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State of Minnesota

HOUSE OF REPRESENTATIVES

NINETY-FOURTH SESSION

H. F. No. 1903

03/05/2025 Authored by Novotny, Knudsen, Wiener, Gillman and Zeleznikar
The bill was read for the first time and referred to the Committee on Health Finance and Policy

- 1.1 A bill for an act
- 1.2 relating to health; modifying Safe Place for Newborns provisions; amending
- 1.3 Minnesota Statutes 2024, section 145.902, subdivisions 1, 3.
- 1.4 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
- 1.5 Section 1. Minnesota Statutes 2024, section 145.902, subdivision 1, is amended to read:
- 1.6 Subdivision 1. **General.** (a) For purposes of this section, a "safe place" means:
- 1.7 (1) a hospital licensed under sections 144.50 to 144.56;
- 1.8 (2) a fire station that is staffed continuously, 24 hours per day, except when all staff are
- 1.9 called on in an emergency and when the dual alarm system dispatches the nearest first
- 1.10 responder to receive the infant as in any similar emergency;
- 1.11 (3) a health care provider who provides urgent care medical services;~~or;~~
- 1.12 (4) a newborn safety device installed by a safe place; or
- 1.13 (5) an ambulance service licensed under chapter 144E dispatched in response to a 911
- 1.14 call from a mother or a person with the mother's permission to relinquish a newborn infant.
- 1.15 (b) A safe place shall receive a newborn left with an employee on the premises of the
- 1.16 safe place during its hours of operation or in a newborn safety device, provided that:
- 1.17 (1) the newborn infant was born within seven days of being left at the safe place, as
- 1.18 determined within a reasonable degree of medical certainty; ~~and~~
- 1.19 (2) the newborn infant is left in an unharmed condition; and
- 1.20 (3) the newborn safety device:

2.1 (i) is designed to permit a parent to anonymously place a newborn infant in the device
2.2 with the intent to leave the newborn;

2.3 (ii) allows an emergency medical services provider to remove the newborn infant from
2.4 the device and take custody of the newborn infant;

2.5 (iii) is installed with an adequate dual alarm system connected to the physical location
2.6 where the device is physically installed, and the dual alarm system is tested at least one time
2.7 per month and visually checked at least two times per day to ensure the alarm system is in
2.8 working order; and

2.9 (iv) is approved by the federal Food and Drug Administration and is physically located
2.10 inside a participating fire station that is staffed 24 hours per day or a hospital that is licensed
2.11 and legally operating in the state and is staffed continuously on a 24-hour basis every day.
2.12 The safety device must be located in an area that is conspicuous and visible to the fire station
2.13 or hospital staff.

2.14 (c) The safe place must not inquire as to the identity of the mother or the person leaving
2.15 the newborn or call the police, provided the newborn is unharmed when presented to the
2.16 hospital. The safe place may ask the mother or the person leaving the newborn about the
2.17 medical history of the mother or newborn but the mother or the person leaving the newborn
2.18 is not required to provide any information. The safe place may provide the mother or the
2.19 person leaving the newborn with information about how to contact relevant social service
2.20 agencies. This information must be available for the relinquishing parent in the newborn
2.21 safety device.

2.22 (d) A safe place that is a health care provider who provides urgent care medical services
2.23 shall dial 911, advise the dispatcher that the call is being made from a safe place for
2.24 newborns, and ask the dispatcher to send an ambulance or take other appropriate action to
2.25 transport the newborn to a hospital. An ambulance with whom a newborn is left shall
2.26 transport the newborn to a hospital for care. Hospitals must receive a newborn left with a
2.27 safe place and make the report as required in subdivision 2.

2.28 Sec. 2. Minnesota Statutes 2024, section 145.902, subdivision 3, is amended to read:

2.29 Subd. 3. **Immunity.** (a) A safe place with responsibility for performing duties under
2.30 this section, and any employee, doctor, ambulance personnel, or other medical professional
2.31 working at the safe place, are immune from any criminal liability that otherwise might result
2.32 from their actions, if they are acting in good faith in receiving a newborn, and are immune
2.33 from any civil liability that otherwise might result from merely receiving a newborn.

3.1 (b) A safe place performing duties under this section, or an employee, doctor, ambulance
3.2 personnel, or other medical professional working at the safe place who is a mandated reporter
3.3 under chapter 260E, is immune from any criminal or civil liability that otherwise might
3.4 result from the failure to make a report under that section if the person is acting in good
3.5 faith in complying with this section.

3.6 (c) No person shall be prosecuted for any crime based solely on the act of leaving a
3.7 newborn in compliance with this section.