Amendment - 1st Reading-white - Requested by: Lola Sheldon-Galloway - (H) Human Services - 2023						
68th Legislature 2023		Drafter: Milly Allen, 406-444-9280	HB0873.001.003			
1		HOUSE BILL NO. 873				
2		INTRODUCED BY L. SHELDON-GALLOWAY				
3						
4	A BILL FOR A	N ACT ENTITLED: "AN ACT PROVIDING FOR THE DIGNIFIED TREATMENT	OF AND			
5	DISPOSITION	I OF FETAL REMAINS FOLLOWING A SPONTANEOUS MISCARRIAGE OR A	ABORTION;			
6	PROVIDING F	RULEMAKING AUTHORITY; PROVIDING DEFINITIONS; PROVIDING AN APP	PROPRIATION;			
7	AMENDING S	SECTIONS 37-19-101 AND 50-20-105, MCA; AND PROVIDING AN EFFECTIVE	E DATE."			
8						
9	BE IT ENACT	ED BY THE LEGISLATURE OF THE STATE OF MONTANA:				
10						
11	NEW	SECTION. Section 1. Disposition of fetal remains. (1) Immediately after a s	spontaneous			
12	miscarriage or	r an abortion, a health care provider shall:				
13	(a)	disclose to the parent or parents of the fetus, both orally and in writing, the rig	of the parent or			
14	parents to dete	ermine the final disposition of the fetal remains; and				
15	(b)	provide the parent or parents of the fetus with written information concerning	but not limited to:			
16	(i)	the 10-business-day timeframe for determining the final disposition of fetal re-	mains;			
17	(ii)	the available options for disposition of the fetal remains;				
18	(iii)	the right of the parent or parents to take the fetal remains and to determine th	e final disposition			
19	themselves; a	nd				
20	(iv)	the health care provider's procedure for the final disposition of fetal remains in	n accordance with			
21	subsection (4))(b)(ii).				
22	(2)	(a) Within 10 business days after a spontaneous miscarriage or an abortion,	the parent or			
23	parents of a m	niscarried or aborted fetus shall inform the health care provider of the parent's o	r parents' decision			
24	for the final disposition of the fetus after receiving the information required under subsection (1).					
25	(b)	The health care provider shall document the parent's or parents' decision in the	he medical record.			
26	(c)	If the parent or parents are under 18 years of age and have not been emanci	pated by court			
27	order, the doc	umentation must include consent of their parent or parents.				



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1	(3)	If the parent or parents of the miscarried or aborted fetus choose a method of disposition other			
2		d of final disposition utilized by the health care provider under subsection (4)(b)(ii), the parent or			
3		ponsible for the costs related to the final disposition of the fetus.			
4	. (4)	Following a spontaneous miscarriage or abortion, the health care provider shall:			
5	(a)	ensure that the fetal remains are retained until final disposition is arranged. If the remains are			
6	stored by the h	ealth care provider, the remains must be stored:			
7	(i)	in the same manner as human remains and not as pathological waste; and			
8	(ii)	at no cost to the parent or parents; and			
9	(b)	provide for the final disposition of the fetal remains by:			
10	(i)	releasing fetal remains to the parent or parents immediately on request; or			
11	(ii)	cremating or interring the fetal remains within 10 business days after the parent or parents			
12	decline to take responsibility for the remains or after no determination has been made by the parent or parents				
13	within the initia	al 10-business-day timeframe described in subsection (2)(a).			
14	(5)	The department shall design and adopt in administrative rule a form that a health care provider			
15	shall complete	for each spontaneous miscarriage or abortion. The form may not include information that could			
16	be used to personally identify the parent or parents of the fetus, but must document:				
17	(a)	the age of the parent or parents of the fetal remains;			
18	(b)	a designation of the final disposition of the fetal remains; and			
19	(c)	any other information required by the department, including but not limited to:			
20	(i)	the gestational age of the fetus;			
21	(ii)	the sex of the fetus;			
22	(iii)	whether the fetus was part of a multiple birth or multiple fetus pregnancy; and			
23	(iv)	any other information that could aid in developing an understanding of the causes of			
24	spontaneous miscarriage.				
25	<u>(6)</u>	Fetal remains of any gestational age may not be sold.			
26	<u>(7)</u>	Fetal remains of any gestational age may not be used for scientific research.			
27	(6)<u>(8)</u>	For the purposes of this section, the following terms apply:			



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1	(a)	"Cremating" has the same meaning as "cremation" provided in 37-19-101.				
2	(b)	"Interring" has the same meaning as "interment" provided in 37-19-101.				
3	(c)	"Pathological waste" means human tissues, organs, and blood or body fluids in liquid c	r			
4	semiliquid form	that are removed from a person for medical purposes. The term does not include amputations				
5	or fetal remain	З.				
6	(d)	"Spontaneous miscarriage" means the natural or accidental termination of a pregnancy	and the			
7	expulsion of the	the fetus, typically caused by genetic defects in the fetus or physical abnormalities in the pregnant				
8	woman.					
9						
10	Sectio	on 2. Section 37-19-101, MCA, is amended to read:				
11	"37-19	9-101. Definitions. Unless the context requires otherwise, in this chapter, the following				
12	definitions app	bly:				
13	(1)	"Arrangements" includes:				
14	(a)	planning the details of funeral service, including time of service, type of service, and, if				
15	requested, acq	ested, acquiring the services of clergy;				
16	(b)	obtaining the necessary information for filing death certificates;				
17	(c)	comparing or discussing prices, including merchandise prices and financial arrangeme	nts; and			
18	(d)	providing for onsite direction and coordination of participants and onsite direction, coor	dination,			
19	and facilitation	n at funeral, graveside, or memorial services or rites.				
20	(2)	"At-need arrangements" means arrangements made by an authorized person on behal	fofa			
21	deceased.					
22	(3)	"Authorizing agent" means a person legally entitled to order the final disposition of hum	ian			
23	remains, incluc	ding burial, cremation, entombment, donation to medical science, or other means. The or	der of			
24	preference for	nce for an authorizing agent is subject to the priority of rights of disposition established in 37-19-904.				
25	(4)	"Board" means the board of funeral service provided for in 2-15-1743.				
26	(5)	"Branch establishment" means a separate facility that may or may not have a suitable	visitation			
27		ration room and that is owned by, a subsidiary of, or otherwise financially connected to o				

