section 18, and amendments thereto, signed and dated by the patient and witnessed by at least two persons who, in the presence of the patient, attest that to the best of their knowledge and belief such patient is capable, acting voluntarily and is not being coerced to sign the request.
 - (b) One of the witnesses shall be a person who is not:
 - (1) A relative of the patient by blood, marriage or adoption;
- (2) a person who, at the time the request is signed, would be entitled

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to any portion of the estate of the qualified patient upon death under any will or by operation of law; or

- (3) an owner, operator or employee of any health care facility where the qualified patient is receiving medical treatment or is a resident.
- (c) The patient's attending physician at the time the request is signed shall not be a witness.
- (d) If the patient is a patient in an adult care home at the time the written request is made, one of the witnesses shall be an individual designated by such adult care home and having the qualifications established by the Kansas department for aging and disability services through rules and regulations.
 - Sec. 5. (a) The attending physician shall:
- (1) Make the initial determination of whether a patient has a terminal disease, is capable and has made the request voluntarily;
- (2) request that the patient demonstrate Kansas residency pursuant to section 9, and amendments thereto;
- (3) inform the patient of the following information, to ensure that the patient is making an informed decision:
 - (A) The patient's medical diagnosis:
 - (B) the patient's prognosis;
- 21 (C) any potential risks associated with taking the medication to be 22 prescribed; 23
 - (D) the probable result of taking the medication to be prescribed; and
 - (E) any feasible alternative, including, but not limited to, hospice care and pain control;
 - (4) Refer the patient to a consulting physician for medical confirmation of the diagnosis and for a determination that the patient is capable and acting voluntarily;
 - (5) refer the patient for counseling, if appropriate, pursuant to section 6, and amendments thereto;
 - (6) recommend that the patient notify next of kin;
 - (7) counsel the patient about the importance of having another person present when the patient takes the medication prescribed pursuant to the Kansas death with dignity act and of not taking the medication in a public place:
 - (8) inform the patient that such patient has an opportunity to rescind the request at any time and in any manner, and offer the patient an opportunity to rescind at the end of the 15-day waiting period pursuant to section 7, and amendments thereto;
 - (9) verify, immediately prior to writing the prescription for medication under the Kansas death with dignity act that the patient is making an informed decision;
 - (10) fulfill the medical record documentation requirements of section

8, and amendments thereto;

- (11) ensure that all appropriate steps are carried out in accordance with the Kansas death with dignity act prior to writing a prescription for medication to enable a qualified patient to end such qualified patient's life in a humane and dignified manner; and
 - (12) with the patient's written consent:
- (A) Contact a licensed pharmacist and inform such licensed pharmacist of the prescription; and
- (B) deliver the written prescription personally or by mail to the licensed pharmacist, who will dispense the medications to either the patient or an expressly identified agent of the patient.
- (b) Notwithstanding any other provision of law, the attending physician may sign the patient's death certificate.
- Sec. 6. (a) Before a patient is qualified under the Kansas death with dignity act, a consulting physician shall examine the patient and such patient's relevant medical records and confirm, in writing, the attending physician's diagnosis that the patient is suffering from a terminal disease and verify that the patient is capable, is acting voluntarily and has made an informed decision.
- (b) If, in the opinion of the attending physician or the consulting physician, a patient may be suffering from a psychiatric or psychological disorder or depression causing impaired judgment, either physician shall refer the patient for counseling. No medication to end a patient's life in a humane and dignified manner shall be prescribed until the person performing the counseling determines that the patient is not suffering from a psychiatric or psychological disorder or depression causing impaired judgment.
- (c) No patient shall receive a prescription for medication to end such patient's life in a humane and dignified manner unless such patient has made an informed decision as defined in section 2, and amendments thereto. Immediately prior to writing a prescription for medication under the Kansas death with dignity act, the attending physician shall verify that the patient is making an informed decision.
- (d) The attending physician shall recommend that the patient notify the next of kin regarding such patient's request for medication pursuant to the Kansas death with dignity act. A patient who declines or is unable to notify next of kin shall not have such patient's request denied for that reason
- Sec. 7. (a) In order for a qualified patient to receive a prescription for medication to end such qualified patient's life in a humane and dignified manner, the qualified patient shall have made both an oral and written request, and reiterate the oral request to such qualified patient's attending physician no less than 15 days after making the initial oral request. At the

 time the qualified patient makes such qualified patient's second oral request, the attending physician shall offer the qualified patient an opportunity to rescind the request.

- (b) A qualified patient may rescind such qualified patient's request at any time and in any manner without regard to such qualified patient's mental state. No prescription for medication under the Kansas death with dignity act may be written without the attending physician offering the qualified patient an opportunity to rescind the request.
- (c) No less than 15 days shall elapse between the qualified patient's initial oral request and the writing of a prescription under the Kansas death with dignity act. No less than 48 hours shall elapse between the qualified patient's written request and the writing of a prescription under the Kansas death with dignity act.
- Sec. 8. The following shall be documented or filed in the patient's medical record:
- (a) All oral requests by a patient for medication to end such patient's life in a humane and dignified manner;
- (b) all written requests by a patient for medication to end such patient's life in a humane and dignified manner;
- (c) the attending physician's diagnosis and prognosis, determination that the patient is capable, acting voluntarily and has made an informed decision:
- (d) the consulting physician's diagnosis and prognosis, and verification that the patient is capable, acting voluntarily and has made an informed decision;
- (e) a report of the outcome and determinations made during counseling, if performed;
- (f) the attending physician's offer to the patient to rescind such patient's request at the time of the patient's second oral request pursuant to section 7, and amendments thereto; and
- (g) a note by the attending physician indicating that all requirements under the Kansas death with dignity act have been met and indicating the steps taken to carry out the request, including a notation of the medication prescribed.
- Sec. 9. Only requests made by Kansas residents under the Kansas death with dignity act shall be granted. Factors demonstrating Kansas residency include, but are not limited to:
- 38 (a) Possession of a current Kansas driver's license or identification 39 card;
 - (b) registration to vote in Kansas;
 - (c) evidence that the person owns or leases property in Kansas; or
 - (d) filing of a Kansas tax return for the most recent tax year.
 - Sec. 10. (a) (1) The Kansas department for health and environment

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 shall annually review a sample of records maintained pursuant to the Kansas death with dignity act.

- (2) The department shall require any health care provider upon dispensing medication pursuant to the Kansas death with dignity act to file a copy of the dispensing record with the department.
- (b) The department shall adopt rules and regulations to facilitate the collection of information regarding compliance with the Kansas death with dignity act. Except as otherwise required by law, the information collected shall not be a public record and may not be made available for inspection by the public.
- (c) The department shall generate and make available to the public an annual statistical report of information collected under subsection (b).
- Sec. 11. (a) No provision in a contract, will or other agreement, whether written or oral, to the extent the provision would affect whether a person may make or rescind a request for medication to end such person's life in a humane and dignified manner, shall be valid.
- (b) No obligation owing under any currently existing contract shall be conditioned or affected by the making or rescinding of a request by a person for medication to end such person's life in a humane and dignified manner.
- Sec. 12. The sale, procurement or issuance of any life, health or accident insurance or annuity policy or the rate charged for any policy shall not be conditioned upon or affected by the making or rescinding of a request by a person for medication to end such person's life in a humane and dignified manner.
- Sec. 13. Nothing in the Kansas death with dignity act shall be construed to authorize a physician or any other person to end a patient's life by lethal injection, mercy killing or active euthanasia. Actions taken in accordance with the Kansas death with dignity act shall not constitute the commission of a crime under the Kansas criminal code, K.S.A. 2014 Supp. 21-5101 et seq., and amendments thereto.
- Sec. 14. Except as provided in section 15, and amendments thereto: (a) (1) No person shall be subject to civil or criminal liability or professional disciplinary action for participating in good faith compliance with the provisions of the Kansas death with dignity act, which includes being present when a qualified patient takes the prescribed medication to end such patient's life in a humane and dignified manner.
- (2) No professional organization or association, or health care provider may subject a person to censure, discipline, suspension, loss of license, loss of privileges, loss of membership or other penalty for participating or refusing to participate in good faith compliance with the provisions of the Kansas death with dignity act.
 - (3) No request by a patient for medication from an attending

physician in good faith compliance with the provisions of the Kansas death with dignity act shall constitute neglect for any purpose of law or provide the sole basis for the appointment of a guardian or conservator.

- (4) No health care provider shall be under any duty, whether by contract, by statute or by any other legal requirement to participate in the provision to a qualified patient of medication to end such qualified patient's life in a humane and dignified manner. If a health care provider is unable or unwilling to carry out a patient's request under the Kansas death with dignity act and the patient transfers such patient's care to a new health care provider, the prior health care provider shall transfer, upon request, a copy of the patient's relevant medical records to the new health care provider.
- (b) Notwithstanding any other provision of law, a health care provider may prohibit another health care provider from participating under the provisions of the Kansas death with dignity act on the premises of the prohibiting provider if the prohibiting provider has notified the health care provider of the prohibiting provider's policy regarding participating under the Kansas death with dignity act. Nothing in this section prevents a health care provider from providing health care services to a patient that does not constitute participation under the provisions of the Kansas death with dignity act.
- (c) Notwithstanding the provisions of subsection (a), a health care provider may subject another health care provider to the sanctions stated in this section if the sanctioning health care provider has notified the sanctioned provider prior to participation under the Kansas death with dignity act that it prohibits participation under the Kansas death with dignity act. Such sanctions may include:
- (1) Loss of privileges, loss of membership or other sanction provided pursuant to the medical staff bylaws, policies and procedures of the sanctioning health care provider if the sanctioned provider is a member of the sanctioning provider's medical staff and participates under the provisions of the Kansas death with dignity act while on the premises of the sanctioning health care provider, but not including the private medical office of a physician or other health care provider;
- (2) termination of lease or other property contract or other nonmonetary remedies provided by lease contract, not including loss or restriction of medical staff privileges or exclusion from a provider panel, if the sanctioned provider participates under the provisions of the Kansas death with dignity act while on the premises of the sanctioning health care provider or on property that is owned by or under the direct control of the sanctioning health care provider; or
- (3) termination of contract or other non-monetary remedies provided by contract if the sanctioned provider participates under the provisions of

the Kansas death with dignity act while acting in the course and scope of the sanctioned provider's capacity as an employee or independent contractor of the sanctioning health care provider. Nothing in this section shall be construed to prevent:

- (A) A health care provider from participating under the provisions of the Kansas death with dignity act while acting outside the course and scope of the provider's capacity as an employee or independent contractor; or
- (B) a patient from contracting with such patient's attending physician and consulting physician to act outside the course and scope of the provider's capacity as an employee or independent contractor of the sanctioning health care provider.
- (d) A health care provider that imposes sanctions pursuant to subsection (b) must follow all due process and other procedures the sanctioning health care provider may have that are related to the imposition of sanctions on another health care provider.
 - (e) For purposes of this section:
- (1) "Notify" means a separate statement in writing to the health care provider specifically informing the health care provider prior to the provider's participation under the Kansas death with dignity act of the sanctioning health care provider's policy about participation in activities covered by the Kansas death with dignity act.
- (2) "Participate under the provisions of the Kansas death with dignity act" means to perform the duties of an attending physician pursuant to section 5, and amendments thereto, and the counseling or consulting physician functions pursuant to section 6, and amendments thereto. "Participate under the provisions of the Kansas death with dignity act" does not include:
- (A) Making an initial determination that a patient has a terminal disease and informing the patient of the medical prognosis;
- (B) providing information about the Kansas death with dignity act to a patient upon the request of the patient;
- (C) providing a patient, upon the request of the patient, with a referral to another physician; or
- (D) a patient contracting with such patient's attending physician and consulting physician to act outside of the course and scope of the provider's capacity as an employee or independent contractor of the sanctioning health care provider.
- (f) Any action taken by a health care provider pursuant to the Kansas death with dignity act shall not be the sole basis for a report of unprofessional conduct. No provision of the Kansas death with dignity act shall be construed to allow a lower standard of care for any patient seeking to end such patient's life pursuant to the Kansas death with dignity act.

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- Sec. 15. (a) Any person who, without authorization of the patient, knowingly alters or forges a request for medication or conceals or destroys a rescission of such request with the intent or effect of causing the patient's death shall be guilty of a severity level 3, person felony.
- (b) A person who knowingly coerces or exerts undue influence on a patient to request medication for the purpose of ending the patient's life, or to destroy a rescission of such a request, shall be guilty of a severity level 3, person felony.
- (c) Nothing in the Kansas death with dignity act limits further liability for civil damages resulting from other negligent conduct or intentional misconduct by any person.
- (d) The penalties in the Kansas death with dignity act do not preclude criminal penalties applicable under other law for conduct which is inconsistent with the provisions of the Kansas death with dignity act.
- Sec. 16. Any governmental entity that incurs costs resulting from a person terminating such person's life pursuant to the provisions of the Kansas death with dignity act in a public place shall have a claim against the estate of such person to recover such costs and reasonable attorney fees related to enforcing the claim.
- Sec. 17. Any section of the Kansas death with dignity act being held invalid as to any person or circumstance shall not affect the application of any other section of the Kansas death with dignity act which can be given full effect without the invalid section or application.
- Sec. 18. A request for medication as authorized by the Kansas death with dignity act shall be in substantially the following form:

REQUEST FOR MEDICATION TO END MY LIFE IN A HUMANE AND DIGNIFIED MANNER

I. am an adult of sound

29	mind.
30	I am suffering from, which
31	my attending physician has determined is a terminal disease and which has
32	been medically confirmed by a consulting physician.
33	I have been fully informed of my diagnosis prognosis the nature of

I have been fully informed of my diagnosis, prognosis, the nature of medication to be prescribed and potential associated risks, the expected result, and the feasible alternatives, including comfort care, hospice care and pain control.

I request that my attending physician prescribe medication that will end my life in a humane and dignified manner.

39	INITIAL ONE:
40	I have informed my family of my decision and taken their
41	opinions into consideration.
42	I have decided not to inform my family of my decision.
43	I have no family to inform of my decision.

I understand that I have the right to rescind this request at any time.

Lunderstand the full import of this request and I expect to die wh

I understand the full import of this request and I expect to die when I take the medication to be prescribed. I further understand that although most deaths occur within three hours, my death may take longer and my physician has counseled me about this possibility.

I make this request voluntarily and without reservation, and I accept full moral responsibility for my actions.

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Signed:				
Dated:				
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We declare that the person signing this request:

- (a) Is personally known to us or has provided proof of identity;
- (b) Signed this request in our presence;
- (c) Appears to be of sound mind and not under duress, fraud or undue influence:
 - (d) Is not a patient for whom either of us is attending physician.

Witness 1/Date Witness 2/Date

NOTE: One witness shall not be a relative (by blood, marriage or adoption) of the person signing this request, shall not be entitled to any portion of the person's estate upon death and shall not own, operate or be employed at a health care facility where the person is a patient or resident. If the patient is an inpatient at a health care facility, one of the witnesses shall be an individual designated by the facility.

Sec. 19. This act shall take effect and be in force from and after its publication in the statute book.