

BILL ANALYSIS

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By: Sparks
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AUTHOR'S / SPONSOR'S STATEMENT OF INTENT

Stakeholders seek to reinforce the rights of healthcare professionals to act in accordance with their religious, moral, and ethical beliefs without fear of coercion or discrimination. Over the past few years, five states have enacted similar laws ensuring that medical professionals and institutions are not compelled to participate in procedures that violate their conscience. Representative Oliverson previously introduced H.B. 1424 in the 87th Legislature to provide physician conscience protections, but the measure failed to pass. With increasing reports of workplace discrimination against religious healthcare professionals, stronger legal safeguards are needed to protect medical providers while maintaining access to patient care. S.B. 619 aims to protect healthcare providers from being forced to perform medical procedures that conflict with their deeply held beliefs. The legislation establishes a clear right to decline participation in specific healthcare services, with exceptions for emergency care and life-sustaining treatment. It also prevents adverse employment actions—such as termination, denial of licensure, or coercion—against those who exercise this right. Furthermore, the bill requires healthcare facilities to develop protocols ensuring patients can access care without compromising provider conscience rights. By implementing disciplinary measures and civil remedies for those who face discrimination due to their ethical or religious convictions, S.B. 619 strengthens protections for Texas healthcare professionals while balancing patient care needs.

As proposed, S.B. 619 amends current law relating to protection of persons from participation in a health care service for reasons of conscience, provides a civil remedy, and authorizes disciplinary action.

RULEMAKING AUTHORITY

This bill does not expressly grant any additional rulemaking authority to a state officer, institution, or agency.

SECTION BY SECTION ANALYSIS

SECTION 1. Provides that the legislature finds that the public policy of this state is to respect the conscience of all health care providers and the right of each health care provider to hold their own belief about whether certain health care services are morally acceptable; that without comprehensive protections, the conscience of health care providers may be violated; and that each health care provider must be protected from required participation in a health care service in which the provider has declined participation for reasons of conscience and from discriminatory adverse action resulting from the nonparticipation.

SECTION 2. Amends Chapter 161, Health and Safety Code, by adding Subchapter Z, as follows:

SUBCHAPTER Z. TEXAS HEALTH CARE CONSCIENCE PROTECTION ACT

Sec. 161.751. DEFINITIONS. Defines "conscience," "emergency care," "health care facility," "health care provider," "health care service," and "physician."

Sec. 161.752. RIGHT TO DECLINE PARTICIPATION IN HEALTH CARE SERVICE FOR REASONS OF CONSCIENCE; CONSTRUCTION OF SUBCHAPTER. (a)

Authorizes a person, except as provided by Subsection (b), to decline to participate in a health care service for reasons of conscience.

(b) Prohibits a person from declining to participate in emergency care or, except as provided by Chapter 166 (Advance Directives), life-sustaining treatment.

(c) Provides that nothing in this subchapter is authorized to be construed to supersede Chapter 166 governing the provision, withholding, or withdrawing of life-sustaining treatment or apply to emergency care, life-sustaining treatment, or cardiopulmonary resuscitation.

(d) Provides that an exercise of the right of conscience under this section is limited to a person's right to refuse to participate in a specific health care service.

Sec. 161.753. IMMUNITY OF PHYSICIANS AND HEALTH CARE PROVIDERS. Prohibits a physician or health care provider from being held civilly or criminally liable because the physician or health care provider declines to participate in a health care service wholly or partly for reasons of conscience in accordance with Section 161.752.

Sec. 161.754. ADVERSE ACTION. Provides that a person, including a public official and a medical school or other institution that conducts education or training programs for physicians or health care providers, violates this subchapter by taking an adverse action against another person because the other person declines to participate in a health care service for reasons of conscience in accordance with Section 161.752. Provides that violations include discrimination against or taking an adverse action with regard to certain factors.

Sec. 161.755. PROTOCOL FOR DECLINING PARTICIPATION IN PROVISION OF HEALTH CARE SERVICE. (a) Requires a health care facility to develop a written protocol for circumstances in which a person declines to participate in providing a health care service, other than emergency care or life-sustaining treatment, for reasons of conscience. Requires that the protocol describe a patient's access to health care services and information to ensure the patient is not permanently or substantially prevented from obtaining the services and explain the process the facility will implement to facilitate in a timely manner the patient's access to the services.

(b) Requires a person who declines to participate in providing a health care service for reasons of conscience to notify the health care facility of the declination and comply with the applicable protocol developed under this section.

(c) Provides that this section does not permit a protocol developed under this section to require a health care facility, physician, or health care provider to counsel a patient or refer the patient to another physician or facility regarding a health care service that is contrary to the conscience of the physician or health care provider.

Sec. 161.756. DISCIPLINARY ACTION; COMPLAINT. (a) Provides that a health care facility, physician, or health care provider that holds a license issued by a licensing agency in this state is subject to review and disciplinary action by the licensing agency for a violation of this subchapter as if the facility, physician, or provider violated the applicable licensing law.

(b) Authorizes a person who is injured by a violation of this subchapter to file a complaint with the licensing agency that issued a license to the health care facility, physician, or health care provider that allegedly violated this subchapter.

(c) Prohibits a physician or health care provider from filing a complaint with the appropriate licensing agency under this section unless the physician or health care provider complies with the health care facility's protocol developed under Section 161.755.

Sec. 161.757. CIVIL REMEDIES. Authorizes a person who is injured by a violation of this subchapter to bring a civil action against a person who violates this subchapter. Authorizes a person who brings an action under this section to obtain injunctive relief; damages incurred by the person, including actual damages for all psychological, emotional, and physical injuries resulting from the violation of this subchapter, court costs, and reasonable attorney's fees; or both injunctive relief and damages.

SECTION 3. Requires a health care facility, as that term is defined by Section 161.751, Health and Safety Code, as added by this Act, not later than December 1, 2025, to develop a written protocol as required by Section 161.755, Health and Safety Code, as added by this Act.

SECTION 4. Makes application of Section 161.753, Health and Safety Code, as added by this Act, prospective.

SECTION 5. Effective date: September 1, 2025.