

PUBLIC HEALTH CODE (EXCERPT)
Act 368 of 1978

PART 26
DATA, INFORMATION, AND RESEARCH

333.2601 Applicability.

Sec. 2601. Unless otherwise provided, this part applies to all data made or received by the department.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of certain powers and duties of the center for health promotion and chronic disease prevention and the office of policy, planning and evaluation, from the department of public health to the director of community health, see E.R.O. No. 1996-1, compiled at MCL 330.3101 of the Michigan Compiled Laws.

Popular name: Act 368

333.2602 Meanings of words and phrases; general definitions and principles of construction.

Sec. 2602. (1) For purposes of this part, the words and phrases defined in sections 2603 to 2607 have the meanings ascribed to them in those sections.

(2) In addition, article 1 contains general definitions and principles of construction applicable to all articles in this code.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2603 Definitions; D.

Sec. 2603. (1) "Data" means items of information made or received by the department which pertain to a condition, status, act, or omission, existing independently of the memory of an individual, whether the information is retrievable by manual or other means and whether or not coded. It includes the normal and computer art meanings of the word data.

(2) "Data system" means an interrelated grouping of data for use by the department.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2607 Definitions; R, S.

Sec. 2607. (1) "Record" means a datum or a grouping of data about a person or an object under the ownership or control of a person or governmental entity in which the person, object, or governmental entity is identifiable by name, number, symbol, or other identifying particular.

(2) "System of records" means an interrelated grouping of records for use by the department.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2611 Coordination of activities; establishment of policy; interests to be considered; establishment, purpose, and powers of nonprofit corporation.

Sec. 2611. (1) The department shall coordinate the health services research, evaluation, and demonstration and health statistical activities undertaken or supported by the department.

(2) The department shall establish policy consistent with this part to administer health services research, evaluation, and demonstration and health statistical activities undertaken or supported by the department. In establishing the policy the department shall consider the following interests:

(a) The individual's right and reasonable expectation of privacy concerning its use, including the protection of privileged communications and the expectations of the individual when giving the information.

(b) The freedom of persons to do business.

(c) The public's interest in the protection of private rights.

(d) The public's interest in the free access to governmental information.

(e) The protections necessary to encourage persons to provide information.

(f) The individual's interest in being informed of dangers of which he or she would not otherwise be aware.

(g) The public's interest in the effective use of available data to protect and promote the health of individuals and the public as a whole.

(h) The public's interest in the effective and efficient management of governmental activities.

(i) The individual's interest in data about himself or herself.

(j) The interests of other governmental entities in preparing reports.

(3) The department may establish a nonprofit corporation pursuant to the nonprofit corporation act, Act

No. 162 of the Public Acts of 1982, being sections 450.2101 to 450.3192 of the Michigan Compiled Laws. The purpose of the corporation shall be to plan, promote, and coordinate health services research with a public university or a consortium of public universities within the state. The corporation may research, evaluate, and demonstrate all of the following:

(a) The cause, effects, extent, and nature of illness and disability among all or a particular group of the people of this state.

(b) The impact of personal illness and disability on the economy of this state and the well-being of all or a particular group of the people of this state.

(c) Environmental, laboratory, social, and other health related issues.

(d) The health knowledge and practices of the people of this state.

(e) The quality and availability of health resources in this state including, but not limited to, health care institutions and health professions.

(f) The determinants of health and nutritional practices and status including, but not limited to, behaviors that are related to health.

(g) Access to and use of health care services by all or a particular group of the people of this state including, but not limited to, the use of ambulatory health care services. The access and use may be categorized by specialty and type of practice of the health professional or health facility providing the service.

(h) Health care costs and financing including, but not limited to, trends in health care costs, sources of payments, and federal, state, and local expenditures for health care services.

(i) Public health policies and programs.

(j) Other issues considered appropriate by the board of directors of the corporation.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1989, Act 264, Imd. Eff. Dec. 26, 1989.

Compiler's note: For transfer of certain powers and duties of the Michigan public health institute from the department of public health to the director of the department of community health, see E.R.O. No. 1996-1, compiled at MCL 330.3101 of the Michigan Compiled Laws.

Popular name: Act 368

333.2612 Nonprofit corporation; establishment; purpose; duties; selection and composition of board of directors; appointment and composition of internal management committee.

Sec. 2612. (1) The department may establish with Michigan state university and other parties determined appropriate by the department a nonprofit corporation pursuant to the nonprofit corporation act, Act No. 162 of the Public Acts of 1982, being sections 450.2101 to 450.3192 of the Michigan Compiled Laws. The purpose of the corporation shall be to establish and operate a center for rural health. In fulfilling its purpose, the corporation shall do all of the following:

(a) Develop a coordinated rural health program that addresses critical questions and problems related to rural health and provides mechanisms for influencing health care policy.

(b) Perform and coordinate research regarding rural health issues.

(c) Periodically review state and federal laws and judicial decisions pertaining to health care policy and analyze the impact on the delivery of rural health care.

(d) Provide technical assistance and act as a resource for the rural health community in this state.

(e) Suggest changes in medical education curriculum that would be beneficial to rural health.

(f) Assist rural communities with all of the following:

(i) Applications for grants.

(ii) The recruitment and retention of health professionals.

(iii) Needs assessments and planning activities for rural health facilities.

(g) Serve as an advocate for rural health concerns.

(h) Conduct periodic seminars on rural health issues.

(i) Establish and implement a visiting professor program.

(j) Conduct consumer oriented rural health education programs.

(k) Designate a certificate of need ombudsman to provide technical assistance and consultation to rural health care providers and rural communities regarding certificate of need proposals and applications under part 222. The ombudsman shall also act as an advocate for rural health concerns in the development of certificate of need review standards under part 222.

(2) The incorporators of the corporation shall select a board of directors consisting of a representative from each of the following organizations:

(a) The Michigan state medical society or its successor. The representative appointed under this subdivision shall be a physician practicing in a county with a population of not more than 100,000.

(b) The Michigan osteopathic physicians' society or its successor. The representative appointed under this

subdivision shall be a physician practicing in a county with a population of not more than 100,000.

(c) The Michigan nurses association or its successor. The representative appointed under this subdivision shall be a nurse practicing in a county with a population of not more than 100,000.

(d) The Michigan hospital association or its successor. The representative selected under this subdivision shall be from a hospital in a county with a population of not more than 100,000.

(e) The Michigan primary care association or its successor. The representative appointed under this subdivision shall be a health professional practicing in a county with a population of not more than 100,000.

(f) The Michigan association for local public health or its successor. The representative appointed from a county health department for a county with a population of not more than 100,000 or from a district health department with at least 1 member county with a population of not more than 100,000.

(g) The office of the governor.

(h) The department of public health.

(i) The department of commerce.

(j) The Michigan senate. The individual selected under this subdivision shall be from a district located at least in part in a county with a population of not more than 100,000.

(k) The Michigan house of representatives. The individual selected under this subdivision shall be from a district located at least in part in a county with a population of not more than 100,000.

(3) The board of directors of the corporation shall appoint an internal management committee for the center for rural health. The management committee shall consist of representatives from each of the following:

(a) The college of human medicine of Michigan state university.

(b) The college of osteopathic medicine of Michigan state university.

(c) The college of nursing of Michigan state university.

(d) The college of veterinary medicine of Michigan state university.

(e) The cooperative extension service of Michigan state university.

(f) The department of public health.

History: Add. 1990, Act 138, Imd. Eff. June 26, 1990.

Compiler's note: For transfer of powers and duties of the center for rural health to the director of the department of community health and abolishment of the center, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2613 Nature of data to be defined by rule.

Sec. 2613. The department shall define by rule the nature of data collected, compiled, processed, used, or shared by the department pursuant to and consistent with section 2611(2).

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2614 Duties of department generally.

Sec. 2614. The department shall:

(a) Establish procedures to identify the circumstances under which, the places at which, the persons from whom, and the methods by which a person may secure that data, including the procedures governing requests, and the review established pursuant to section 2639.

(b) Prescribe standards for the publication of health-related data reported pursuant to this code which will encourage characteristics including accuracy, validity, reliability, completeness, and comparability; and advise users as to the status of the quality of the data.

(c) Prescribe the contents of forms or authorize the use of standardized forms for the collection of health-related data. The content and form shall be consistent with related local and federal requirements.

(d) Prescribe standards for the maintenance and preservation of health-related data.

(e) Establish procedures to govern the withholding and release of data as required by section 2637.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2615 Level of coverage; determination.

Sec. 2615. The department shall determine, not less than biennially, the level of coverage of the people of this state for each basic public health service prescribed under section 2311. This determination may be made by scientific sampling of the population or other scientific statistical techniques that will provide an accurate estimate of the level of coverage.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1990, Act 226, Imd. Eff. Oct. 8, 1990.

Popular name: Act 368

333.2616 Comprehensive health information system; establishment; provisions.

Sec. 2616. The department shall establish a comprehensive health information system providing for the collection, compilation, coordination, analysis, indexing, dissemination, and utilization of both purposefully collected and extant health-related data and statistics, including the training of producers and users of the data and statistics in a manner involving the collaboration at the policy and technical levels of major state and local health operational, planning, professional, and university groups and agencies which require the data in their work.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2617 Comprehensive health information system; statistics.

Sec. 2617. The health information system shall include statistics relative to:

(a) The causes, effects, extent, and nature of illness and disability of the people of this state, or a grouping of its people, which may include the incidence and prevalence of various acute and chronic illnesses and infant and maternal morbidity and mortality.

(b) The impact of illness and disability of the people of this state on the economy of this state and on other aspects of the well-being of its people or a grouping of its people.

(c) Environmental, social, and other health hazards and health knowledge and practices of the people of this state.

(d) Determinants of health and nutritional practices and status, including behavior related to health.

(e) Health resources, which may include health care institutions.

(f) The utilization of health care, which may include the utilization of ambulatory health services by specialties and types of practice of the health professionals providing the services, and services of health facilities and agencies defined in section 20106 and other health care institutions.

(g) Health care costs and financing, which may include the trends in health care prices and costs, the sources of payments for health care services, and federal, state, and local governmental expenditures for health care services.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2617a Maternal death; submission of information for inclusion in health information system.

Sec. 2617a. A physician or an individual in charge of a health facility who is present for or is aware of a maternal death shall submit information regarding that death at the time and in the manner specified or approved by the department for inclusion in the health information system established under section 2616. As used in this section:

(a) "Health facility" means a hospital, freestanding surgical outpatient facility, or other outpatient facility that is licensed or otherwise authorized to operate in this state under article 17.

(b) "Maternal death" means the death of a woman who was pregnant at the time of her death or within 1 year before her death.

(c) "Physician" means an individual who is licensed or otherwise authorized to engage in the practice of medicine or practice of osteopathic medicine and surgery under article 15.

History: Add. 2016, Act 479, Eff. Apr. 6, 2017.

333.2618 Publications; annual report; summary report; statement of limitations of data used.

Sec. 2618. The department shall publish and make available periodically to agencies and individuals health statistics publications of general interest, publications bringing health statistics into focus on priority programmatic issues and health profiles. An annual report on the health information system shall be made available to the governor and the legislature and to collaborating agencies. A summary report of each area described in sections 2616 and 2617 shall be included in the annual report not less than once each 5 years. The department shall include in the report a statement of the limitations of the data used in terms of their quality, accuracy, and completeness.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2619 Cancer registry; establishment; purpose; reports; records; rules; medical or

department examination or supervision not required; contracts; evaluation of reports; publication of summary reports; commencement of reporting; effective date of section.

Sec. 2619. (1) The department shall establish a registry to record cases of cancer and other specified tumorous and precancerous diseases that occur in the state, and to record information concerning these cases as the department considers necessary and appropriate in order to conduct epidemiologic surveys of cancer and cancer-related diseases in the state.

(2) Each diagnosed case of cancer and other specified tumorous and precancerous diseases shall be reported to the department pursuant to subsection (4), or reported to a cancer reporting registry if the cancer reporting registry meets standards established pursuant to subsection (4) to ensure the accuracy and completeness of the reported information. A person or facility required to report a diagnosis pursuant to subsection (4) may elect to report the diagnosis to the state through an existing cancer registry only if the registry meets minimum reporting standards established by the department.

(3) The department shall maintain comprehensive records of all reports submitted pursuant to this section. These reports shall be subject to the same requirements of confidentiality as provided in section 2631 for data or records concerning medical research projects.

(4) The director shall promulgate rules which provide for all of the following:

(a) A list of tumorous and precancerous diseases other than cancer to be reported pursuant to subsection (2).

(b) The quality and manner in which the cases and other information described in subsection (1) are reported to the department.

(c) The terms and conditions under which records disclosing the name and medical condition of a specific individual and kept pursuant to this section are released by the department.

(5) This section does not compel an individual to submit to medical or department examination or supervision.

(6) The department may contract for the collection and analysis of, and research related to, the epidemiologic data required under this section.

(7) Within 2 years after the effective date of this section, the department shall begin evaluating the reports collected pursuant to subsection (2). The department shall publish and make available to the public reports summarizing the information collected. The first summary report shall be published not later than 180 days after the end of the first 2 full calendar years after the effective date of this section. Subsequent annual summary reports shall be made on a full calendar year basis and published not later than 180 days after the end of each calendar year.

(8) Reporting pursuant to subsection (2) shall begin the next calendar year after the effective date of this section.

(9) This section shall take effect July 1, 1984.

History: Add. 1984, Act 82, Eff. July 1, 1984.

Popular name: Act 368

333.2621 Comprehensive policy for conduct and support of research and demonstration activities; conducting and supporting demonstration projects and scientific evaluations.

Sec. 2621. (1) The department shall establish a comprehensive policy pursuant to and consistent with section 2611(2) for the conduct and support of research and demonstration activities related to the department's responsibility for the health care needs of the people of this state.

(2) The department shall conduct research and demonstration activities related to the department's responsibility for the environmental, preventive, and personal health needs of the communities and people of this state, including:

(a) The causes, effects, and methods of prevention of illness.

(b) The determinants of health, including behavior related to health.

(c) The accessibility, acceptability, availability, organization, distribution, utilization, quality, and financing of health care, especially those services for the medically needy.

(3) The department may conduct and support demonstration projects to carry out subsection (2).

(4) The department shall conduct or support the conduct of scientific evaluations of the effectiveness, efficiency, and relevance of programs conducted or supported by the department.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2623 Publication and dissemination of results and information obtained under MCL 333.2621.

Sec. 2623. The department may:

(a) Publish, make available, and disseminate, promptly and on as broad a basis as practicable, the results of health services research, demonstrations, and evaluations conducted and supported under section 2621.

(b) Provide indexing, abstracting, translation, publication, and other services leading to a more effective and timely dissemination of information as to health services, research, demonstrations, and evaluations conducted or supported under section 2621 to public and private entities and persons engaged in the improvement of health and to the general public.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2624 Grants and contracts to conduct or support research activities and scientific evaluations.

Sec. 2624. The department may make grants to and contracts with persons and governmental entities to conduct or support research activities and scientific evaluations authorized under sections 2621 and 2623.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2631 Data concerning medical research project; confidentiality; use.

Sec. 2631. The information, records of interviews, written reports, statements, notes, memoranda, or other data or records furnished to, procured by, or voluntarily shared with the department in the conduct of a medical research project, or a person, agency, or organization which has been designated in advance by the department as a medical research project which regularly furnishes statistical or summary data with respect to that project to the department for the purpose of reducing the morbidity or mortality from any cause or condition of health are confidential and shall be used solely for statistical, scientific, and medical research purposes relating to the cause or condition of health.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2632 Data concerning medical research project; inadmissible as evidence; exhibition or disclosure.

Sec. 2632. The information, records, reports, statements, notes, memoranda, or other data described in section 2631 are not admissible as evidence in an action in a court or before any other tribunal, board, agency, or person. Furnishing the data to the department in the conduct of a medical research project or to a designated medical research project does not result in the loss of any privilege which the data may otherwise have making them inadmissible as evidence. The information, records, reports, notes, memoranda, or other data shall not be exhibited nor their contents disclosed in any way, in whole or in part, by the department or its representative, or by any other person, agency, or organization, except as is necessary for the purpose of furthering the medical research project to which they relate consistent with section 2637 and the rules promulgated under section 2678. A person participating in a designated medical research project shall not disclose the information obtained except in strict conformity with the research project.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2633 Data concerning medical research projects; liability for furnishing.

Sec. 2633. The furnishing of information, records, reports, statements, notes, memoranda, or other data to the department, either voluntarily or as required by this code, or to a person, agency, or organization designated as a medical research project does not subject a physician, hospital, sanatorium, rest home, nursing home, or other person or agency furnishing the information, records, reports, statements, notes, memoranda, or other data to liability in an action for damages or other relief, and is not considered to be the willful betrayal of a professional secret or the violation of a confidential relationship.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1988, Act 122, Eff. Mar. 30, 1989.

Popular name: Act 368

333.2635 Power to demand or require data.

Sec. 2635. Sections 2631 to 2633 do not confer on the department the power to demand or require that a health professional furnish information, records of interviews, written reports, statements, notes, memoranda, or other data other than as expressly required by law.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2637 Procedures protecting confidentiality and regulating disclosure of data and records.

Sec. 2637. (1) The department shall establish procedures pursuant to section 2678 to protect the confidentiality of, and regulate the disclosure of, data and records contained in a departmental data system or system of records.

(2) The procedures established under subsection (1) shall be consistent with the policy established under sections 2611 and 2613.

(3) Except as provided in section 2640, the procedures established under subsection (1) shall specify the data contained in a departmental data system or system of records that shall not be disclosed unless items identifying a person by name, address, number, symbol, or any other identifying particular are deleted.

(4) The procedures established under subsection (1) shall regulate the use and disclosure of data contained in a departmental data system or system of records released to researchers, other persons, including designated medical research projects as described in section 2631, or governmental entities. A person who receives data pursuant to this section shall not disclose an item of information contained in the data except in conformance with the authority granted by the department and with the purpose for which the data was originally requested by the researcher. The director may contract with researchers or other persons to implement and enforce this subsection. A contract made pursuant to this subsection shall do both of the following:

(a) Require the department to provide monitoring to assure compliance with this section.

(b) Provide for termination if this section or the contract is violated.

(5) An officer or employee of the department shall not disclose data contained in a departmental data system or system of records except as authorized in the procedures adopted pursuant to this section.

(6) The department periodically shall review the procedures adopted under this section.

(7) A person whose contract is terminated pursuant to subsection (4)(b) is not eligible to make a subsequent contract with the department.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1998, Act 496, Eff. Mar. 1, 1999.

Popular name: Act 368

333.2638 Violation; penalty.

Sec. 2638. A person who discloses confidential information in violation of sections 2631 to 2633 or who violates section 2637 or a rule implementing section 2637 is guilty of a misdemeanor, punishable by imprisonment for not more than 1 year, or a fine of not more than \$1,000.00, or both, and if the person is an employee of the department shall be subject to immediate dismissal.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2639 Review of personal records upon request; procedures for reviewing request; administrative hearing; records of requests.

Sec. 2639. (1) Upon written request, an individual shall be permitted to review his or her personal records maintained or made under the authority of this part, in accordance with this section.

(2) The department shall establish procedures for reviewing a request from a person concerning access to or the amendment of a record or data pertaining to the person, or from a researcher, other person, or governmental entity requesting information or access to information possessed by the department, including a method of making a determination on the request for access or amendment. A person or researcher aggrieved by a decision under this section may request an administrative hearing.

(3) The department shall maintain records of requests for access to or amendments of data with the accuracy, relevance, timeliness, and completeness necessary to assure fairness to the person making the request.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2640 Parentage registry; use and access by family independence agency; access to child's medical records and information; immunity; exception.

Sec. 2640. (1) The department shall give prompt access to the parentage registry to the family independence agency or its agent for the purpose of the family independence agency's duty to aid in the establishment or enforcement of child support obligations. The family independence agency or its agent may

use or disclose the information from the parentage registry in carrying out that duty.

(2) Notwithstanding section 2637, if there is a compelling need for medical records or information to determine whether child abuse or neglect has occurred or to take action to protect a child where there may be a substantial risk of harm, the department shall give access to a family independence agency caseworker or administrator directly involved in the investigation to the child's medical records and information that are pertinent to the child abuse or neglect investigation. Medical records or information disclosed under this section shall include the identity of the individual to whom the record or information pertains.

(3) The department shall provide the access described by subsection (2) only upon receipt of a written request from a caseworker or administrator directly involved in the investigation and shall provide that access within 14 calendar days after the record holder receives the written request. The department shall provide that access regardless of the consent of the person from whom consent would otherwise be required.

(4) To the extent not protected by the immunity conferred by 1964 PA 170, MCL 691.1401 to 691.1415, an individual who in good faith provides access to medical records or information under subsection (2) is immune from civil or administrative liability arising from that conduct, unless the conduct was gross negligence or willful and wanton misconduct.

(5) This section does not apply to a report, record, datum, or information whose confidentiality and disclosure are governed by section 5131.

History: Add. 1996, Act 307, Imd. Eff. June 20, 1996;—Am. 1998, Act 496, Eff. Mar. 1, 1999.

Popular name: Act 368

333.2641 Fees; disposition of collections.

Sec. 2641. (1) The department may charge fees for the reasonable cost of:

(a) Reproduction, duplication, amendment, certification, or authentication of data.

(b) Data searches other than those for which a fee is prohibited under section 3 of Public Law 93-579, 5 U.S.C. 552a.

(2) Collections under this section shall be transmitted to the department of treasury and credited to the general fund of this state.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2651 Repealed. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: The repealed section pertained to creation of the anatomy board.

Popular name: Act 368

333.2652 Receiving and allocating bodies or parts; purpose; records of receipt and disposition; universities designated to perform duties and responsibilities; powers.

Sec. 2652. (1) The department shall receive dead human bodies, or parts of dead human bodies, designated for scientific uses and allocate the bodies or parts to hospitals and educational institutions requiring them for use in medical instruction or for the purpose of instruction, study, and use in the promotion of education in the health sciences in this state. The department shall keep permanent records of the receipt and disposition of dead bodies and parts.

(2) The department may designate Michigan state university, Wayne state university, or the university of Michigan to perform the duties and responsibilities of this section and sections 2653 to 2663.

(3) A university designated under subsection (2) may exercise all of the powers of the department contained in this section and sections 2653 to 2663 as delegated by the department.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: For transfer of powers and duties of the anatomy board to the director of the department community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2653 "Unclaimed body" defined; notice to persons with authority to control disposition of unclaimed body; availability of unclaimed body to department; request for notification concerning unclaimed body; time, manner, and contents of notice; release of body; notice and surrender of body to benevolent association.

Sec. 2653. (1) As used in sections 2652 to 2663, "unclaimed body" means a dead human body for which the deceased has not provided a disposition, for which an estate or assets to defray costs of burial do not exist, and that is not claimed for burial by a person, relative, or court appointed fiduciary who has the right to control disposition of the body.

(2) An official of a public institution or a state or local officer in charge or control of an unclaimed body which would have to be buried at public expense shall use due diligence to notify the persons with authority to control the interment or disposition of the unclaimed body under section 3206 of the estates and protected individuals code, 1998 PA 386, MCL 700.3206. If there is no person under section 3206 of the estates and protected individuals code, 1998 PA 386, MCL 700.3206, to direct the disposition of the unclaimed body in a manner other than provided by this section and sections 2655 to 2659, the unclaimed body shall become available to the department. Upon written request by the department for notification concerning unclaimed bodies coming under his or her jurisdiction, the officer, for the definite period specified in the request of the department, shall notify the department by telephone, facsimile, or electronic mail immediately following 72 hours after death, excluding Sundays and holidays, stating, when possible, the name, age, sex, religion, and cause of death of the deceased, and shall release the body according to the regulations or instructions of the department.

(3) If the deceased was a member of a religious faith maintaining a benevolent association that will provide for the burial of the deceased in accordance with the tenets of the religion, the department shall notify the benevolent association of the death of the deceased by telephone, facsimile, or electronic mail, and shall surrender the body to the benevolent association upon request.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: For transfer of powers and duties of the anatomy board to the director of the department community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2655 Embalming and disposing of unclaimed body; standards; holding period; identification and claim by person with authority over body.

Sec. 2655. An unclaimed body retained by the department for scientific or educational purposes shall be embalmed and disposed of in accordance with standards adopted under section 2678. The unclaimed body shall be held for 30 days by the person to whom it has been assigned for scientific or educational purposes. The body is subject during this period to identification and claim by an authenticated person with authority over the body under section 3206 of the estates and protected individuals code, 1998 PA 386, MCL 700.3206, for the purpose of interment or other disposition in accordance with the directions of that person.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: For transfer of powers and duties of the anatomy board to the director of the department community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2656 Receiving unclaimed body for educational purposes; expense; record; disposition.

Sec. 2656. A person receiving an unclaimed body for educational purposes shall bear all reasonable expense incurred in the preservation and transportation of the body and shall keep a permanent record of bodies received, giving the identification number, name, age, religion, and sex, the place of last residence of the deceased, and the source and disposition, with dates, of the body. A person receiving an unclaimed body, or part thereof, for educational purposes shall dispose of the body in accordance with the standards adopted under section 2678.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the anatomy board to the director of the department community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2658 Postmortem examination of unclaimed body; certification of body unfit for scientific or education purposes; interment of unclaimed body; expense.

Sec. 2658. A person, unless specifically authorized by law, shall not hold a postmortem examination of an unclaimed body without the express permission of the director of the department. When, through the failure of a person to notify the department or promptly to release an unclaimed body as required by the department, the body becomes unfit for scientific or educational purposes, the department shall so certify, and the unclaimed body shall be interred at the expense of those responsible for the noncompliance.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: For transfer of powers and duties of the anatomy board to the director of the department community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2659 Adoption of standards for unclaimed bodies or parts.

Sec. 2659. The department may adopt standards pursuant to section 2678 for the transportation, reception, preservation, storage, records, and allocation of unclaimed bodies or parts.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

Administrative rules: R 325.951 et seq. of the Michigan Administrative Code.

333.2661 Repealed. 2006, Act 301, Imd. Eff. July 20, 2006.

Compiler's note: The repealed section pertained to autopsy upon and disposition of an unclaimed body.

Popular name: Act 368

333.2663 Violations; misdemeanor.

Sec. 2663. A person who unlawfully disposes, uses, or sells an unclaimed body or who violates sections 2652 to 2661 is guilty of a misdemeanor.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2006, Act 301, Imd. Eff. July 20, 2006.

Popular name: Act 368

333.2671 Public health and welfare dependent on humane use of animals for certain purposes.

Sec. 2671. The public health and welfare depend on the humane use of animals for the diagnosis and treatment of human and animal diseases; the advancement of veterinary, dental, medical, and biological sciences; and the testing, diagnosis, improvement, and standardization of laboratory specimens, biologic products, pharmaceuticals, and drugs.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2672 Animal research advisory board; creation; membership.

Sec. 2672. The animal research advisory board is created in the department. The animal research advisory board consists of the dean of the medical school of the university of Michigan, the dean of the veterinary college of Michigan state university, the dean of the medical school of Wayne state university, the dean of the dental school of the university of Detroit, the dean of the optometry college at Ferris state university, the secretary of the Michigan association of osteopathic physicians and surgeons, a representative from a research laboratory within this state and subject to the control of the United States public health service, and 2 member representatives of the Michigan federation of humane societies.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 1987, Act 159, Imd. Eff. Nov. 5, 1987.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2673 Animal research advisory board; powers.

Sec. 2673. The animal research advisory board may regulate and establish standards pursuant to section 2678 controlling the humane use of animals for the diagnosis and treatment of human and animal diseases; the advancement of veterinary, dental, optometrical, medical, and biological sciences; and the testing, diagnosis, improvement, and standardization of laboratory specimens, biologic products, pharmaceuticals, and drugs.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2674 Administration of MCL 333.2671 to 333.2675; expenses of members.

Sec. 2674. (1) The department shall administer sections 2671 to 2675.

(2) The members of the animal research advisory board shall serve without compensation, but shall be entitled to expenses incurred in performance of official duties in accordance with section 1216.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2675 Inspection of premises or property on which animals kept for experimental purposes; purpose.

Sec. 2675. The department, its representative, or a member of the animal research advisory board may inspect any premises or property on or in which animals are kept for experimental purposes for the purpose of investigation of compliance with board standards. The standards shall provide for the humane treatment of animals reasonably necessary for the purposes of this part.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2676 Registration for humane use of animals for experimental purposes; compliance with standards; grounds for suspension or revocation of registration; findings of fact conclusive; application for review of questions of law; orders.

Sec. 2676. A person shall not keep or use animals for experimental purposes unless registered to do so by the department. The department shall grant registration for the humane use of animals for experimental purposes upon compliance with board standards. The department may suspend or revoke a registration for failure to comply with this part or board standards. Findings of fact by the department, in the absence of fraud or arbitrariness, shall be conclusive, but the circuit court for the county in which the defendant resides or has his or her principal place of business may review questions of law involved in a final decision or determination of the department if the aggrieved party applies for the review not later than 30 days after the determination. The circuit court has jurisdiction to make orders as justice requires.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

333.2678 Rules.

Sec. 2678. The department shall promulgate rules to implement section 2637 and may promulgate rules to implement this part including the establishment of fees, standards pertaining to unclaimed bodies, or parts thereof, standards pertaining to the use of animals for experimental purposes, and the implementation of sections 2616 and 2617.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Compiler's note: For transfer of powers and duties of the animal research advisory board to the director of the department of community health and the abolishment of the board, see E.R.O. No. 1997-4, compiled at MCL 333.26324 of the Michigan Compiled Laws.

Popular name: Act 368

Administrative rules: R 325.921 et seq. and R 325.951 et seq. of the Michigan Administrative Code.

333.2681 Definitions.

Sec. 2681. As used in sections 2681 to 2683:

- (a) "Cord blood unit" means the blood collected from a single placenta and umbilical cord.
- (b) "Donor" means a mother who has delivered a baby and consents to donate the newborn's blood remaining in the placenta and umbilical cord.
- (c) "Donor bank" means a qualified cord blood stem cell bank that enters into a contract with the director under section 2682.
- (d) "Human cord blood stem cells" means hematopoietic stem cells and any other stem cells contained in the neonatal blood collected immediately after the birth from the separated placenta and umbilical cord.
- (e) "Network" means the statewide network of qualified cord blood stem cell banks established under section 2682.

History: Add. 2006, Act 635, Imd. Eff. Jan. 4, 2007.

Popular name: Act 368

333.2682 Statewide network of cord blood stem cell banks.

Sec. 2682. (1) If funding is made available, the department shall establish a statewide network of cord blood stem cell banks. The director of the department shall enter into contracts with qualified cord blood stem

cell banks to assist in the establishment, provision, and maintenance of the network.

(2) A cord blood stem cell bank is eligible to enter the network and be a donor bank if it satisfies each of the following:

(a) Has obtained all applicable federal and state licenses, accreditations, certifications, registrations, and other authorizations required to operate and maintain a cord blood stem cell bank.

(b) Has implemented donor screening and cord blood collection practices adequate to protect both donors and transplant recipients and to prevent transmission of potentially harmful infections and other diseases.

(c) Has established a system of strict confidentiality to protect the identity and privacy of patients and donors in accordance with existing federal and state law and consistent with regulations promulgated under the health insurance portability and accountability act of 1996, Public Law 104-191, for the release of the identity of donors, recipients, or identifiable records.

(d) Has established a system for encouraging donation by an ethnically and racially diverse group of donors.

(e) Has developed adequate systems for communication with other cord blood stem cell banks, transplant centers, and physicians with respect to the request, release, and distribution of cord blood units nationally and has developed such systems, consistent with the regulations promulgated under the health insurance portability and accountability act of 1996, Public Law 104-191, to track recipients' clinical outcomes for distributed units.

(f) Has developed an objective system for educating the public, including patient advocacy organizations, about the benefits of donating and utilizing cord blood stem cells in appropriate circumstances.

(3) A donor bank that enters into the network shall do all of the following:

(a) Acquire, tissue-type, test, cryopreserve, and store donated units of human cord blood acquired with the informed consent of the donor, in a manner that complies with applicable federal regulations.

(b) Make cord blood units collected under this section, or otherwise, available to transplant centers for stem cell transplantation.

(c) Allocate up to 10% of the cord blood inventory each year for peer-reviewed research. This quota may be met by using cord blood units that did not meet the cell count standards necessary for transplantation.

(4) A board of directors shall govern and administer the state cord blood stem cell bank network. The board shall be appointed by the director and consist of members who represent each of the following:

(a) Cord blood stem cell transplant centers.

(b) Physicians from participating birthing hospitals.

(c) The cord blood stem cell research community.

(d) Recipients of cord blood stem cell transplants.

(e) Family members who have made a donation to a statewide cord blood stem cell bank.

(f) Individuals with expertise in the social sciences.

(g) Members of the general public.

(h) Each network donor bank.

(5) Except as otherwise provided under this subsection, each member of the board shall serve for a 3-year term and may be reappointed for 1 or more additional terms. Appointments for the initial members shall be for terms of 1, 2, and 3 years, respectively, so as to provide for the subsequent appointment of an equal number of members each year. The board shall elect a chairperson and do each of the following:

(a) Ensure that the donor banks within the network meet the requirements of subsection (2) on a continuing basis.

(b) Encourage network donor banks to work collaboratively with other network donor banks and encourage network donor banks to focus their resources in their respective local or regional area.

(c) Designate 1 or more established national or international cord blood registries to serve as a statewide cord blood stem cell registry.

(d) Coordinate the donor banks in the network.

History: Add. 2006, Act 637, Imd. Eff. Jan. 4, 2007.

Popular name: Act 368

333.2683 Educational materials on uses and benefits of cord blood stem cells; development and dissemination; availability.

Sec. 2683. (1) If funding is made available, the department shall promote public awareness and increase knowledge about the statewide network of cord blood stem cell banks, cord blood banking options, and the benefits of cord blood stem cells by developing and disseminating educational materials on the uses and benefits of cord blood stem cells, the viability of cord blood stem cells, information on research results utilizing cord blood stem cells, and any other related materials and information to enable the public to make

informed decisions about the utilization of cord blood stem cells. Information shall include, but is not limited to, all of the following:

- (a) An explanation of the differences between public and private cord blood banking.
 - (b) Information on the statewide network of cord blood stem cell banks.
 - (c) Cord blood options available.
 - (d) The medical process and risks involved in the collection of cord blood.
 - (e) Medically accepted uses and benefits of cord blood collection and transplantation.
 - (f) A statement that due to ongoing research and development there may be future uses and benefits of cord blood collection and transplantation.
 - (g) An explanation of any costs to the donor associated with cord blood donation and storage.
 - (h) Information on how to request printed materials and how to access other information available on the department's website.
 - (i) Options for ownership and future use of the donated material.
 - (j) An explanation of the storage, maintenance, and viability for transplantation of cord blood stem cells.
- (2) The department, on its website, shall make the materials and information gathered and developed under subsection (1) available in printable format to the public and to health care facilities and agencies, cord blood banks, and health care professionals.
- (3) The department shall encourage health care professionals and health care facilities and agencies, including, but not limited to, physicians, nurse midwives, nurses, hospitals, birthing facilities, and local health departments to disseminate information to a pregnant woman before her third trimester of pregnancy about cord blood donation and the options for cord blood banking.

History: Add. 2006, Act 638, Imd. Eff. Jan. 4, 2007.

Popular name: Act 368

333.2683a Statewide network of cord blood stem cell banks; public awareness efforts; report on expenditure of funds.

Sec. 2683a. On or before April 1, 2007 and annually thereafter, the department shall submit to the house and senate appropriations subcommittees on community health, the house and senate standing committees on public health, the house and senate fiscal agencies, and the state budget director a report detailing the expenditure of funds related to both of the following:

- (a) The statewide network of cord blood stem cell banks established under section 2682.
- (b) The public awareness efforts required in this section.

History: Add. 2006, Act 636, Imd. Eff. Jan. 4, 2007.

Popular name: Act 368

333.2685 Use of live human embryo, fetus, or neonate for nontherapeutic research; prohibitions; presumption.

Sec. 2685. (1) A person shall not use a live human embryo, fetus, or neonate for nontherapeutic research if, in the best judgment of the person conducting the research, based upon the available knowledge or information at the approximate time of the research, the research substantially jeopardizes the life or health of the embryo, fetus, or neonate. Nontherapeutic research shall not in any case be performed on an embryo or fetus known by the person conducting the research to be the subject of a planned abortion being performed for any purpose other than to protect the life of the mother.

(2) For purposes of subsection (1) the embryo or fetus shall be conclusively presumed not to be the subject of a planned abortion if the mother signed a written statement at the time of the research, that she was not planning an abortion.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2686 Diagnostic, assessment, or treatment procedures not prohibited.

Sec. 2686. Sections 2685 to 2691 shall not prohibit or regulate diagnostic, assessment, or treatment procedures, the purpose of which is to determine the life or status or improve the health of the embryo, fetus, or neonate involved or the mother involved.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2687 Embryo, fetus, or neonate considered live.

Sec. 2687. An embryo, fetus, or neonate is a live embryo, fetus, or neonate for purposes of sections 2685 to

2691 if, in the best medical judgment of a physician, it shows evidence of life as determined by the same medical standards as are used in determining evidence of life in a spontaneously aborted embryo or fetus at approximately the same stage of gestational development.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2688 Research on dead embryo, fetus, or neonate; consent of mother; presumption; authorized transfer to medical research facilities; research standards.

Sec. 2688. (1) Research may not knowingly be performed upon a dead embryo, fetus, or neonate unless the consent of the mother has first been obtained. Consent shall not be required in the case of a routine pathological study.

(2) For purposes of this section, consent shall be conclusively presumed to have been granted by a written statement, signed by the mother that she consents to the use of her dead embryo, fetus, or neonate for research.

(3) Written consent shall constitute lawful authorization for the transfer of the dead embryo, fetus, or neonate to medical research facilities.

(4) Research being performed upon a dead embryo, fetus, or neonate shall be conducted in accordance with the same standards applicable to research conducted pursuant to part 101.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2689 Abortion; consideration.

Sec. 2689. A person shall not perform or offer to perform an abortion where part or all of the consideration for the performance is that the embryo, or fetus, whether alive or dead, may be used for research or study.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2690 Selling, collecting fee for, transferring, distributing, or giving away embryo, fetus, or neonate; financial benefit or compensation prohibited; exception; definitions.

Sec. 2690. (1) A person shall not knowingly sell, collect any fee for, transfer, distribute, or give away an embryo, fetus, or neonate for a use that is in violation of sections 2685 to 2689.

(2) Except as otherwise provided in subsection (3), a physician, or a person associated with the physician, who, as a result of the physician's performing an abortion, possesses a dead embryo, fetus, or neonate shall not knowingly financially benefit from or receive any type of compensation for either of the following:

(a) Allowing a person that was not involved in the performance of the abortion to have access to the embryo, fetus, or neonate for the purpose of the person taking possession and control of the embryo, fetus, or neonate, including the organs, tissues, or cells of the embryo, fetus, or neonate.

(b) Transferring possession and control of the embryo, fetus, or neonate, including the organs, tissues, or cells of the embryo, fetus, or neonate, to a person that was not involved in the performance of the abortion.

(3) Subsection (2) does not apply to any of the following:

(a) A hospital.

(b) A person that is performing an activity as part of that person's employment with a hospital or a contract with a hospital.

(c) A person that performs an activity under section 2688.

(4) As used in this section:

(a) "Abortion" means that term as defined in section 2803.

(b) "Hospital" means a hospital licensed under article 17.

(c) "Person associated with the physician" means any of the following:

(i) An employee of the physician or other individual who assists the physician in performing an abortion.

(ii) A private physician practice, professional corporation, or freestanding surgical outpatient facility licensed under article 17, that is owned or operated by the physician and in which an abortion is performed.

(iii) A private physician practice, professional corporation, or freestanding surgical outpatient facility licensed under article 17, that employs or contracts with the physician to perform an abortion.

History: 1978, Act 368, Eff. Sept. 30, 1978;—Am. 2016, Act 386, Eff. Mar. 29, 2017;—Am. 2023, Act 209, Eff. Feb. 13, 2024.

Popular name: Act 368

333.2691 Violation; penalty.

Sec. 2691. A person who violates sections 2685 to 2690 is guilty of a felony, punishable by imprisonment

for not more than 5 years.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368

333.2692 “Nontherapeutic research” defined.

Sec. 2692. As used in sections 2685 to 2691, "nontherapeutic research" means scientific or laboratory research, or other kind of experimentation or investigation not designed to improve the health of the research subject.

History: 1978, Act 368, Eff. Sept. 30, 1978.

Popular name: Act 368