

**SENATE
STATE OF MINNESOTA
NINETY-SECOND SESSION**

S.F. No. 4333

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DATE
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OFFICIAL STATUS
Introduction and first reading
Referred to Health and Human Services Finance and Policy

1.1 A bill for an act
1.2 relating to health care; establishing procedures to follow if a physician refuses to
1.3 comply with a patient's health care directive; proposing coding for new law in
1.4 Minnesota Statutes, chapter 145C.

1.5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:

1.6 Section 1. [145C.18] FAILURE TO COMPLY WITH A HEALTH CARE
1.7 DIRECTIVE.

1.8 (a) If an attending physician refuses to comply with a patient's health care directive or
1.9 a health care or treatment decision made by or on behalf of a patient, requesting the provision
1.10 of life-sustaining care or treatment, including artificially administered nutrition and hydration,
1.11 the physician's refusal shall be reviewed by the ethics or medical committee of the health
1.12 care facility in which the patient is admitted. The committee shall affirm the physician's
1.13 decision only if the provision of such care or treatment will, to a reasonable medical certainty:

1.14 (1) cause the patient substantial and intractable physical pain, that will continue for an
1.15 indefinite period of time, and there are no reasonable grounds to believe the patient would
1.16 wish such painful care or treatment to commence or continue;

1.17 (2) cause the patient life-threatening ancillary complications and no care or treatment
1.18 less likely to cause such complications is available; or

1.19 (3) be altogether useless in prolonging the patient's life since death from an underlying
1.20 terminal condition is inevitable and imminent.

1.21 In the case of artificially administered nutrition and hydration, such care is altogether useless
1.22 in prolonging life if the patient is incurably unable to assimilate nutrients or fluids or is

2.1 likely to die from an underlying terminal condition before death from starvation or
2.2 dehydration occurs. The committee may affirm the physician's decision to withhold
2.3 life-sustaining care or treatment from a patient that cannot be provided without denying the
2.4 same care or treatment to another patient and may not affirm a decision to withhold or
2.5 withdraw such care or treatment if the patient is pregnant. The patient shall be given all
2.6 necessary life-sustaining care and treatment during the review process, including the provision
2.7 of artificially administered nutrition and hydration, along with care and treatment to enhance
2.8 pain relief and minimize suffering, unless the provision of any such care or treatment poses
2.9 an immediate threat to the life of the patient.

2.10 (b) If the patient's health care directive or a health care or treatment decision made by
2.11 or on behalf of the patient is requesting life-sustaining care or treatment that the attending
2.12 physician has decided and the ethics or medical committee has affirmed is medically
2.13 inappropriate, the patient shall be given all necessary life-sustaining care and treatment
2.14 pending transfer to another physician or health care facility willing to comply with such
2.15 directive or care or treatment decision, including the provision of artificially administered
2.16 nutrition and hydration, along with care and treatment to enhance pain relief and minimize
2.17 suffering, unless the provision of any such care or treatment poses an immediate threat to
2.18 the life of the patient. Except for the provision of artificially administered nutrition and
2.19 hydration, along with care and treatment to enhance pain relief and minimize suffering, the
2.20 attending physician, any other physician responsible for the care of the patient, and the
2.21 health care facility are not obligated to provide life-sustaining care or treatment after the
2.22 21st calendar day after the written decision of the committee is provided to the patient or
2.23 the patient's surrogate unless ordered to do so under paragraph (c). If the committee does
2.24 not affirm the attending physician's refusal to provide life-sustaining care or treatment, all
2.25 necessary care and treatment, including the provision of artificially administered nutrition
2.26 and hydration, along with care and treatment to enhance pain relief and minimize suffering,
2.27 unless the provision of any such care or treatment poses an immediate threat to the life of
2.28 the patient, shall be provided to the patient until the transfer of the patient to another physician
2.29 within the health care facility willing to comply with the patient's health care directive or
2.30 health care or treatment decision is completed.

2.31 (c) The patient or the patient's surrogate may submit a motion for the extension of time
2.32 to affect a transfer under paragraph (b) in a district court in this state with jurisdiction over
2.33 the matter. In such proceeding, the district court may extend the time period provided under
2.34 paragraph (b). If the court finds, by a preponderance of the evidence, that the ethics or
2.35 medical committee of the health facility affirmed the attending physician's refusal to comply

3.1 with the patient's health care directive or a health care or treatment decision made by or on
3.2 behalf of the patient, requesting the provision of life-sustaining care or treatment, without
3.3 satisfying the requirements under paragraph (a), the district court shall extend the time
3.4 period for providing all necessary life sustaining care and treatment to the patient until the
3.5 transfer of the patient to another physician or health care facility willing to comply with the
3.6 health care directive or care or treatment decision is completed.