

1 "Consulting physician" means a physician who is qualified
2 by specialty or experience to make a professional diagnosis and
3 prognosis regarding the patient's disease.

4 "Counseling" means one or more consultations as necessary
5 between a state licensed psychiatrist or psychologist and a
6 patient for the purpose of determining that the patient is
7 competent and not suffering from a psychiatric or psychological
8 disorder or depression causing impaired judgment.

9 "Department" means the department of health.

10 "Health care provider" means a person licensed, certified,
11 or otherwise authorized or permitted by law to administer health
12 care or dispense medication in the ordinary course of business
13 or practice of a profession, and includes a health care
14 facility.

15 "Informed decision" means a decision by a qualified
16 patient, to request and obtain a prescription for medication
17 that the qualified patient may self-administer to end the
18 qualified patient's life in a humane and dignified manner, that
19 is based upon an appreciation of the relevant facts and after
20 being fully informed by the attending physician of:

21 (1) The qualified patient's medical diagnosis;



- 1 (2) The qualified patient's prognosis;
- 2 (3) The potential risks associated with taking the
- 3 medication to be prescribed;
- 4 (4) The probable result of taking the medication to be
- 5 prescribed; and
- 6 (5) The feasible alternatives including comfort care,
- 7 hospice care, and pain control.

8 "Medically confirmed" means the medical opinion of the
9 attending physician has been confirmed by a consulting physician
10 who has examined the patient and the patient's relevant medical
11 records.

12 "Patient" means a person who is eighteen years of age or
13 older and under the care of a physician.

14 "Physician" means a person who is licensed in the State to
15 practice medicine as a physician or an osteopathic physician.

16 "Qualified patient" means a competent adult who is a
17 resident of the State and has satisfied the requirements of this
18 chapter in order to obtain a prescription for medication that
19 the competent adult may self-administer to end the competent
20 adult's life in a humane and dignified manner.



1 "Self-administer" means a qualified patient's act of
2 ingesting medication to end the qualified patient's life in a
3 humane and dignified manner.

4 "Terminal disease" means an incurable and irreversible
5 disease that has been medically confirmed and, within reasonable
6 medical judgment, will produce death within six months.

7 § -2 **Written request for medication.** (a) An adult who
8 is competent, is a resident of the State, and has been
9 determined by the attending physician and consulting physician
10 to be suffering from a terminal disease, and who has voluntarily
11 expressed a wish to die, may make a written request for
12 medication that the adult may self-administer to end the adult's
13 life in a humane and dignified manner in accordance with this
14 chapter.

15 (b) A person does not qualify under this chapter solely
16 because of age or disability.

17 § -3 **Form of the written request.** (a) A valid request
18 for medication under this chapter shall be in substantially the
19 form described in section -22, signed and dated by the
20 patient and witnessed by at least two individuals who, in the
21 presence of the patient, attest that to the best of their



1 knowledge and belief the patient is competent, acting
2 voluntarily, and is not being coerced to sign the request.

3 (b) One of the witnesses shall be a person who is not:

4 (1) A relative of the patient by blood, marriage, or
5 adoption;

6 (2) A person who at the time the request is signed would
7 be entitled to any portion of the estate of the
8 patient upon death under any will or by operation of
9 law; or

10 (3) An owner, operator, or employee of a health care
11 facility where the patient is receiving medical
12 treatment or is a resident.

13 (c) The patient's attending physician at the time the
14 request is signed shall not be a witness.

15 (d) If the patient is in a long-term care facility at the
16 time the written request is made, one of the witnesses shall be
17 an individual designated by the facility and shall have the
18 qualifications specified by the department of health by rule.

19 § -4 **Attending physician responsibilities.** (a) The
20 attending physician shall:



- 1 (1) Make the initial determination of whether a patient
2 has a terminal disease, is competent, and has made the
3 request voluntarily;
- 4 (2) Request that the patient demonstrate Hawaii residency
5 under section -13;
- 6 (3) In order to ensure that the patient is making an
7 informed decision, inform the patient of:
 - 8 (A) The patient's medical diagnosis;
 - 9 (B) The patient's prognosis;
 - 10 (C) The potential risks associated with taking the
11 medication to be prescribed;
 - 12 (D) The probable result of taking the medication to
13 be prescribed; and
 - 14 (E) The feasible alternatives including comfort care,
15 hospice care, and pain control;
- 16 (4) Refer the patient to a consulting physician for
17 medical confirmation of the diagnosis, and for a
18 determination that the patient is competent and acting
19 voluntarily;
- 20 (5) Refer the patient for counseling if appropriate under
21 section -6;



- 1 (6) Recommend that the patient notify next of kin;
- 2 (7) Counsel the patient about the importance of having
- 3 another person present when the patient takes the
- 4 medication prescribed under this chapter and of not
- 5 taking the medication in a public place;
- 6 (8) Inform the patient that the patient has an opportunity
- 7 to rescind the request at any time and in any manner,
- 8 and offer the patient an opportunity to rescind at the
- 9 end of the fifteen-day waiting period under section
- 10 -11;
- 11 (9) Verify, immediately before writing the prescription
- 12 for medication under this chapter, that the patient is
- 13 making an informed decision;
- 14 (10) Fulfill the medical record documentation requirements
- 15 of section -12;
- 16 (11) Ensure that all appropriate steps are carried out in
- 17 accordance with this chapter before writing a
- 18 prescription for medication to enable a qualified
- 19 patient to end the qualified patient's life in a
- 20 humane and dignified manner; and
- 21 (12) Dispense medications:



- 1 (A) Directly, including ancillary medications
2 intended to facilitate the desired effect to
3 minimize the qualified patient's discomfort;
4 provided that the attending physician is legally
5 authorized to dispense and has a current Drug
6 Enforcement Administration certificate; or
7 (B) With the qualified patient's written consent:
8 (i) Contact a pharmacist and inform the
9 pharmacist of the prescription; and
10 (ii) Deliver the written prescription personally,
11 by mail or facsimile to the pharmacist, who
12 shall dispense the medications directly to
13 either the qualified patient, the attending
14 physician, or an expressly identified agent
15 of the qualified patient. Medications
16 dispensed pursuant to this clause shall not
17 be dispensed by mail or other form of
18 courier.
- 19 (b) The attending physician may sign the qualified
20 patient's death certificate. The certificate shall list the
21 underlying terminal disease as the cause of death.



1 § -5 **Consulting physician confirmation.** Before a
2 patient is qualified under this chapter, a consulting physician
3 shall:

4 (1) Examine the patient and the patient's relevant medical
5 records;

6 (2) Confirm, in writing, the attending physician's
7 diagnosis that the patient is suffering from a
8 terminal disease; and

9 (3) Verify that the patient is competent, is acting
10 voluntarily, and has made an informed decision.

11 § -6 **Counseling referral.** If, in the opinion of the
12 attending physician or the consulting physician, a patient may
13 be suffering from a psychiatric or psychological disorder or
14 depression causing impaired judgment, either physician shall
15 refer the patient for counseling. The attending physician shall
16 not prescribe medication to end a patient's life in a humane and
17 dignified manner until the person performing the counseling
18 determines that the patient is not suffering from a psychiatric
19 or psychological disorder or depression causing impaired
20 judgment.



1 § -7 Informed decision. A person shall not receive a
2 prescription for medication to end the person's life in a humane
3 and dignified manner unless the person has made an informed
4 decision. Immediately before writing a prescription for
5 medication under this chapter, the attending physician shall
6 verify that the person is making an informed decision.

7 § -8 Notification of next of kin. The attending
8 physician shall recommend that the patient notify the next of
9 kin of the patient's request for medication under this chapter.
10 A patient who declines or is unable to notify next of kin shall
11 not have the patient's request denied for that reason.

12 § -9 Written and oral requests. To receive a
13 prescription for medication that the qualified patient may self-
14 administer to end the qualified patient's life in a humane and
15 dignified manner, a qualified patient shall have made an oral
16 request and a written request, and reiterate the oral request to
17 the qualified patient's attending physician at least fifteen
18 days after making the initial oral request. At the time the
19 qualified patient makes the qualified patient's second oral
20 request, the attending physician shall offer the qualified
21 patient an opportunity to rescind the request.



1 § -10 **Right to rescind request.** A patient may rescind
2 the patient's request at any time and in any manner without
3 regard to the patient's mental state. The attending physician
4 may not write a prescription for medication under this chapter
5 without first offering the qualified patient an opportunity to
6 rescind the request.

7 § -11 **Waiting periods.** (a) At least fifteen days shall
8 elapse between the patient's initial oral request and the
9 writing of a prescription under this chapter.

10 (b) At least forty-eight hours shall elapse between the
11 date the patient signs the written request and the writing of a
12 prescription under this chapter.

13 § -12 **Medical record documentation requirements.** The
14 following shall be documented or filed in the patient's medical
15 record:

- 16 (1) All oral requests by a patient for medication to end
17 the patient's life in a humane and dignified manner;
- 18 (2) All written requests by a patient for medication to
19 end the patient's life in a humane and dignified
20 manner;



1 (3) The attending physician's diagnosis and prognosis, and
2 determination that the patient is competent, is acting
3 voluntarily, and has made an informed decision;

4 (4) The consulting physician's diagnosis and prognosis,
5 and verification that the patient is competent, is
6 acting voluntarily, and has made an informed decision;

7 (5) A report of the outcome and determinations made during
8 counseling, if performed;

9 (6) The attending physician's offer to the patient to
10 rescind the patient's request at the time of the
11 patient's second oral request under section -9; and

12 (7) A note by the attending physician indicating that all
13 requirements under this chapter have been met and the
14 steps taken to carry out the request, including a
15 notation of the medication prescribed.

16 § -13 **Residency requirement.** Only requests made under
17 this chapter by residents of the State may be granted. Factors
18 demonstrating residency in the State include:

19 (1) Possession of a Hawaii driver's license;

20 (2) Registration to vote in Hawaii; or



1 (3) Evidence that the person owns or leases property in
2 Hawaii.

3 § -14 Disposal of unused medications. Any medication
4 dispensed under this chapter that was not self-administered
5 shall be disposed of by lawful means.

6 § -15 Reporting of information to the department of
7 health; adoption of rules; information collected not a public
8 record; annual statistical report. (a) The department shall
9 annually review all records maintained under this chapter.

10 (b) The department shall require any health care provider
11 upon writing a prescription or dispensing medication under this
12 chapter to file a copy of the dispensing record and other
13 administratively required documentation with the department.
14 All administratively required documentation shall be mailed or
15 otherwise transmitted to the department as allowed by the rules
16 of the department no later than thirty calendar days after the
17 writing of a prescription and dispensing of medication under
18 this chapter; provided that all documents required to be filed
19 with the department by the prescribing physician after the death
20 of the patient shall be mailed no later than thirty calendar
21 days after the date of death of the patient. If any person who



1 is required under this chapter to report information to the
2 department provides an inadequate or incomplete report, the
3 department shall contact the person to request a complete
4 report.

5 (c) The department shall adopt rules under chapter 91 to
6 facilitate the collection of information regarding compliance
7 with this chapter; provided that the information collected shall
8 not be subject to disclosure under chapter 92F and may not be
9 made available for inspection by the public.

10 (d) The department shall generate and make available to
11 the public an annual statistical report of information collected
12 under subsection (c).

13 § -16 **Effect on construction of wills, contracts, and**
14 **statutes.** (a) Any provision in a contract, will, or other
15 agreement, whether written or oral, to the extent the provision
16 would affect whether a person may make or rescind a request for
17 medication to end the person's life in a humane and dignified
18 manner, is not valid.

19 (b) Any obligation owing under any currently existing
20 contract shall not be conditioned or affected by the making or



1 rescinding of a request, by a person, for medication to end the
2 person's life in a humane and dignified manner.

3 § -17 Insurance or annuity policies. The sale,
4 procurement, or issuance of any life, health, or accident
5 insurance or annuity policy or the rate charged for any policy
6 shall not be conditioned upon, or affected by, the making or
7 rescinding of a request, by a person, for medication that the
8 patient may self-administer to end the person's life in a humane
9 and dignified manner. A qualified patient's act of ingesting
10 medication to end the qualified patient's life in a humane and
11 dignified manner shall not have an effect upon a life, health,
12 or accident insurance or annuity policy.

13 § -18 Authority of chapter; references to practices
14 under this chapter; applicable standard of care. (a) Nothing
15 in this chapter authorizes a physician or any other person to
16 end a patient's life by lethal injection, mercy killing, or
17 active euthanasia. Actions taken in accordance with this
18 chapter do not, for any purpose, constitute suicide, assisted
19 suicide, mercy killing, or homicide, under the law. State
20 reports shall refer to practice under this chapter not as



1 "suicide" or "assisted suicide," but as "obtaining and self-
2 administering life-ending medication".

3 (b) Nothing in this chapter shall be interpreted to lower
4 the applicable standard of care for the attending physician,
5 consulting physician, psychiatrist or psychologist, or other
6 health care provider participating under this chapter.

7 § -19 Immunities; basis for prohibiting health care
8 provider from participation; notification; permissible
9 sanctions. (a) Except as provided in this section and section
10 -20:

11 (1) A person shall not be subject to civil or criminal
12 liability or professional disciplinary action for
13 participating in good faith compliance with this
14 chapter, including being present when a qualified
15 patient takes the prescribed medication to end the
16 qualified patient's life in a humane and dignified
17 manner;

18 (2) A professional organization or association, or health
19 care provider, may not subject a person to censure,
20 discipline, suspension, loss of license, loss of
21 privileges, loss of membership, or other penalty for



1 participating or refusing to participate in good faith
2 compliance with this chapter;

3 (3) A patient's request for, or provision by, an attending
4 physician of medication in good faith compliance with
5 this chapter does not constitute neglect for any
6 purpose of law or provide the sole basis for the
7 appointment of a guardian or conservator; and

8 (4) Only willing health care providers shall participate
9 in the provision to a qualified patient of medication
10 to end the qualified patient's life in a humane and
11 dignified manner. If a health care provider is unable
12 or unwilling to carry out a patient's request under
13 this chapter, and the patient transfers the patient's
14 care to a new health care provider, the prior health
15 care provider shall transfer, upon request, a copy of
16 the patient's relevant medical records to the new
17 health care provider.

18 (b) A health care provider may prohibit another health
19 care provider from participating under this chapter on the
20 premises of the prohibiting provider if the prohibiting provider
21 has given notice to all health care providers with privileges to



1 practice on the premises and to the general public of the
2 prohibiting provider's policy regarding participating under this
3 chapter; provided that this subsection shall not prevent a
4 health care provider from providing health care services to a
5 patient that do not constitute participation under this chapter.

6 (c) A health care provider may subject another health care
7 provider to the sanctions stated in this subsection if the
8 sanctioning health care provider has notified the sanctioned
9 provider before participation under this chapter that it
10 prohibits participation under this chapter:

11 (1) Loss of privileges, loss of membership, or other
12 sanctions provided under the medical staff bylaws,
13 policies, and procedures of the sanctioning health
14 care provider, if the sanctioned provider is a member
15 of the sanctioning provider's medical staff and
16 participates in this chapter while on the health care
17 facility premises of the sanctioning health care
18 provider, but not including the private medical office
19 of a physician or other provider;

20 (2) Termination of a lease or other property contract or
21 other nonmonetary remedies provided by a lease



1 contract, not including loss or restriction of medical
2 staff privileges or exclusion from a provider panel,
3 if the sanctioned provider participates in this
4 chapter while on the premises of the sanctioning
5 health care provider or on property that is owned by
6 or under the direct control of the sanctioning health
7 care provider; or

8 (3) Termination of a contract or other nonmonetary
9 remedies provided by contract if the sanctioned
10 provider participates in this chapter while acting in
11 the course and scope of the sanctioned provider's
12 capacity as an employee or independent contractor of
13 the sanctioning health care provider; provided that
14 nothing in this paragraph shall prevent:

15 (A) A health care provider from participating in this
16 chapter while acting outside the course and scope
17 of the provider's capacity as an employee or
18 independent contractor; or

19 (B) A patient from contracting with the patient's
20 attending physician and consulting physician to
21 act outside the course and scope of the



1 provider's capacity as an employee or independent
2 contractor of the sanctioning health care
3 provider.

4 (d) A health care provider that imposes sanctions under
5 subsection (c) shall follow all due process and other procedures
6 the sanctioning health care provider may have that are related
7 to the imposition of sanctions on another health care provider.

8 (e) References to "good faith" in this section do not
9 allow a lower standard of care for health care providers in the
10 State.

11 (f) For purposes of this subsection:

12 "Notify" means a separate statement in writing to the
13 health care provider that specifically informs the health care
14 provider before the provider's participation in this chapter of
15 the sanctioning health care provider's policy about
16 participation in activities covered by this chapter.

17 "Participate in this chapter" means to perform the duties
18 and responsibilities of an attending physician under section
19 -4, the consulting physician function under section -5, or
20 the counseling function under section -6.

21 "Participate in this chapter" does not include:



- 1 (1) Making an initial determination that a patient has a
- 2 terminal disease and informing the patient of the
- 3 medical prognosis;
- 4 (2) Providing information about this chapter to a patient
- 5 upon the request of the patient;
- 6 (3) Providing a patient, upon the request of the patient,
- 7 with a referral to another physician; or
- 8 (4) A patient contracting with the patient's attending
- 9 physician and consulting physician to act outside of
- 10 the course and scope of the provider's capacity as an
- 11 employee or independent contractor of the sanctioning
- 12 health care provider.

13 § -20 Wilful alteration or forgery; coercion or undue
14 influence; penalties; civil damages; other penalties not
15 precluded. (a) A person who, without authorization of the
16 patient, wilfully alters or forges a request for medication or
17 conceals or destroys a rescission of that request with the
18 intent or effect of causing the patient's death is guilty of a
19 class B felony.

20 (b) A person who coerces or exerts undue influence on a
21 patient to request medication to end the patient's life, or to

1 destroy a rescission of a request, is guilty of a class B
2 felony.

3 (c) This chapter does not limit further liability for
4 civil damages resulting from other negligent conduct or
5 intentional misconduct by any person.

6 (d) The penalties in this chapter do not preclude criminal
7 penalties applicable under other law for conduct that is
8 inconsistent with this chapter.

9 § -21 Claims by governmental entity for costs incurred.

10 Any governmental entity that incurs costs resulting from a
11 person terminating the person's life under this chapter in a
12 public place has a claim against the estate of the person to
13 recover costs and reasonable attorney's fees related to
14 enforcing the claim.

15 § -22 Form of the request. A request for a medication
16 as authorized by this chapter shall be in substantially the
17 following form:

18 REQUEST FOR MEDICATION TO END MY LIFE IN A HUMANE
19 AND DIGNIFIED MANNER

20 I,, am an adult of sound
21 mind.



1 I am suffering from, which
2 my attending physician has determined is a terminal disease and
3 which has been medically confirmed by a consulting physician.

4 I have been fully informed of my diagnosis, prognosis, the
5 nature of medication to be prescribed and potential associated
6 risks, the expected result, and the feasible alternatives,
7 including comfort care, hospice care, and pain control.

8 I request that my attending physician prescribe medication
9 that I may self-administer to end my life in a humane and
10 dignified manner and to contact any pharmacist to fill the
11 prescription.

12 INITIAL ONE:

13 I have informed my family of my decision and
14 taken their opinions into consideration.

15 I have decided not to inform my family of my
16 decision.

17 I have no family to inform of my decision.

18 I understand that I have the right to rescind this request
19 at any time.

20 I understand the full import of this request and I expect
21 to die when I take the medication to be prescribed. I further



1 understand that although most deaths occur within three hours,
2 my death may take longer and my physician has counseled me about
3 this possibility.

4 I make this request voluntarily and without reservation,
5 and I accept full moral responsibility for my actions.

6 Signed:

7 Dated:

8 DECLARATION OF WITNESSES

9 By initialing and signing below on or after the date the person
10 named above signs, we declare that the person making and signing
11 the above request:

| | | |
|-----------|-----------|--|
| Witness 1 | Witness 2 | |
| Initials | Initials | |
| | | Is personally known to us or has provided proof of identity. |
| | | Signed this request in our presence on the date of the person's signature. |
| | | Appears to be of sound mind and not under duress, fraud, or undue influence. |



| | | |
|--|--|--|
| | | Is not a patient for whom either of us is the attending physician. |
|--|--|--|

1

2 Printed Name of Witness 1:

3 Signature of Witness 1/Date:

4 Printed Name of Witness 2:

5 Signature of Witness 2/Date:

6 NOTE: One witness shall not be a relative by blood, marriage,
7 or adoption of the person signing this request, shall not be
8 entitled to any portion of the person's estate upon death, and
9 shall not own, operate, or be employed at a health care facility
10 where the person is a patient or resident. If the patient is an
11 inpatient at a health care facility, one of the witnesses shall
12 be an individual designated by the facility.

13 § -23 Short title. This act may be known and cited as
14 the Hawaii Death with Dignity Act."

15 SECTION 2. Section 327E-13, Hawaii Revised Statutes, is
16 amended by amending subsection (c) to read as follows:

17 "(c) This chapter shall not authorize mercy killing,
18 assisted suicide, euthanasia, or the provision, withholding, or
19 withdrawal of health care, to the extent prohibited by other



1 statutes of this State[-]; provided that this subsection shall
2 not apply to the obtaining and self-administering of life-ending
3 medication under chapter _____."

4 SECTION 3. Section 327H-2, Hawaii Revised Statutes, is
5 amended by amending subsection (b) to read as follows:

6 "(b) Nothing in this section shall be construed to:

- 7 (1) Expand the authorized scope of practice of any
8 licensed physician;
- 9 (2) Limit any reporting or disciplinary provisions
10 applicable to licensed physicians and surgeons who
11 violate prescribing practices; and
- 12 (3) Prohibit the discipline or prosecution of a licensed
13 physician for:
- 14 (A) Failing to maintain complete, accurate, and
15 current records that document the physical
16 examination and medical history of a patient, the
17 basis for the clinical diagnosis of a patient,
18 and the treatment plan for a patient;
- 19 (B) Writing false or fictitious prescriptions for
20 controlled substances scheduled in the Federal
21 Comprehensive Drug Abuse Prevention and Control



1 Act of 1970, 21 United States Code 801 et seq. or
2 in chapter 329;

3 (C) Prescribing, administering, or dispensing
4 pharmaceuticals in violation of the provisions of
5 the Federal Comprehensive Drug Abuse Prevention
6 and Control Act of 1970, 21 United States Code
7 801 et seq. or of chapter 329;

8 (D) Diverting medications prescribed for a patient to
9 the licensed physician's own personal use; and

10 (E) Causing, or assisting in causing, the suicide,
11 euthanasia, or mercy killing of any individual;
12 provided that it is not "causing, or assisting in
13 causing, the suicide, euthanasia, or mercy
14 killing of any individual" to prescribe,
15 dispense, or administer medical treatment for the
16 purpose of [~~treating~~]:

17 (i) Treating severe acute pain or severe chronic
18 pain, even if the medical treatment may
19 increase the risk of death, so long as the
20 medical treatment is not also furnished for
21 the purpose of causing, or the purpose of



1 assisting in causing, death for any
2 reason[-]; or
3 (ii) Participation as an attending physician or a
4 consulting physician under chapter ."

5 SECTION 4. Section 431:10D-108, Hawaii Revised Statutes,
6 is amended by amending subsection (b) to read as follows:

7 "(b) No policy of life insurance shall be delivered or
8 issued for delivery in this State if it contains a provision
9 which excludes or restricts liability for death caused in a
10 certain specified manner or occurring while the insured has a
11 specified status, except that the policy may contain provisions
12 excluding or restricting coverage as specified therein in event
13 of death under any one or more of the following circumstances:

- 14 (1) Death as a result directly or indirectly of war,
15 declared or undeclared, or of any act or hazard of
16 [such] war;
17 (2) Death as a result of aviation under conditions
18 specified in the policy;
19 (3) Death as a result of a specified hazardous occupation
20 or occupations;



- 1 (4) Death while the insured is a resident outside of the
2 United States and Canada; or
- 3 (5) Death within two years from the date of issue of the
4 policy as a result of suicide, while sane or
5 insane[-]; provided that this paragraph shall not
6 apply to death as a result of obtaining and self-
7 administering life-ending medication under chapter
8 _____."

9 SECTION 5. Section 431:10H-203, Hawaii Revised Statutes,
10 is amended by amending subsection (a) to read as follows:

11 "(a) A policy may not be delivered or issued for delivery
12 in this State as long-term care insurance if the policy limits
13 or excludes coverage by type of illness, treatment, medical
14 condition, or accident, except as follows:

- 15 (1) Preexisting conditions or diseases;
- 16 (2) Mental or nervous disorders; however, this shall not
17 permit exclusion or limitation of benefits on the
18 basis of Alzheimer's disease;
- 19 (3) Alcoholism and drug addiction;
- 20 (4) Illness, treatment, or medical condition arising out
21 of:



- 1 (A) War or act of war, whether declared or
- 2 undeclared;
- 3 (B) Participation in a felony, riot, or insurrection;
- 4 (C) Service in the armed forces or units auxiliary
- 5 thereto;
- 6 (D) Suicide (sane or insane), attempted suicide, or
- 7 intentionally self-inflicted injury; provided
- 8 that this subparagraph shall not apply to the
- 9 obtaining and self-administering of life-ending
- 10 medication under chapter _____; or
- 11 (E) Aviation (this exclusion applies only to non-
- 12 fare-paying passengers);
- 13 (5) Treatment provided in a government facility (unless
- 14 required by law), services for which benefits are
- 15 available under medicare or other governmental program
- 16 (except medicaid), any state or federal workers'
- 17 compensation, employer's liability, or occupational
- 18 disease law, or any motor vehicle insurance law,
- 19 services provided by a member of the covered person's
- 20 immediate family, and services for which no charge is
- 21 normally made in the absence of insurance;



1 (6) Expenses for services or items available or paid under
2 another long-term care insurance or health insurance
3 policy; or

4 (7) In the case of a qualified long-term care insurance
5 contract, expenses for services or items to the extent
6 that the expenses are reimbursable under title XVIII
7 of the Social Security Act or would be so reimbursable
8 but for the application of a deductible or coinsurance
9 amount."

10 SECTION 6. Section 453-8, Hawaii Revised Statutes, is
11 amended by amending subsection (a) to read as follows:

12 "(a) In addition to any other actions authorized by law,
13 any license to practice medicine and surgery may be revoked,
14 limited, or suspended by the board at any time in a proceeding
15 before the board, or may be denied, for any cause authorized by
16 law, including but not limited to the following:

17 (1) Procuring, or aiding or abetting in procuring, a
18 criminal abortion;

19 (2) Employing any person to solicit patients for one's
20 self;



- 1 (3) Engaging in false, fraudulent, or deceptive
2 advertising, including but not limited to:
 - 3 (A) Making excessive claims of expertise in one or
4 more medical specialty fields;
 - 5 (B) Assuring a permanent cure for an incurable
6 disease; or
 - 7 (C) Making any untruthful and improbable statement in
8 advertising one's medical or surgical practice or
9 business;
- 10 (4) Being habituated to the excessive use of drugs or
11 alcohol; or being addicted to, dependent on, or a
12 habitual user of a narcotic, barbiturate, amphetamine,
13 hallucinogen, or other drug having similar effects;
- 14 (5) Practicing medicine while the ability to practice is
15 impaired by alcohol, drugs, physical disability, or
16 mental instability;
- 17 (6) Procuring a license through fraud, misrepresentation,
18 or deceit, or knowingly permitting an unlicensed
19 person to perform activities requiring a license;



- 1 (7) Professional misconduct, hazardous negligence causing
2 bodily injury to another, or manifest incapacity in
3 the practice of medicine or surgery;
- 4 (8) Incompetence or multiple instances of negligence,
5 including but not limited to the consistent use of
6 medical service, which is inappropriate or
7 unnecessary;
- 8 (9) Conduct or practice contrary to recognized standards
9 of ethics of the medical profession as adopted by the
10 Hawaii Medical Association, the American Medical
11 Association, the Hawaii Association of Osteopathic
12 Physicians and Surgeons, or the American Osteopathic
13 Association;
- 14 (10) Violation of the conditions or limitations upon which
15 a limited or temporary license is issued;
- 16 (11) Revocation, suspension, or other disciplinary action
17 by another state or federal agency of a license,
18 certificate, or medical privilege;
- 19 (12) Conviction, whether by nolo contendere or otherwise,
20 of a penal offense substantially related to the
21 qualifications, functions, or duties of a physician or



1 osteopathic physician, notwithstanding any statutory
2 provision to the contrary;

3 (13) Violation of chapter 329, the uniform controlled
4 substances act, or any rule adopted thereunder except
5 as provided in section 329-122;

6 (14) Failure to report to the board, in writing, any
7 disciplinary decision issued against the licensee or
8 the applicant in another jurisdiction within thirty
9 days after the disciplinary decision is issued; or

10 (15) Submitting to or filing with the board any notice,
11 statement, or other document required under this
12 chapter, which is false or untrue or contains any
13 material misstatement or omission of fact[-];

14 provided that this subsection shall not apply to the
15 participation of an attending physician or consulting physician
16 under chapter _____."

17 SECTION 7. Section 707-702, Hawaii Revised Statutes, is
18 amended by amending subsection (1) to read as follows:

19 "(1) A person commits the offense of manslaughter if:

20 (a) The person recklessly causes the death of another
21 person; or



1 (b) The person intentionally causes another person to
 2 commit suicide[-]; provided that this paragraph shall
 3 not apply to the participation of an attending
 4 physician or consulting physician under chapter _____."

5 SECTION 8. This Act does not affect rights and duties that
 6 matured, penalties that were incurred, and proceedings that were
 7 begun before its effective date.

8 SECTION 9. Statutory material to be repealed is bracketed
 9 and stricken. New statutory material is underscored.

10 SECTION 10. This Act shall take effect on January 1, 2018.

11

INTRODUCED BY:

K. J.

Christy M. Ay

JAN 20 2017



H.B. NO. 550

Report Title:

Death with Dignity

Description:

Authorizes terminally ill adults seeking to end their life to request lethal doses of medication from medical and osteopathic physicians.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

