

Legislative Analysis



MEDICAL EXAMINERS: HOSPICE DEATHS

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Senate Bill 724 as passed by the Senate

Sponsor: Sen. Tom George

House Committee: Health Policy

Senate Committee: Health Policy

First Analysis (5-19-04)

BRIEF SUMMARY: The bill would amend Public Act 181 of 1953 to revise the conditions under which a county medical examiner or deputy county medical examiner must conduct an investigation into the cause and manner of death in the case of an individual who died while under home hospice care.

FISCAL IMPACT: The bill would have no fiscal impact on state or local government.

THE APPARENT PROBLEM:

Public Act 181 of 1953, which governs county medical examiners, requires a county medical examiner or deputy county medical examiner to investigate the cause and manner of death of an individual who dies by violence, whose death is unexpected, or who dies without medical attendance during the 48 hours immediately preceding the time of death, unless the attending physician is able to determine the time of death. Reportedly, some medical examiners feel, under the last criterion, that they are obligated to investigate every death that occurs under home hospice care, because such care usually is delivered by a registered nurse instead of a physician. Because home hospice care generally is rendered to terminally ill individuals, some people believe that a medical examiner should be required to conduct an investigation into a home hospice care death only if the individual did not receive medical attendance by a licensed physician or a registered nurse in the 48 hours before the death.

THE CONTENT OF THE BILL:

The bill would amend Public Act 181 of 1953 to revise the conditions under which a county medical examiner or deputy county medical examiner must conduct an investigation into the cause and manner of death in the case of an individual who died while under home hospice care.

Under the bill, if an individual died while under home hospice care without medical attendance by a physician or a registered nurse during the immediately preceding 48 hours, the county medical examiner or deputy county medical examiner would have to investigate the death. In other cases, an investigation would be required if the individual had not received medical attendance by a physician within 48 hours before the death. (An investigation still would not be required in either situation if an attending physician could accurately determine the time of death.)

For this purpose, the bill would define "home hospice care" as a program of planned and continuous hospice care provided by a hospice or a hospice residence that consisted of a coordinated set of services rendered to an individual at his or her home on a continuous basis for a disease or condition with a terminal prognosis.

MCL 52.202

HOUSE COMMITTEE ACTION:

The House Committee on Health Policy reported the bill without amendment; it remains in the form passed by the Senate. Information in this analysis is derived from a Senate Fiscal Agency analysis of the Senate-passed bill dated 5-10-04.

ARGUMENTS:

For:

Hospice care is delivered by properly trained and skilled individuals, including therapists, aides, and registered nurses. Although a licensed physician usually is not present, physicians review hospice cases regularly. As an individual nears death, a registered nurse is present more often. It is within a registered nurse's scope of practice to pronounce death, and professional ethics would dictate that a nurse report any suspicious circumstances to the appropriate law enforcement agency. An investigation is not required for each death that occurs in a nursing home, nor is it appropriate in a home hospice care setting, in which death is the expected outcome.

Furthermore, an investigation involves the presence of a law enforcement officer in the house, which can intrude upon a very delicate, private time and further traumatize a grieving family. A person might choose to die in his or her home, rather than a hospital, because it is a familiar, comforting environment where the person can be surrounded by loved ones. In addition to meeting medical needs, this form of end-of-life care provides psychological and spiritual support to people as they prepare to die, and affords a measure of dignity to the terminally ill and their families. A bereaved family might feel that an unnecessary investigation has transformed its home into a crime scene in the time after a death. Apparently, in some cases, grieving family members have felt that the law enforcement officer conducting the investigation did not show respect for the family, or the loved one they recently lost. The presence of a law enforcement officer, however compassionate he or she might be, needlessly can make relatives feel that they are under suspicion and are being interrogated. A medical examiner should not be required to conduct an investigation in home hospice care situations in which the deceased received medical attention from a registered nurse in the time leading up to the death, and the death was expected.

POSITIONS:

The Michigan Hospice & Palliative Care Organization supports the bill. (5-18-04)

Legislative Analyst: Chris Couch

■ This analysis was prepared by nonpartisan House staff for use by House members in their deliberations, and does not constitute an official statement of legislative intent.