REVISOR

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## State of Minnesota

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## HOUSE OF REPRESENTATIVES

## NINETIETH SESSION

04/07/2017 Authored by Lesch, Hertaus, Zerwas, Youakim and Loonan The bill was read for the first time and referred to the Committee on Civil Law and Data Practices Policy

1.1	A bill for an act
1.2	relating to children; establishing requirements for gestational carrier contracts;
1.3	proposing coding for new law in Minnesota Statutes, chapter 257.
1.4	BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MINNESOTA:
1.5	Section 1. [257.86] DEFINITIONS.
1.6	Subdivision 1. Scope. The definitions in this section apply to sections 257.86 to 257.97.
1.7	Subd. 2. Donor. "Donor" means an individual who is not an intended parent who
1.8	contributes a gamete or gametes for the purpose of in vitro fertilization or implantation in
1.9	another.
1.10	Subd. 3. Embryo. "Embryo" means a fertilized egg prior to 14 days of development.
1.11	Subd. 4. Embryo transfer. "Embryo transfer" means all medical and laboratory
1.12	procedures that are necessary to effectuate the transfer of an embryo into the uterine cavity.
1.13	Subd. 5. Gamete. "Gamete" means a sperm or an egg.
1.14	Subd. 6. Gestational carrier. "Gestational carrier" means a woman who agrees to engage
1.15	in a gestational carrier arrangement.
1.16	Subd. 7. Gestational carrier arrangement. "Gestational carrier arrangement" means
1.17	the process by which a woman attempts to carry and give birth to a child created through
1.18	in vitro fertilization using one or more gametes procured or provided by the intended parents.
1.19	Subd. 8. Gestational carrier contract. "Gestational carrier contract" means a written
1.20	agreement regarding a gestational carrier arrangement.

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2.1	Subd. 9. Health care provider. "Health care provider" means a person who is duly
2.2	licensed to provide health care, including medical, psychological, or counseling professionals.
2.3	Subd. 10. Intended parent. "Intended parent" means a person who enters into a
2.4	gestational carrier contract with a gestational carrier prior to the initiation of the pregnancy
2.5	pursuant to which the person will be the legal parent of the resulting child. In the case of a
2.6	married couple, any reference to an intended parent includes both parties to the marriage
2.7	for all purposes of section 257.86 to 257.97, regardless of gender.
2.8	Subd. 11. In vitro fertilization. "In vitro fertilization" means medical and laboratory
2.9	procedures that are necessary to effectuate the extracorporeal fertilization of egg and sperm.
2.10	Subd. 12. Medical evaluation. "Medical evaluation" means an evaluation by and
2.11	consultation with a physician conducted according to the recommended guidelines published
2.12	and in effect at the time of the evaluation by the American Society for Reproductive Medicine
2.13	and the American College of Obstetricians and Gynecologists.
2.14	Subd. 13. Mental health evaluation. "Mental health evaluation" means an evaluation
2.15	by and consultation with a mental health professional conducted according to the
2.16	recommended guidelines published and in effect at the time of the evaluation by the American
2.17	Society for Reproductive Medicine and the American College of Obstetricians and
2.18	Gynecologists.
2.19	Subd. 14. Physician. "Physician" means a person licensed to practice medicine.
2.20	Sec. 2. [257.87] RIGHTS OF PARENTAGE.
2.21	(a) Except as provided in sections 257.86 to 257.97, a woman who gives birth to a child
2.22	is presumed to be the mother of that child for purposes of state law.
2.23	(b) In the case of a gestational carrier arrangement satisfying the requirements of
2.24	paragraph (d):
2.25	(1) the intended parent is the parent of the child for purposes of state law immediately
2.26	upon the birth of the child;
2.27	(2) the child is considered the child of the intended parent for purposes of state law;
2.28	(3) parental rights vest in the intended parent;
2.29	(4) sole custody, care, and control of the child shall rest solely with the intended parent
2.30	immediately upon the birth of the child; and

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02/02/17 REVISOR LCB/JU 17-2127 (5) immediately upon the birth of the child, neither the gestational carrier nor spouse, if 3.1 any, is the parent of the child for purposes of state law. 3.2 (c) If a gestational carrier arrangement complying with paragraph (d) exists and there 3.3 is a laboratory error in which the resulting child is not genetically related to either of the 3.4 intended parents, the intended parent is the parent of the child for purposes of state law 3.5 unless otherwise determined by a court of competent jurisdiction. An action under this 3.6 paragraph can only be brought by a genetic parent within 60 days of the date of the child's 3.7 birth. 3.8 (d) The parties to a gestational carrier arrangement assume the rights and obligations of 3.9 3.10 paragraphs (b) and (c) if: (1) the gestational carrier satisfies the eligibility requirements in section 257.88, paragraph 3.11 3.12 (a); (2) the intended parent satisfies the eligibility requirements set forth in section 257.88, 3.13 paragraph (b); and 3.14 (3) the gestational carrier arrangement occurs pursuant to a gestational carrier contract 3.15 meeting the requirements in section 257.89. 3.16 Sec. 3. [257.88] ELIGIBILITY. 3.17 (a) A gestational carrier satisfies the requirements of sections 257.86 to 257.97 if, at the 3.18 time the gestational carrier contract is executed, she: 3.19 (1) is at least 21 years of age; 3.20 (2) has given birth to at least one child; 3.21 (3) has completed a medical evaluation relating to the anticipated pregnancy and provides 3.22 a written statement from the examining physician that states that it is reasonably likely that 3.23 she can successfully carry a pregnancy to full term without any complications that would 3.24 threaten the health of the gestational carrier or resulting child; 3.25 (4) has completed a mental health evaluation relating to the anticipated gestational carrier 3.26 arrangement; 3.27 3.28 (5) has undergone legal consultation with separate, independent legal counsel regarding

3.29 the terms of the gestational carrier contract and the potential legal consequences of the

3.30 gestational carrier arrangement; and

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4.1	(6) has obtained, or obtains prior to the embryo transfer, a health insurance policy that
4.2	covers major medical treatments and hospitalization and extends throughout the duration
4.3	of the expected pregnancy and for eight weeks after the birth of the child; the policy may
4.4	be procured by the intended parent on behalf of the gestational carrier pursuant to the
4.5	gestational carrier contract or the intended parent may self-insure by depositing sufficient
4.6	funds into escrow to pay for all reasonably expected medical expenses prior to the date of
4.7	the first embryo transfer.
4.8	(b) The intended parent satisfies the requirements of sections 257.86 to 257.97 if, at the
4.9	time the gestational carrier contract is executed, the parent:
4.10	(1) provides the gametes that will result in an embryo that the gestational carrier will
4.11	attempt to carry to term;
4.12	(2) requires the services of the gestational carrier in order to have a child as evidenced
4.13	by a qualified physician's affidavit attached to the gestational carrier contract;
4.14	(3) has completed a mental health evaluation relating to the anticipated gestational carrier
4.15	arrangement; and
4.16	(4) has undergone legal consultation with separate, independent legal counsel regarding
4.17	the terms of the gestational carrier contract and the potential legal consequences of the
4.18	gestational carrier arrangement.
4.19	Sec. 4. [257.89] REQUIREMENTS FOR GESTATIONAL CARRIER CONTRACT.
4.20	(a) A gestational carrier contract is enforceable in Minnesota if:
4.21	(1) it meets the contractual requirements in paragraphs (b) and (c); and
4.22	(2) it contains, at a minimum, the terms in paragraph (d).
4.23	(b) A gestational carrier contract must be:
4.24	(1) in writing;
4.25	(2) executed prior to the commencement of any medical procedures intended to initiate
4.26	a pregnancy in furtherance of the gestational carrier arrangement, other than medical or
4.27	mental health evaluations necessary to determine eligibility of the parties under section
4.28	257.88, by a gestational carrier meeting the eligibility requirements of section 257.88,
4.29	paragraph (a), and, if married, the gestational carrier's spouse; and by the intended parent
4.30	or parents meeting the eligibility requirements of section 257.88, paragraph (b). In the event
4.31	an intended parent is married, both married intended parents must execute the gestational

4.32 <u>carrier contract; and</u>

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5.1	(3) notarized or witnessed by two disinterested competent adults.
5.2	(c) A gestational carrier contract under paragraph (b) is not valid unless:
5.3	(1) the gestational carrier and the intended parent have been represented by separate,
5.4	independent legal counsel in all matters concerning the gestational carrier arrangement and
5.5	the gestational carrier contract; and
5.6	(2) the gestational carrier and the intended parent have signed a written acknowledgment
5.7	of their receipt of information about the legal, financial, and contractual rights, expectations,
5.8	penalties, and obligations of the carrier agreement.
5.9	(d) A gestational carrier contract shall include:
5.10	(1) the express written agreement of the gestational carrier to:
5.11	(i) undergo embryo transfer and attempt to carry and give birth to the child; and
5.12	(ii) surrender custody of all resulting children to the intended parent immediately upon
5.13	the birth of the child or children;
5.14	(2) if the gestational carrier is married, the express agreement of the gestational carrier's
5.15	spouse to:
5.16	(i) support, facilitate, and be jointly bound by the obligations imposed on the gestational
5.17	carrier pursuant to the terms of the gestational carrier contract; and
5.18	(ii) surrender custody of all resulting children to the intended parent immediately upon
5.19	the birth of the resulting child or children;
5.20	(3) the right of the gestational carrier to use the services of a physician of her choosing,
5.21	after consultation with the intended parent, to provide her care during the pregnancy; and
5.22	(4) the express written agreement of the intended parent to:
5.23	(i) accept custody of the resulting child or children immediately upon the child's or
5.24	children's birth regardless of number, gender, or mental or physical condition; and
5.25	(ii) assume sole responsibility for the support of the child or children immediately upon
5.26	the birth of the child or children.
5.27	(e) A gestational carrier contract is enforceable in Minnesota even though it contains
5.28	one or more of the following provisions:
5.29	(1) the gestational carrier's agreement to undergo all medical examinations, treatments,
5.30	and fetal monitoring procedures that the physician recommends for the success of the
5.31	pregnancy;

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6.1	(2) the gestational carrier's agreement to abstain from any activities that the intended
6.2	parent or the physician reasonably believes to be harmful to the pregnancy and future health
6.3	of the child, including but not limited to smoking, drinking alcohol, using nonprescribed
6.4	drugs, using prescription drugs not authorized by a physician aware of the gestational carrier's
6.5	pregnancy, exposure to radiation, or any other activities proscribed by a health care provider;
6.6	and
6.7	(3) the agreement of the intended parent to pay for or reimburse the gestational carrier
6.8	for reasonable expenses including but not limited to medical, legal, or other professional
6.9	expenses related to the gestational carrier arrangement and the gestational carrier contract.
6.10	Sec. 5. [257.90] DUTY TO SUPPORT.
6.11	(a) A person who is considered to be the parent of the child under section 257.87 is
6.12	obligated to support the child.
6.13	(b) A breach of the gestational carrier contract by the intended parent does not relieve
6.14	the intended parent of the support obligation imposed by sections 257.86 to 257.97.
6.15	(c) A gamete donor is not a parent if the donor has waived any and all rights to the
6.16	donated gametes and any resultant embryos or children, either in a record with or between
6.17	(1) the donor and a medical or other storage facility or (2) the intended parent, whether the
6.18	donor is anonymous or is known to the intended parent. If the requirements of this section
6.19	are met, a donor has no obligation to pay child support for a child born from the donor's
6.20	gamete donation.
6.21	Sec. 6. [257.91] ESTABLISHMENT OF THE PARENT-CHILD RELATIONSHIP.
6.22	(a) For purposes of the Parentage Act, sections 257.51 to 257.75, the parent-child
6.23	relationship that arises immediately upon the birth of the child pursuant to section 257.88
6.24	is established if, no later than five business days after the birth of a child born through a
6.25	gestational carrier arrangement, the attorneys representing both the gestational carrier and
6.26	the intended parent provide written certification that the parties entered into the gestational
6.27	carrier contract intending to satisfy the requirements of section 257.89 with respect to the
6.28	child.
6.29	(b) The attorney certifications required by paragraph (a) shall be filed on forms prescribed
6.30	by the Department of Health.

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7.1	(c) The attorney certifications required by paragraph (a) must establish the parties'				
7.2	compliance with all of the requirements of the Parentage Act in a manner consistent with				
7.3	the requirements of the Parentage Act, if any.				
7.4	(d) The attorney certifications required by paragraph (a) are effective for all purposes			ll purposes	
7.5	if completed no later than five bus	iness days after the chi	ld's birth.		
7.6	(e) When the attorney certificat	ions required by paragr	aph (a) are completed	l, all hospital	
7.7	and state representatives or employ	vees shall complete all b	oirth records and the	original birth	
7.8	certificate of the child to reflect th	e intended parent, and	only the intended par	rent, as the	
7.9	child's parent on the records and certificate.				
7.10	7.10 Sec. 7. [257.92] ENTRY OF JUDGMENT OF PARENTAGE.				
7.11	(a) A judgment establishing the	e intended parent's excl	usive legal parentag	e shall be	
7.12	entered by the court administer wi	thin five business days	after issuance of a c	ourt order to	
7.13	that effect or after the following co	onditions are met:			
7.14	(1) the attorneys representing b	both parties have compl	lied with all of the ce	ertification	
7.15	requirements in section 257.91;				
7.16	(2) one of the parties has filed with the court a petition to establish parentage; and				
7.17	(3) after the birth of the child or	children born through th	ne gestational carrier	arrangement <u>,</u>	
7.18	the attorneys for the parties file wi	th the court administrat	or a joint affidavit o	f compliance	
7.19	with the certification requirements	s set forth in section 25	7.91.		
7.20	(b) A judgment entered and do	cketed under this subdi	vision has the same	effect and is	
7.21	subject to the same procedures, defenses, and proceedings as any other judgment in district				
7.22	<u>court.</u>				
7.23	Sec. 8. [257.93] EFFECT OF G	GESTATIONAL CAR	RIER'S SUBSEQU	ENT	
7.24	MARRIAGE.				
7.25	Subsequent marriage of the ges	stational carrier does no	t affect the validity of	of an existing	
7.26	gestational carrier contract, her leg	gal spouse's consent to	the contract is not re	quired, and	
7.27	her legal spouse is not a presumed	parent of the resulting	child.		
7.28	Sec. 9. [257.94] IMMUNITIES				
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7.29	Except as provided in sections				
7.30	for nonnegligent actions taken pur				
7.31	This provision does not prevent liability or actions between or among the parties, including			es, including	
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8.1	actions brought by or on behalf of the child, based on negligent, reckless, willful, or				
8.2	intentional acts that result in damage	es to any party.			
8.3	Sec. 10. [257.95] NONCOMPLIA	ANCE.			
8.4	Noncompliance by the gestational carrier or the intended parent or parents occurs if that				
8.5	party breaches a provision of the gestational carrier contract or fails to comply with any of			<u>ith any of</u>	
8.6	the requirements in sections 257.86	to 257.97.			
8.7	Sec. 11. [257.96] EFFECT OF N	ONCOMPLIANCE	<u>.</u>		
8.8	(a) In the event of noncompliance, as defined in section 257.95, a court of competent				
8.9	jurisdiction shall determine the rights and obligations of the parties to any gestational carrier				
8.10	agreement based on the other provisions of the Parentage Act, sections 257.51 to 257.75,				
8.11	specifically including, but not limited to, the best interests of the child.				
8.12	(b) There shall be no specific performance remedy available for a breach by the				
8.13	gestational carrier of a gestational ca	rrier contract term th	hat requires her to be imp	pregnated.	
8.14	Sec. 12. [257.97] DAMAGES.				
8.15	(a) Except as expressly provided	in the gestational ca	urrier contract, the intend	ded parent	
8.16	or parents are entitled to all remedie	s available at law or	equity.		
8.17	(b) Except as expressly provided	in the gestational car	rier contract, the gestatio	nal carrier	
8.18	is entitled to all remedies available a	t law or equity.			
8.19	Sec. 13. [257.98] IRREVOCABI	LITY.			
8.20	No action to invalidate a gestation	nal carrier arrangem	ent meeting the require	ments of	
8.21	section 257.87, paragraph (d), or to	challenge the rights	of parentage established	l under	
8.22	section 257.87 and the Parentage Ac	t, sections 257.51 to	257.75, may be comme	nced after	
8.23	12 months from the date of birth of t	the child.			
8.24	Sec. 14. EFFECTIVE DATE.				
8.25	Sections 1 to 13 are effective for	gestational carrier c	ontracts entered into on	or after	
8.26	August 1, 2017.				