

HOUSE BILL No. 1255

DIGEST OF INTRODUCED BILL

Citations Affected: IC 16-36; IC 30-5-5-17.

Synopsis: Living wills. Removes language requiring the use of certain forms when appointing a health care representative. Requires the declaration of a living will to conform with certain requirements. Removes language requiring the use of certain forms when issuing a living will declaration. Makes conforming amendments.

Effective: July 1, 2018.

Hatfield

January 11, 2018, read first time and referred to Committee on Judiciary.



Second Regular Session of the 120th General Assembly (2018)

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 2017 Regular Session of the General Assembly.

HOUSE BILL No. 1255

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

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

1 SECTION 1. IC 16-36-1-14 IS AMENDED TO READ AS
2 FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 14. (a) The health care
3 consent provisions under IC 30-5 are incorporated by reference into
4 this chapter to the extent the provisions under IC 30-5 do not conflict
5 with explicit requirements under this chapter.

6 (b) With respect to the written appointment of a health care
7 representative under section 7 of this chapter, whenever the
8 appointment authorizes health care to be withdrawn or withheld from
9 an individual with a terminal condition (as defined in IC 16-36-4-5),
10 the language in IC 30-5-5-17 ~~must or similar language may~~ be
11 included in the appointment. ~~in substantially the same form.~~

12 SECTION 2. IC 16-36-4-9 IS AMENDED TO READ AS
13 FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 9. A declaration ~~must~~
14 **may** be ~~substantially in similar to~~ the form set forth in either section
15 10 or 11 of this chapter, ~~but and~~ the declaration may include
16 additional, specific directions. **A declaration described by this**
17 **chapter must conform with the requirements of section 8(b) of this**



1 **chapter.** The invalidity of any additional, specific directions does not
2 affect the validity of the declaration.

3 SECTION 3. IC 30-5-5-17 IS AMENDED TO READ AS
4 FOLLOWS [EFFECTIVE JULY 1, 2018]: Sec. 17. (a) If the attorney
5 in fact has the authority to consent to or refuse health care under
6 section 16(2) of this chapter, the attorney in fact may be empowered to
7 ask in the name of the principal for health care to be withdrawn or
8 withheld when it is not beneficial or when any benefit is outweighed by
9 the demands of the treatment and death may result. To empower the
10 attorney in fact to act under this section, the following language **must**
11 **or similar language may** be included in an appointment under
12 IC 16-36-1: ~~in substantially the same form set forth below:~~

13 I authorize my health care representative to make decisions in my
14 best interest concerning withdrawal or withholding of health care.

15 If at any time based on my previously expressed preferences and
16 the diagnosis and prognosis my health care representative is
17 satisfied that certain health care is not or would not be beneficial
18 or that such health care is or would be excessively burdensome,
19 then my health care representative may express my will that such
20 health care be withheld or withdrawn and may consent on my
21 behalf that any or all health care be discontinued or not instituted,
22 even if death may result.

23 My health care representative must try to discuss this decision
24 with me. However, if I am unable to communicate, my health care
25 representative may make such a decision for me, after
26 consultation with my physician or physicians and other relevant
27 health care givers. To the extent appropriate, my health care
28 representative may also discuss this decision with my family and
29 others to the extent they are available.

30 (b) Nothing in this section may be construed to authorize
31 euthanasia.

