## **HOUSE BILL No. 1190**

### DIGEST OF INTRODUCED BILL

**Citations Affected:** IC 16-18-2; IC 16-21-11.

**Synopsis:** Treatment of miscarried remains. Provides that a parent of a fetus miscarried at a health care facility may determine the final disposition of the remains of the miscarried fetus. Requires a health care facility to provide certain information to a parent of a miscarried fetus.

Effective: July 1, 2014.

# Slager

January 14, 2014, read first time and referred to Committee on Public Health.



2014

#### Second Regular Session 118th General Assembly (2014)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in this style type, and deletions will appear in this style type.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or *this style type* reconciles conflicts between statutes enacted by the 2013 Regular Session and 2013 First Regular Technical Session of the General Assembly.

### **HOUSE BILL No. 1190**

A BILL FOR AN ACT to amend the Indiana Code concerning health.

Be it enacted by the General Assembly of the State of Indiana:

SECTION 1. IC 16-18-2-161, AS AMENDED BY P.L.42-2011,

2	SECTION 36, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3	JULY 1, 2014]: Sec. 161. (a) "Health care facility" includes:
4	(1) hospitals licensed under IC 16-21-2, private mental health
5	institutions licensed under IC 12-25, and tuberculosis hospitals
6	established under IC 16-11-1 (before its repeal);
7	(2) health facilities licensed under IC 16-28; and
8	(3) rehabilitation facilities and kidney disease treatment centers.
9	(b) "Health care facility", for purposes of IC 16-21-11, has the
0	meaning set forth in IC 16-21-11-1.
1	(b) (c) "Health care facility", for purposes of IC 16-28-13, has the
2	meaning set forth in IC 16-28-13-0.5.
3	SECTION 2. IC 16-18-2-237.1 IS ADDED TO THE INDIANA
4	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS
5	[EFFECTIVE JULY 1, 2014]: Sec. 237.1. "Miscarried fetus", for
6	purposes of IC 16-21-11, has the meaning set forth in



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1	IC 16-21-11-2.
2	SECTION 3. IC 16-21-11 IS ADDED TO THE INDIANA CODE
3	AS A <b>NEW</b> CHAPTER TO READ AS FOLLOWS [EFFECTIVE
4	JULY 1, 2014]:
5	Chapter 11. Treatment of Miscarried Remains
6	Sec. 1. As used in this chapter, "health care facility" means any
7	of the following:
8	(1) A hospital.
9	(2) A birthing center.
10	(3) Any other medical facility.
11	Sec. 2. As used in this chapter, "miscarried fetus" means a fetus
12	who has died from a spontaneous or accidental death before
13	expulsion or extraction from the fetus's mother, irrespective of the
14	duration of the pregnancy.
15	Sec. 3. Subject to section 4 of this chapter, a parent of a
16	miscarried fetus may determine the final disposition of the remains
17	of the miscarried fetus.
18	Sec. 4. (a) Not more than twenty-four (24) hours after a woman
19	has miscarried her fetus at a health care facility, the health care
20	facility shall:
21	(1) disclose to a parent of the miscarried fetus, both orally and
22	in writing, the parent's right to determine the final disposition
23	of the remains of the fetus;
24	(2) provide a parent of the miscarried fetus with writter
25	information concerning the available options for disposition
26	of the fetus; and
27	(3) inform the parents of the miscarried fetus of counseling
28	that may be available concerning the death of the fetus.
29	(b) A parent of a miscarried fetus shall inform the health care
30	facility in writing of the parent's decision for final disposition of
31	the fetus not more than forty-eight (48) hours after receiving the
32	information required in subsection (a).
33	Sec. 5. If a parent chooses a means of final disposition other
34	than the means of final disposition that is usual and customary for

the health care facility, the parent is responsible for the costs

related to the final disposition of the fetus.



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