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House Bills 4077 and 4078 (as passed by the House)

Sponsor: Representative Julie Rogers (H.B. 4077)

Representative Mike Mueller (H.B. 4078)

House Committee: Health Policy

Senate Committee: Health Policy

Date Completed: 10-28-25

CONTENT

House Bill 4077 would amend Part 28 (Vital Records) and Part 161 (General Provisions) of the Public Health Code to do the following:

- Require the medical certification of a death to be performed by an attending physician or the authorized representative of that physician if the death occurred outside an institution.
- Require the medical certification of a death to be performed by an attending physician, the authorized representative of that physician, the chief medical officer of the institution, or a pathologist if the death occurred in an institution.
- Require the medical certification of a death that must be investigated by a county medical examiner to be certified by the county medical examiner.
- Require a death report and, beginning one year after the bill's effective date, the medical certification of a death to be submitted through an online platform established by the Department of Health and Human Services (DHHS).
- Prohibit a physician who was properly presented with a medical certification by a funeral director from neglecting or refusing to certify a death record and prescribe sanctions for violating this prohibition.
- Allow an attending physician's authorized representative to authorize the final disposition of a dead body during an investigation.

House Bill 4078 would amend Public Act (PA) 181 of 1953, which governs the creation and use of offices of county medical examiners, to do the following:

- Allow a physician acting as an authorized representative of the attending physician to determine cause of death in cases where an individual died without medical attendance.
- Specify that a county medical examiner would have to investigate the cause and manner of death of an individual if that individual died without medical attendance by a physician *within the one year immediately preceding the time of death*, instead of if the individual died without any medical attendance.

House Bill 4078 is tie-barred to House Bill 4077.

House Bill 4077

Obtaining Medical Certification of Death; Funeral Director's Death Report

Generally, Part 28 of the Public Health Code prescribes requirements for birth certificates, registration of death, the reporting of death, and the disposal of a dead body.

Currently, a funeral director who first assumes custody of a dead body, either personally or through the funeral director's authorized agent, must report the death. The funeral director or authorized agent must obtain the necessary personal data from the next of kin or the best qualified individual or source available and must obtain medical certification as follows:

- If the death occurred outside an institution, the medical certification portion of the death record must be completed and certified no later than 48 hours after death by the attending physician; or in the absence of the attending physician, by a physician acting as the attending physician's authorized representative; or in the absence of an authorized representative, by the county medical examiner; or in the absence of the county medical examiner, by the county health officer or the deputy county medical examiner.¹
- If the death occurred in an institution, the medical certification must be completed and signed no later than 48 hours after death by the attending physician; or in the absence of the attending physician, by a physician acting as the attending physician's authorized representative; or in the absence of an authorized representative, by the chief medical officer of the institution in which death occurred, after reviewing pertinent records and making other investigation as considered necessary, or by a pathologist.

A physician who for the physician's self or as an agent or employee of another individual neglects or refuses to certify a death record properly presented to the physician for certification by a funeral director or who refuses or neglects to furnish information in the physician's possession is guilty of a misdemeanor punishable by imprisonment for up to 60 days or a fine of between \$25 and \$100, or both. A physician described above also must provide the medical certification within 48 hours after the death.

The bill would delete the specific requirements for obtaining medical certification described above and the associated penalties for failing to comply with these requirements. Instead, under the bill, a funeral director who first assumed custody of a dead body, either personally or through the funeral director's authorized agent, would have to report the death. The funeral director or authorized agent would have to obtain the necessary personal data from the next of kin or the best qualified individual or source available and would have to obtain medical certification as follows:

- If the death occurred outside an institution, the medical certification portion of the death record would have to be completed and certified no later than 48 hours after death by either the physician who was in charge of the decedent's care for the illness or condition that resulted in the decedent's death, or, in the absence of the physician above, a physician acting as the authorized representative of that physician.
- If the death occurred in an institution, the medical certification portion of the death record would have to be completed and certified no later than 48 hours after death by either the attending physician or, in the absence of the attending physician, a physician acting as the authorized representative of the attending physician, the chief medical officer of the institution in which the death occurred after the chief medical officer reviewed pertinent records and made other investigations considered necessary, or a pathologist.
- Despite the provisions above, if an investigation were required under Section 2 of PA 181 of 1953, the medical certification portion of the death record would have to be completed and certified by the county medical examiner as described below in House Bill 4078.

The bill would require the funeral director to submit the death report using the web-based application system established by the DHHS for the registration of deaths. Beginning one year

¹ "Institution" means a public or private establishment that provides inpatient medical, surgical, or diagnostic care or treatment or nursing, custodial, or domiciliary care to two or more unrelated individuals, including an establishment to which individuals are committed by law.

after the bill's effective date, the medical certification also would have to be submitted using the web-based application system established by the DHHS for the registration of deaths. An individual who completed medical certifications would have to first complete training provided by the DHHS to use the web-based application system for the registration of deaths.

Finally, the bill would prohibit a physician who was required to provide medical certification for a death record and who was properly presented a medical certification by a funeral director from neglecting or refusing to certify the death record. The physician also could not neglect or refuse to furnish information in the physician's possession to the funeral director. The bill would make a physician's failure to comply with these requirements grounds for DHHS investigation and potential disciplinary subcommittee action. If a disciplinary subcommittee found that one or more grounds for disciplinary action existed related to a failure to comply with these requirements, the disciplinary subcommittee could impose any of the following sanctions: 1) license denial or revocation; 2) payment of restitution; 3) license probation, suspension, or limitation; 4) reprimand; or 5) a monetary fine.²

Investigations by County Medical Examiner

Under the Code, when death occurs more than 10 days after the deceased was last seen by a physician, if the cause of death appears to be other than the illness or condition for which the deceased was being treated, or if the attending physician cannot accurately determine the cause of death, the case must be referred to the county medical examiner for investigation to determine and certify the cause of death. If the county medical examiner determines that the case does not fall within the examiner's jurisdiction, the county medical examiner must refer the case back to the deceased's physician within 24 hours for completion of the medical certification. The bill would delete these requirements.

The Code specifies that if an investigation is required under PA 181 of 1953 the county medical examiner must determine the cause of death and complete and sign the medical certification within 48 hours after taking charge of the case. If the cause of death cannot be determined within 48 hours after death, the medical certification may be completed as provided by the DHHS. The funeral director in custody of the body must be given notice of the reason for the delay and final disposition must not be made until authorized by the attending physician or county medical examiner. The bill would allow an attending physician's authorized representative to authorize final disposition in these circumstances as well.

House Bill 4078

Generally, PA 181 of 1953 establishes the powers of a county medical examiner and requires an examiner to investigate deaths due to violence, negligence, or possible criminality.

Currently, a county medical examiner or deputy county medical examiner must investigate the cause and manner of death of an individual under each of the following circumstances:

- The individual dies by violence.
- The individual's death is unexpected.
- The individual dies as the result of an abortion, whether self-induced or otherwise.

Additionally, an examiner must investigate the cause and manner of a death if an individual dies without medical attendance by a physician or the individual dies while under home hospice care without medical attendance by a physician or a registered nurse during the 48 hours immediately preceding the time of death, unless the attending physician, if any, is able

² These sanctions are currently prescribed in the Code under MCL 333.16226.

to determine accurately the cause of death. Instead, under the bill, an examiner would have to investigate the cause and manner of a death if the individual died without medical attendance by a physician *within the one year immediately preceding the time of death*, or the individual died while under home hospice care without medical attendance by a physician or a registered nurse within the 48 hours immediately preceding the time of death, unless the attending physician *or a physician acting as the authorized representative of the attending physician*, if any, was able to determine accurately the cause of death.

Additionally, a physician, an individual in charge of any hospital or institution, or any other individual who has first knowledge of any of the following must immediately notify the county medical examiner or deputy county medical examiner of that fact:

- An individual who died suddenly, unexpectedly, accidentally, violently, or as the result of any suspicious circumstances.
- An individual who died without medical attendance within the 48 hours immediately preceding the time of death unless the attending physician, if any, is able to determine accurately the cause of death.
- An individual who died as the result of what is commonly known as an abortion, whether self-induced or otherwise.

Under the bill, an attending physician or a physician acting as the authorized representative of the attending physician could determine the cause of death above.

MCL 333.2804 et al. (H.B. 4077)
MCL 52.202 & 52.203 (H.B. 4078)

PREVIOUS LEGISLATION

(This section does not provide a comprehensive account of previous legislative efforts on this subject matter.)

House Bills 4077 and 4078 are reintroductions of House Bills 5043 and 5044, respectively. House Bills 5043 and 5044 passed the House and were referred to the Senate Committee on Health Policy but received no further action.

Legislative Analyst: Alex Krabill

FISCAL IMPACT

House Bill 4077

The bill would have no fiscal impact on the DHHS and an indeterminate impact on local units of government. There would be no fiscal impact for the DHHS related to the provision that medical certifications of death be completed using a web-based application system because the DHHS has already established and operates the Michigan Electronic Death Registration System (EDRS). The EDRS was first piloted in Washtenaw and Jackson counties in 2010 and has since been implemented across the State, with approximately 99% of deaths in Michigan being registered electronically³. Additionally, the provision that the DHHS provide training for the web-based application to any individual who completed medical certifications under the bill would have no fiscal impact because the DHHS currently offers quarterly instructor-led online trainings or a self-directed online training module.⁴

Local units of government could see a reduction in cost if they don't currently use the web-based reporting system and see a reduction in workload by switching. The removal of

³ <https://michiganedrs.org>

⁴ *Id.*

provisions related to when a case must be referred to the county medical examiner would reduce costs if the removal resulted in a reduction in workload for the county medical examiner.

The bill could result in a loss in revenue for local and county law libraries while possibly creating cost savings for local governments. The elimination of the misdemeanor and fine for refusing to certify a death record or neglecting or refusing to furnish certain information would reduce resource demands on law enforcement, court systems, community supervision, and jails; however, it is unknown how many people who were formerly prosecuted under those provisions of the bill would no longer be prosecuted, thereby the savings to locals and the loss in revenue for local libraries is indeterminate.

House Bill 4078

The bill would have an indeterminate negative fiscal impact on local units of government. By extending the time frame that would trigger an investigation by a county medical examiner or deputy county medical examiner from a person who died without medical attendance within the preceding 48 hours to a person who died without medical attendance within the preceding one year, it is possible that the number of investigations that the county would have to undertake would increase. The actual cost impact would depend on the number and complexity of additional cases.

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This analysis was prepared by nonpartisan Senate staff for use by the Senate in its deliberations and does not constitute an official statement of legislative intent.