

By: Hall

S.B. No. 17

A BILL TO BE ENTITLED

AN ACT

1
2 relating to protection of individuals from participation in a
3 health care service for reasons of conscience; providing a civil
4 remedy; authorizing disciplinary action.

5 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

6 SECTION 1. The legislature finds that:

7 (1) the public policy of this state is to respect the
8 conscience of all health care providers and the right of each health
9 care provider to hold their own belief about whether certain health
10 care services are morally acceptable;

11 (2) without comprehensive protections, the conscience
12 of health care providers may be violated; and

13 (3) each health care provider must be protected from
14 required participation in a health care service in which the
15 provider has declined participation for reasons of conscience and
16 from discriminatory adverse action resulting from the
17 nonparticipation.

18 SECTION 2. Chapter 161, Health and Safety Code, is amended
19 by adding Subchapter X to read as follows:

20 SUBCHAPTER X. TEXAS HEALTH CARE CONSCIENCE PROTECTION ACT

21 Sec. 161.701. DEFINITIONS. In this subchapter:

22 (1) "Conscience" means a sincerely held set of moral
23 convictions arising from:

24 (A) a belief in and relation to God;

1 (B) a religious faith or spiritual practice; or

2 (C) a moral philosophy or ethical position,

3 without regard to whether the philosophy or position is related to a
4 religious faith.

5 (2) "Emergency care" means health care services
6 provided to stabilize a patient's medical condition manifesting in
7 acute symptoms of sufficient severity, including severe pain, that
8 would lead a prudent layperson possessing an average knowledge of
9 medicine and health to believe the patient's condition, sickness,
10 or injury is of sufficient severity that absence of immediate
11 medical care could reasonably be expected to:

12 (A) result in the patient's death;

13 (B) place the patient's health in serious
14 jeopardy;

15 (C) result in serious impairment of the patient's
16 bodily functions;

17 (D) result in serious dysfunction of a bodily
18 organ or part of the patient;

19 (E) result in serious disfigurement of the
20 patient; or

21 (F) for a pregnant woman, place the health of the
22 woman's unborn child in serious jeopardy.

23 (3) "Health care facility" means a public or private
24 organization, corporation, partnership, sole proprietorship,
25 association, agency, network, joint venture, or other entity that
26 provides health care services to patients. The term includes a
27 hospital, clinic, medical center, ambulatory surgical center,

1 private physician's office, pharmacy, nursing home, laboratory or
2 diagnostic facility, infirmary, dispensary, medical school,
3 nursing school, or medical training facility.

4 (4) "Health care provider" means a nurse, nurse aide,
5 medical assistant, hospital employee, clinic employee, nursing
6 home employee, pharmacist, pharmacy employee, researcher, medical,
7 pharmacy, or nursing school student, professional,
8 paraprofessional, or, without regard to whether the individual
9 holds a license, any other individual who furnishes or assists in
10 the furnishing of a health care service.

11 (5) "Health care service" means any phase of patient
12 health care or treatment, including any conduct that may give rise
13 to a health care liability claim, as that term is defined by Section
14 74.001, Civil Practice and Remedies Code. The term includes:

15 (A) testing, diagnosis, prognosis, ancillary
16 research, instruction, medication, therapy, treatment, and
17 surgery;

18 (B) family planning, counseling, and referrals,
19 and any other advice in connection with the use or procurement of
20 contraceptives, sterilization, or abortion; and

21 (C) any other care or treatment rendered by a
22 health care facility, physician, or health care provider.

23 (6) "Life-sustaining treatment" has the meaning
24 assigned by Section 166.002.

25 (7) "Participate" related to the provision of a health
26 care service includes an act to receive, obtain, perform, assist in
27 performing, give advice regarding, suggest, recommend, or refer a

1 health care service.

2 (8) "Physician" means an individual licensed to
3 practice medicine in this state.

4 (9) "Substantially prevent" related to the provision
5 of a health care service means to significantly delay the provision
6 of a health care service to a patient.

7 (10) "Undue delay" related to the provision of a
8 health care service means an unreasonable delay that impairs a
9 patient's health.

10 Sec. 161.702. RIGHT TO DECLINE PARTICIPATION IN HEALTH CARE
11 SERVICE FOR REASONS OF CONSCIENCE; EXCEPTIONS. (a) Except as
12 provided by Subsection (b), an individual may decline to
13 participate in a health care service for reasons of conscience.

14 (b) An individual may not decline to participate in the
15 following services:

- 16 (1) emergency care;
17 (2) life-sustaining treatment; or
18 (3) cardiopulmonary resuscitation.

19 (c) An individual who declines for reasons of conscience to
20 participate in providing life-sustaining treatment to a patient
21 shall continue providing life-sustaining treatment to the patient
22 until an accommodation is arranged under Section 161.706.

23 (d) This section may not be construed to allow an individual
24 to decline to participate in providing a health care service to a
25 patient because of the patient's race, color, sex, national origin,
26 religion, age, disability, physical condition, or economic status.

27 Sec. 161.703. IMMUNITY OF PHYSICIANS AND HEALTH CARE

1 PROVIDERS. A physician or health care provider may not be held
2 civilly or criminally liable because the physician or health care
3 provider declines to participate in a health care service wholly or
4 partly for reasons of conscience.

5 Sec. 161.704. ADVERSE ACTION. A person, including a public
6 official and a medical school or other institution that conducts
7 education or training programs for physicians or health care
8 providers, violates this subchapter by taking an adverse action
9 against an individual because the individual declines to
10 participate in a health care service for reasons of conscience.
11 Violations include taking an adverse action with regard to:

- 12 (1) licensure;
- 13 (2) certification;
- 14 (3) employment terms, benefits, seniority status,
15 promotion, or transfer;
- 16 (4) staff appointments or other privileges;
- 17 (5) denial of employment, admission, or participation
18 in a program for which the individual is eligible;
- 19 (6) reference to reasons of conscience in an
20 application form;
- 21 (7) questions regarding an applicant's participation
22 in providing a health care service for reasons of conscience;
- 23 (8) imposition of a burden in the terms or conditions
24 of employment;
- 25 (9) denial of aid, assistance, or benefits;
- 26 (10) conditional receipt of the aid, assistance, or
27 benefits; or

1 (11) coercion or disqualification of the individual
2 receiving aid, assistance, or benefits.

3 Sec. 161.705. PROTOCOL FOR DECLINING PARTICIPATION IN
4 PROVISION OF HEALTH CARE SERVICE. (a) A health care facility shall
5 develop a written protocol for circumstances in which an individual
6 declines to participate in providing a health care service, other
7 than a life-sustaining treatment, for reasons of conscience. The
8 protocol must describe a patient's access to health care services
9 and information to ensure the patient is not permanently or
10 substantially prevented from obtaining the services. The protocol
11 must explain the process the facility will implement to facilitate
12 in a timely manner the patient's access to the services.

13 (b) An individual who declines to participate in providing a
14 health care service for reasons of conscience shall:

15 (1) notify the health care facility of the
16 declination; and

17 (2) comply with the applicable protocol developed
18 under this section.

19 (c) This section does not require a health care facility,
20 physician, or health care provider to counsel a patient or refer the
21 patient to another physician or facility regarding a health care
22 service that is contrary to the conscience of the physician or
23 health care provider.

24 Sec. 161.706. PROTOCOL FOR LIFE-SUSTAINING TREATMENT. (a) A
25 health care facility shall develop a written protocol for
26 circumstances in which an individual declines to participate in
27 providing life-sustaining treatment for reasons of conscience. The

1 protocol must prohibit an individual from declining to provide
2 life-sustaining treatment to a patient before the patient is
3 transferred to another physician or health care provider at the
4 health care facility who is willing to provide life-sustaining
5 treatment to the patient. The protocol must explain the process the
6 health care facility will implement to facilitate a timely
7 transfer.

8 (b) An individual who declines to participate in providing
9 life-sustaining treatment for reasons of conscience shall notify
10 the health care facility and comply with the applicable protocol
11 developed under this section. The individual must continue to
12 participate in providing life-sustaining treatment until the
13 facility transfers the patient to another physician or health care
14 provider at the facility.

15 (c) If a transfer to another physician or health care
16 provider at the health care facility cannot be arranged, the
17 protocol at a minimum must require a health care facility,
18 physician, or health care provider to:

19 (1) timely inform the patient of the patient's
20 condition, prognosis, and treatment options, and the risks and
21 benefits of those treatment options, consistent with accepted
22 standards of health care;

23 (2) provide without undue delay on request of the
24 patient or the patient's legal representative copies of the
25 patient's medical records to the patient or another health care
26 facility, physician, or health care provider designated by the
27 patient in accordance with medical privacy laws; and

1 (3) take any other action necessary to transfer the
2 patient to another health care facility.

3 (d) This section does not require a health care facility,
4 physician, or health care provider to counsel a patient or refer the
5 patient to another physician or facility regarding a health care
6 service that is contrary to the conscience of the physician or
7 health care provider. The information required by Subsection (c)
8 may be provided by a health care facility, physician, or health care
9 provider other than the physician or health care provider who
10 declined to participate in providing life-sustaining treatment for
11 reasons of conscience.

12 Sec. 161.707. DISCIPLINARY ACTION; COMPLAINT. (a) A
13 health care facility, physician, or health care provider that holds
14 a license issued by a licensing agency in this state is subject to
15 review and disciplinary action by the licensing agency for a
16 violation of this subchapter as if the facility, physician, or
17 provider violated the applicable licensing law.

18 (b) An individual who is injured by a violation of this
19 subchapter may file a complaint with the licensing agency that
20 issued a license to the health care facility, physician, or health
21 care provider that allegedly violated this subchapter.

22 (c) A physician or health care provider may not file a
23 complaint with the appropriate licensing agency under this section
24 unless the physician or health care provider complies with the
25 health care facility's protocol developed under Section 161.705 or
26 161.706, as appropriate.

27 Sec. 161.708. CIVIL REMEDIES. A person who is injured by a

1 violation of this subchapter may bring a civil action against a
2 person who violates this subchapter. A person who brings the action
3 under this section may obtain:

4 (1) injunctive relief;

5 (2) damages incurred by the person, including:

6 (A) actual damages for all psychological,
7 emotional, and physical injuries resulting from the violation of
8 this subchapter;

9 (B) court costs; and

10 (C) reasonable attorney's fees; or

11 (3) both injunctive relief and damages.

12 SECTION 3. Not later than March 1, 2022, a health care
13 facility, as that term is defined by Section 161.701, Health and
14 Safety Code, as added by this Act, shall adopt protocols required by
15 Sections 161.705 and 161.706, Health and Safety Code, as added by
16 this Act.

17 SECTION 4. Section 161.703, Health and Safety Code, as
18 added by this Act, applies only to a cause of action that accrues on
19 or after the effective date of this Act.

20 SECTION 5. This Act takes effect January 1, 2022.