

CHAPTER 406

HEALTH AND ENVIRONMENT

SENATE BILL 24-068

BY SENATOR(S) Ginal, Cutter, Hansen, Hinrichsen, Jaquez Lewis, Marchman, Michaelson Jenet, Fenberg;
also REPRESENTATIVE(S) Brown, Epps, Bird, Boesenecker, Clifford, Daugherty, deGruy Kennedy, Froelich, Garcia,
Hernandez, Herod, Kipp, Lieder, Lindsay, Lindstedt, Mabrey, Mauro, McCormick, McLachlan, Parenti, Rutinel, Story, Titone,
Valdez, Velasco, Vigil, Willford, Woodrow, Young.

AN ACT**CONCERNING END-OF-LIFE OPTIONS FOR AN INDIVIDUAL WITH A TERMINAL ILLNESS.**

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. In Colorado Revised Statutes, 25-48-102, **amend** (2), (3), (4), (5), (7), (9), (10), (12), (13), (15), and (16); **repeal** (8); and **add** (1.5) as follows:

25-48-102. Definitions. As used in this article 48, unless the context otherwise requires:

(1.5) "ADVANCED PRACTICE REGISTERED NURSE" HAS THE SAME MEANING AS SET FORTH IN SECTION 12-255-104 (1).

(2) "~~Attending physician~~ PROVIDER" means a physician OR ADVANCED PRACTICE REGISTERED NURSE who has primary responsibility for the care of a terminally ill individual and the treatment of the individual's terminal illness.

(3) "~~Consulting physician~~ PROVIDER" means a physician OR ADVANCED PRACTICE REGISTERED NURSE who is qualified by specialty or experience to make a professional diagnosis and prognosis regarding a terminally ill individual's illness.

(4) "Health-care provider" or "provider" means a person who is licensed, certified, registered, or otherwise authorized or permitted by law to administer health care or dispense medication in the ordinary course of business or practice of a profession. ~~The term includes a health-care facility, including a long-term care facility as defined in section 25-3-103.7 (1)(f.3) and a continuing care retirement community as described in section 25.5-6-203 (1)(c)(I)(A).~~

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

(5) "Informed decision" means a decision ~~that is~~ BY A MENTALLY CAPABLE INDIVIDUAL TO REQUEST AND OBTAIN A PRESCRIPTION FOR MEDICATION PURSUANT TO THIS ARTICLE 48, THAT THE QUALIFIED INDIVIDUAL MAY SELF-ADMINISTER TO BRING ABOUT DEATH, AFTER BEING FULLY INFORMED BY THE ATTENDING PROVIDER AND THE CONSULTING PROVIDER OF:

~~(a) Made by an individual to obtain a prescription for medical aid-in-dying medication that the qualified individual may decide to self-administer to end his or her life in a peaceful manner~~ THE INDIVIDUAL'S DIAGNOSIS AND PROGNOSIS;

~~(b) Based on an understanding and acknowledgment of the relevant facts; and~~ THE POTENTIAL RISKS ASSOCIATED WITH TAKING THE MEDICATION TO BE PRESCRIBED;

~~(c) Made after the attending physician fully informs the individual of:~~ THE PROBABLE RESULT OF TAKING THE MEDICATION TO BE PRESCRIBED;

~~(f) His or her medical diagnosis and prognosis of six months or less;~~

~~(H) The potential risks associated with taking the medical aid-in-dying medication to be prescribed;~~

~~(III) The probable result of taking the medical aid-in-dying medication to be prescribed;~~

~~(IV) The choices available to an individual that demonstrate his or her self-determination and intent to end his or her life in a peaceful manner, including the ability to choose whether to:~~

~~(A) Request medical aid in dying;~~

~~(B) Obtain a prescription for medical aid-in-dying medication to end his or her life;~~

~~(C) Fill the prescription and possess medical aid-in-dying medication to end his or her life; and~~

~~(D) Ultimately self-administer the medical aid-in-dying medication to bring about a peaceful death; and~~

~~(V) All feasible alternatives or additional treatment opportunities, including comfort care, palliative care, hospice care, and pain control.~~

(d) THE FEASIBLE END-OF-LIFE CARE AND TREATMENT OPTIONS FOR THE INDIVIDUAL'S TERMINAL DISEASE, INCLUDING COMFORT CARE, PALLIATIVE CARE,

HOSPICE CARE, AND PAIN CONTROL, AND THE RISKS AND BENEFITS OF EACH OF THESE OPTIONS; AND

(e) THE INDIVIDUAL'S RIGHT TO WITHDRAW A REQUEST PURSUANT TO THIS ARTICLE 48 OR WITHDRAW CONSENT FOR ANY OTHER TREATMENT AT ANY TIME.

(7) ~~"Medical aid-in-dying" means the medical practice of a physician prescribing medical aid-in-dying medication to a qualified individual that the individual may choose to self-administer to bring about a peaceful death~~ PRACTICE OF EVALUATING A REQUEST, THE DETERMINING OF QUALIFICATION, THE PERFORMING OF THE DUTIES IN SECTIONS 25-48-106 AND 25-48-107, AND THE PROVIDING OF A PRESCRIPTION TO A QUALIFIED INDIVIDUAL PURSUANT TO THIS ARTICLE 48.

(8) ~~"Medical aid-in-dying medication" means medication prescribed by a physician pursuant to this article to provide medical aid in dying to a qualified individual.~~

(9) ~~"Medically confirmed" means that a consulting physician who~~ PROVIDER has examined the terminally ill individual and the individual's relevant medical records AND has confirmed the medical opinion of the attending ~~physician~~ PROVIDER.

(10) "Mental capacity" or "mentally capable" means that in the opinion of an individual's attending ~~physician~~ PROVIDER, consulting ~~physician~~ PROVIDER, psychiatrist, or psychologist, the individual has the ability to make and communicate an informed decision to health-care providers.

(12) ~~"Prognosis of six months or less" means a prognosis resulting from a terminal illness that the illness will, within reasonable medical judgment, result in death within six months. and which has been medically confirmed.~~

(13) (a) ~~"Qualified individual" means a terminally ill adult with a prognosis of six months or less, who has mental capacity, has made an informed decision, is a resident of the state and has satisfied the requirements of this article in order to obtain a prescription for medical aid-in-dying medication to end his or her life in a peaceful manner~~ WHO IS A CAPABLE ADULT AND WHO HAS SATISFIED THE REQUIREMENTS OF THIS ARTICLE 48 IN ORDER TO OBTAIN A PRESCRIPTION FOR MEDICATION TO BRING ABOUT A DEATH.

(b) AN INDIVIDUAL IS NOT A "QUALIFIED INDIVIDUAL" BASED SOLELY ON THE INDIVIDUAL'S AGE OR DISABILITY.

(15) (a) ~~"Self-administer" means WHEN a qualified individual's affirmative, conscious, and physical act of administering the medical aid-in-dying medication to himself or herself to bring about his or her own death~~ INDIVIDUAL PERFORMS AN AFFIRMATIVE, CONSCIOUS, VOLUNTARY ACT TO INGEST MEDICATION PRESCRIBED PURSUANT TO THIS ARTICLE 48 TO BRING ABOUT THE INDIVIDUAL'S DEATH.

Capital letters or bold & italic numbers indicate new material added to existing law; dashes through words or numbers indicate deletions from existing law and such material is not part of the act.

(b) "SELF-ADMINISTER" DOES NOT INCLUDE ADMINISTRATION BY PARENTERAL INJECTION OR INFUSION.

(16) "Terminal illness" means an incurable and irreversible ~~illness~~ DISEASE that HAS BEEN MEDICALLY CONFIRMED AND will, within reasonable medical judgment, result in death WITHIN SIX MONTHS.

SECTION 2. In Colorado Revised Statutes, 25-48-103, **amend** (1)(a) and (1)(b) as follows:

25-48-103. Right to request medical aid-in-dying medication. (1) An adult resident of Colorado may make a request, in accordance with sections 25-48-104 and 25-48-112, to receive a prescription for medical aid-in-dying medication if:

(a) The individual's attending ~~physician~~ PROVIDER has diagnosed the individual with a terminal illness with a prognosis of six months or less;

(b) The individual's attending ~~physician~~ PROVIDER has determined the individual has mental capacity; and

SECTION 3. In Colorado Revised Statutes, 25-48-104, **amend** (1) and (2)(c) as follows:

25-48-104. Request process - witness requirements. (1) (a) EXCEPT AS PROVIDED IN SUBSECTION (1)(b) OF THIS SECTION, in order to receive a prescription for medical aid-in-dying medication pursuant to this ~~article~~ ARTICLE 48, an individual who satisfies the requirements in section 25-48-103 must make two oral requests, separated by at least ~~fifteen~~ SEVEN days, and a valid written request to ~~his or her~~ THE INDIVIDUAL'S attending ~~physician~~ PROVIDER.

(b) IF AN INDIVIDUAL'S ATTENDING PROVIDER HAS DETERMINED THAT THE INDIVIDUAL WILL, WITHIN REASONABLE MEDICAL JUDGMENT, DIE WITHIN FORTY-EIGHT HOURS AFTER MAKING THE INITIAL ORAL REQUEST UNDER THIS SECTION, THE INDIVIDUAL MAY SATISFY THE REQUIREMENTS OF THIS SECTION BY REITERATING THE ORAL REQUEST TO THE ATTENDING PROVIDER AT ANY TIME AFTER MAKING THE INITIAL ORAL REQUEST.

(2) (c) ~~Neither~~ The individual's attending ~~physician~~ ~~nor~~ OR CONSULTING PROVIDER OR a person authorized as the individual's qualified power of attorney or durable medical power of attorney shall NOT serve as a witness to the written request.

SECTION 4. In Colorado Revised Statutes, 25-48-105, **amend** (2) as follows:

25-48-105. Right to rescind request - requirement to offer opportunity to rescind. (2) An attending ~~physician~~ PROVIDER shall not write a prescription for

medical aid-in-dying medication under this ~~article~~ ARTICLE 48 unless the attending ~~physician~~ PROVIDER offers the qualified individual an opportunity to rescind the request for the medical aid-in-dying medication.

SECTION 5. In Colorado Revised Statutes, 25-48-106, **amend** (1) introductory portion, (1)(d), (1)(f), (1)(h) introductory portion, (1)(h)(IV), (1)(i), and (1)(l) as follows:

25-48-106. Attending provider responsibilities. (1) The attending ~~physician~~ PROVIDER shall:

(d) Refer the individual to a consulting ~~physician~~ PROVIDER for medical confirmation of the diagnosis and prognosis and for a determination of whether the individual is mentally capable, ~~is~~ making an informed decision, and acting voluntarily;

(f) Refer the individual to a licensed mental health professional pursuant to section 25-48-108 if the attending ~~physician believes that the individual may not be mentally capable of making an informed decision~~ PROVIDER OBSERVES SIGNS THAT THE INDIVIDUAL MAY NOT BE CAPABLE OF MAKING AN INFORMED DECISION;

(h) ~~Counsel~~ EDUCATE the individual about the importance of:

(IV) Notifying ~~his or her~~ THE INDIVIDUAL'S next of kin OR ANY PERSON WHO PLAYS A SIGNIFICANT ROLE IN THE INDIVIDUAL'S LIFE, WHICH MAY INCLUDE A PERSON NOT LEGALLY RELATED TO THE INDIVIDUAL, of the request for medical aid-in-dying medication;

(i) Inform the individual that ~~he or she~~ THE INDIVIDUAL may rescind the request for medical aid-in-dying medication at any time ~~and in any manner~~ PURSUANT TO THIS ARTICLE 48;

(l) Either:

(I) Dispense medical aid-in-dying medications directly to the qualified individual, including ancillary medications intended to minimize the individual's discomfort, if the attending ~~physician~~ PROVIDER has a current drug enforcement administration certificate and complies with any applicable administrative rule; or

(II) Deliver the written prescription personally, by mail, or through authorized electronic transmission in the manner permitted under article 280 of title 12, to a licensed pharmacist, who shall dispense the medical aid-in-dying medication to the qualified individual, the attending ~~physician~~ PROVIDER, or an individual expressly designated by the qualified individual.

SECTION 6. In Colorado Revised Statutes, **amend** 25-48-107 as follows:

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25-48-107. Consulting provider responsibilities. (1) Before an individual who is requesting medical aid-in-dying medication may receive a prescription for the medical aid-in-dying medication, a consulting ~~physician~~ PROVIDER must:

~~(1)~~ (a) Examine the individual and ~~his or her~~ THE INDIVIDUAL'S relevant medical records; AND

~~(2)~~ (b) Confirm, in writing, to the attending ~~physician~~ PROVIDER THAT THE INDIVIDUAL:

~~(a)~~ (I) ~~That the individual~~ Has a terminal illness;

~~(b)~~ (II) ~~The individual~~ Has a prognosis of six months or less;

~~(c)~~ (III) ~~That the individual~~ Is making an informed decision; and

~~(d)~~ (IV) ~~That the individual~~ Is mentally capable, or provide documentation that the consulting ~~physician~~ PROVIDER has referred the individual for further evaluation in accordance with section 25-48-108; AND

(V) HAS REQUESTED A PRESCRIPTION FOR MEDICAL AID-IN-DYING MEDICATION.

SECTION 7. In Colorado Revised Statutes, **repeal and reenact, with amendments**, 25-48-108 as follows:

25-48-108. Confirmation that individual is mentally capable - referral to mental health professional. (1) IF EITHER THE ATTENDING PROVIDER OR THE CONSULTING PROVIDER HAS DOUBTS AS TO WHETHER AN INDIVIDUAL IS MENTALLY CAPABLE, THE PROVIDER SHALL REFER THE INDIVIDUAL TO A LICENSED MENTAL HEALTH PROVIDER FOR DETERMINATION REGARDING MENTAL CAPABILITY.

(2) THE LICENSED MENTAL HEALTH PROVIDER TO WHOM THE INDIVIDUAL IS REFERRED PURSUANT TO SUBSECTION (1) OF THIS SECTION SHALL SUBMIT TO THE REQUESTING ATTENDING PROVIDER OR THE CONSULTING PROVIDER WHO REFERRED THE INDIVIDUAL A WRITTEN DETERMINATION OF WHETHER THE INDIVIDUAL IS MENTALLY CAPABLE.

(3) IF THE LICENSED MENTAL HEALTH PROVIDER DETERMINES THAT THE INDIVIDUAL IS NOT MENTALLY CAPABLE, THE INDIVIDUAL IS NOT A QUALIFIED INDIVIDUAL AND THE ATTENDING PROVIDER SHALL NOT PRESCRIBE MEDICATION TO THE INDIVIDUAL UNDER THIS ARTICLE 48.

SECTION 8. In Colorado Revised Statutes, 25-48-109, **amend** (1) as follows:

25-48-109. Death certificate. (1) Unless otherwise prohibited by law, the attending ~~physician~~ PROVIDER or the hospice medical director shall sign the death

certificate of a qualified individual who obtained and self-administered MEDICAL aid-in-dying medication.

SECTION 9. In Colorado Revised Statutes, 25-48-110, **amend** (2) as follows:

25-48-110. Informed decision required. (2) Immediately before writing a prescription for medical aid-in-dying medication under this ~~article~~ ARTICLE 48, the attending ~~physician~~ PROVIDER shall verify that the individual with a terminal illness is making an informed decision.

SECTION 10. In Colorado Revised Statutes, 25-48-111, **amend** (1) introductory portion, (1)(c), (1)(d), and (1)(g) as follows:

25-48-111. Medical record documentation requirements - reporting requirements - department compliance reviews - rules. (1) The attending ~~physician~~ PROVIDER shall document in the individual's medical record, the following information:

(c) The attending ~~physician's~~ PROVIDER'S diagnosis and prognosis, determination of mental capacity, and that the individual is making a voluntary request and an informed decision;

(d) The consulting ~~physician's~~ PROVIDER'S confirmation of diagnosis and prognosis, mental capacity, and that the individual is making an informed decision;

(g) A notation by the attending ~~physician~~ PROVIDER that all requirements under this ~~article~~ ARTICLE 48 have been satisfied AND indicating steps taken to carry out the request, including a notation of the medical aid-in-dying medications prescribed and when.

SECTION 11. In Colorado Revised Statutes, **amend** 25-48-112 as follows:

25-48-112. Form of written request. (1) A request for medical aid-in-dying medication authorized by this ~~article~~ ARTICLE 48 must be in substantially the following form:

Request for medication to end my life
in a peaceful manner

I, _____ am an adult of sound mind. I am suffering from _____, which my attending ~~physician~~ PROVIDER has determined is a terminal illness and which has been medically confirmed. I have been fully informed of my diagnosis and prognosis of six months or less, the nature of the medical aid-in-dying medication to be prescribed and potential associated risks, the expected result, and the feasible alternatives or additional treatment opportunities, including comfort care, palliative care, hospice care, and pain control.

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I request that my attending ~~physician~~ PROVIDER prescribe medical aid-in-dying medication that will end my life in a peaceful manner if I choose to take it, and I authorize my attending ~~physician~~ PROVIDER to contact any pharmacist about my request.

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

~~I understand the seriousness of this request, and I expect to die if I take the aid-in-dying medication prescribed.~~

I further understand that although most deaths occur within three hours, my death may take longer, and my attending ~~physician~~ PROVIDER has counseled me about this possibility. I make this request voluntarily, without reservation, and without being coerced, and I accept full responsibility for my actions.

Signed: _____
Dated: _____

Declaration of witnesses

We declare that the individual signing this request:
Is personally known to us or has provided proof of identity;
Signed this request in our presence;
Appears to be of sound mind and not under duress, coercion, or undue influence;
and
I am not the attending ~~physician~~ PROVIDER for the individual.

_____ witness 1/date
_____ witness 2/date

Note: Of the two witnesses to the written request, at least one must not:
Be a relative (by blood, marriage, civil union, or adoption) of the individual signing this request; be entitled to any portion of the individual's estate upon death; or own, operate, or be employed at a health-care facility where the individual is a patient or resident.

And neither the individual's attending ~~physician~~ OR CONSULTING PROVIDER nor a person authorized as the individual's qualified power of attorney or durable medical power of attorney shall serve as a witness to the written request.

SECTION 12. In Colorado Revised Statutes, 25-48-116, **amend** (3) introductory portion as follows:

25-48-116. Immunity for actions in good faith - prohibition against reprisals.
(3) A request by an individual for, or the provision by an attending ~~physician~~

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PROVIDER of, medical aid-in-dying medication in good faith compliance with this ~~article~~ ARTICLE 48 does not:

SECTION 13. In Colorado Revised Statutes, 25-48-117, **amend** (2); and **add** (3) as follows:

25-48-117. No duty to prescribe or dispense. (2) If a health-care provider is unable or unwilling to carry out an individual's request for medical aid-in-dying medication made in accordance with this ~~article~~, ~~and the individual transfers his or her care to a new health-care provider, the prior health-care provider shall transfer, upon request, a copy of the individual's relevant medical records to the new health-care provider.~~ ARTICLE 48, THE PROVIDER SHALL INFORM THE INDIVIDUAL OF THE PROVIDER'S INABILITY OR UNWILLINGNESS.

(3) IF THE INDIVIDUAL TRANSFERS THE INDIVIDUAL'S CARE TO A NEW HEALTH-CARE PROVIDER, THE PRIOR HEALTH-CARE PROVIDER SHALL TRANSFER, UPON REQUEST, A COPY OF THE INDIVIDUAL'S RELEVANT MEDICAL RECORDS TO THE NEW HEALTH-CARE PROVIDER.

SECTION 14. In Colorado Revised Statutes, 25-48-118, **amend** (1); and **add** (2.5) and (2.7) as follows:

25-48-118. Health-care facility permissible prohibitions - notice to the public - sanctions if provider violates policy. (1) A health-care facility may prohibit a ~~physician~~ PROVIDER employed or under contract from writing a prescription for medical aid-in-dying medication on a qualified individual who intends to use the medical aid-in-dying medication on the facility's premises. The health-care facility must notify the ~~physician~~ PROVIDERS AND STAFF AT THE TIME OF HIRING, CONTRACTING WITH, OR PRIVILEGING AND ON A YEARLY BASIS THEREAFTER in writing of its policy with regard to prescriptions for medical aid-in-dying medication. A health-care facility that fails to provide EXPLICIT advance notice to the ~~physician~~ PROVIDERS AND STAFF shall not ~~be entitled to enforce such a policy. against the physician.~~

(2.5) A HEALTH-CARE FACILITY SHALL NOT PROHIBIT A PROVIDER FROM PROVIDING INFORMATION TO AN INDIVIDUAL REGARDING THE INDIVIDUAL'S HEALTH STATUS, INCLUDING DIAGNOSIS, PROGNOSIS, RECOMMENDED TREATMENT, AND TREATMENT ALTERNATIVES, INCLUDING THE RISKS AND BENEFITS OF THE RECOMMENDED TREATMENT AND EACH TREATMENT ALTERNATIVE.

(2.7) A HEALTH FACILITY THAT IS A COVERED ENTITY, AS DEFINED IN SECTION 25-58-103 (1), SHALL COMPLY WITH SECTION 25-58-105 (3) AND RULES PROMULGATED PURSUANT TO SECTION 25-58-105 REGARDING THE FACILITY'S AVAILABILITY OF END-OF-LIFE HEALTH-CARE SERVICES.

SECTION 15. In Colorado Revised Statutes, **amend** 25-48-120 as follows:

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25-48-120. Safe disposal of unused medical aid-in-dying medications. (1) A person who has custody or control of medical aid-in-dying medication dispensed under this article that the terminally ill individual decides not to use or that remains unused ARTICLE 48 after the A terminally ill individual's death shall dispose of the unused medical aid-in-dying medication either by:

(+) (a) Returning the unused medical aid-in-dying medication to the attending physician PROVIDER who prescribed the medical aid-in-dying medication, who shall dispose of the unused medical aid-in-dying medication in the manner required by law; or

(-) (b) Lawful means in accordance with section 25-15-328, ~~C.R.S.~~ or any other state or federally approved medication take-back program authorized under the federal "Secure and Responsible Drug Disposal Act of 2010", Pub.L. 111-273, and regulations adopted pursuant to the federal act.

SECTION 16. In Colorado Revised Statutes, **amend** 25-48-121 as follows:

25-48-121. Actions complying with article not a crime. Nothing in this article ARTICLE 48 authorizes a physician PROVIDER or any other person to end an individual's life by lethal injection, mercy killing, or euthanasia. Actions taken in accordance with this article ARTICLE 48 do not, for any purpose, constitute suicide, assisted suicide, mercy killing, homicide, or elder abuse under the "Colorado Criminal Code", as set forth in title 18. ~~C.R.S.~~

SECTION 17. In Colorado Revised Statutes, **amend** 25-48-122 as follows:

25-48-122. Claims by government entity for costs. A government entity that incurs costs resulting from an individual terminating his or her life pursuant to this article SELF-ADMINISTRATION OF MEDICATION PRESCRIBED UNDER THIS ARTICLE 48 in a public place has a claim against the estate of the individual to recover the costs and reasonable attorney fees related to enforcing the claim.

SECTION 18. In Colorado Revised Statutes, **add** 25-48-124 as follows:

25-48-124. Severability. IF ANY PART OF THIS ARTICLE 48 IS FOUND TO BE IN CONFLICT WITH FEDERAL REQUIREMENTS THAT ARE A PRESCRIBED CONDITION FOR RECEIPT OF FEDERAL FUNDS, THE CONFLICTING PART OF THIS SECTION IS INOPERATIVE SOLELY TO THE EXTENT OF THE CONFLICT, AND THE CONFLICT DOES NOT AFFECT THE OPERATION OF THE REMAINDER OF THIS ARTICLE 48.

SECTION 19. In Colorado Revised Statutes, 10-7-103, **add** (3) as follows:

10-7-103. Life insurance policies - prohibition. (3) A LIFE INSURANCE COMPANY DOING BUSINESS IN COLORADO SHALL NOT DENY OR ALTER BENEFITS

OTHERWISE AVAILABLE TO AN INDIVIDUAL WITH A TERMINAL DISEASE BASED ON THE AVAILABILITY OF MEDICAL AID-IN-DYING PURSUANT TO ARTICLE 48 OF TITLE 25.

SECTION 20. In Colorado Revised Statutes, **add** 10-16-167 as follows:

10-16-167. Medical aid-in-dying - carrier prohibitions. (1) A CARRIER SHALL NOT:

(a) DENY OR ALTER BENEFITS OTHERWISE AVAILABLE TO A COVERED INDIVIDUAL WITH A TERMINAL DISEASE BASED ON THE AVAILABILITY OF MEDICAL AID-IN-DYING PURSUANT TO ARTICLE 48 OF TITLE 25.

(b) ATTEMPT TO COERCE AN INDIVIDUAL WITH A TERMINAL DISEASE TO MAKE A REQUEST FOR MEDICAL AID-IN-DYING MEDICATION.

SECTION 21. Act subject to petition - effective date. This act takes effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly; except that, if a referendum petition is filed pursuant to section 1 (3) of article V of the state constitution against this act or an item, section, or part of this act within such period, then the act, item, section, or part will not take effect unless approved by the people at the general election to be held in November 2024 and, in such case, will take effect on the date of the official declaration of the vote thereon by the governor.

Approved: June 5, 2024