

Senate Fiscal Agency
P. O. Box 30036
Lansing, Michigan 48909-7536

SFA**BILL ANALYSIS**

Telephone: (517) 373-5383
Fax: (517) 373-1986
TDD: (517) 373-0543

Senate Bill 1323 (as introduced 5-14-02)
Sponsor: Senator Loren Bennett
Committee: Families, Mental Health and Human Services

Date Completed: 5-15-02

CONTENT

The bill would amend the Public Health Code to do all of the following:

- Revise terms used in statistical reporting requirements by including "dead infant" within the definition of "dead body", referring to a "dead infant" rather than a "dead fetus", and referring to a "prenatal death" rather than a "fetal death".**
- Require that a health professional or health facility fill out a certificate of prenatal death when a dead infant was delivered.**
- Require the Michigan Department of Community health (MDCH) to develop and distribute a certificate of prenatal death.**
- Require the MDCH to develop a form for the authorization for final disposition of a dead infant and combine that form with the certificate of prenatal death.**

Definitions & Statistical Reporting

Under the Code, "dead body" means a human body or parts thereof in a condition from which it may reasonably be concluded that death has occurred. The bill would include "dead infant" within that definition. Under the bill, "dead body" or "dead infant" would mean a human body or fetus, or a part of a dead human body or fetus, in a condition from which it could reasonably be concluded that death had occurred.

The bill would delete the term of "fetal death" and refer, instead, to "prenatal death". "Fetal death" means the death of a fetus that has completed at least 20 weeks of gestation or weighs at least 400 grams. Under the bill, that would be the definition of "prenatal death". The Code also includes a requirement that this definition conform in all other respects, as closely as possible, to the definition recommended by the Federal agency responsible for vital statistics. The bill would delete that requirement.

The Code specifies reporting requirements regarding a fetal death. Under the bill, those requirements would apply to a prenatal death. (The requirements involve statistical reports to the State registrar to be used only for medical and health purposes and not for the permanent official records of the system of vital statistics.)

Certificate of Prenatal Death

The bill would require that a health professional licensed under the Code, who was present at the delivery of a dead infant outside of a health facility, fill out a certificate of prenatal death in addition to the death report required under the Code. If a dead infant were delivered in a health facility, the facility would have to fill out the certificate of prenatal death.

The licensee or health facility would have to present the completed original certificate to the parent or parents of the dead infant. The licensee or health facility could not retain a copy of the certificate or provide a copy of it to another person without the written consent of the parent or parents.

The MDCH would have to develop and distribute a certificate of prenatal death for use by funeral directors and county medical examiners and by health professionals and health facilities. The MDCH would have to include spaces on the certificate of prenatal death for all of the following information:

- The name of the dead infant, if it were given a name by the parent or parents.
- Number of weeks of gestation completed.
- Date of delivery and weight at the time of delivery.
- The name of the parent or parents.
- The name of the health facility in which the dead infant was delivered or, if the delivery were outside of a health facility, the name of the health professional in attendance.

Authorization for Final Disposition

The Code requires that a funeral director or person acting as a funeral director, who first assumes custody of a dead body, obtain authorization for the final disposition of the body within 72 hours after death or the finding of the body and before final disposition of it. The authorization must be issued on a form prescribed by the State registrar, and signed by the local or State registrar.

Under the bill, the MDCH would have to develop a form for the authorization for the final disposition of a dead infant. The form would have to be combined with the certificate of prenatal death and signed by the local registrar or the State registrar. The form and the certificate would have to be on the same sheet of paper, separated by a perforation.

MCL 333.2803 et al.

Legislative Analyst: Patrick Affholter

FISCAL IMPACT

Other than costs associated with developing, printing, and distributing the new combined form, which would contain the certificate of prenatal death and the authorization for the final disposition of a dead infant, this bill should result in no additional costs to State or local government.

Fiscal Analyst: Dana Patterson

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.