GENERAL ASSEMBLY OF NORTH CAROLINA SESSION 2021

S SENATE BILL 515

Short Title:	Health Care Heroes Conscience Protection Act.	(Public)
Sponsors:	Senators Hise, Daniel, and Sanderson (Primary Sponsors).	
Referred to:	Rules and Operations of the Senate	

April 6, 2021

A BILL TO BE ENTITLED

AN ACT TO PROTECT THE RIGHT OF CONSCIENCE OF MEDICAL PRACTITIONERS, HEALTH CARE INSTITUTIONS, AND HEALTH CARE PAYERS.

Whereas, the right of conscience is a fundamental and unalienable right, and was central to the founding of the United States of America and deeply rooted in the United States' history and tradition for centuries; and

Whereas, the right of conscience has been central to the practice of medicine for millennia through the Hippocratic Oath; and

Whereas, despite its importance, threats to the right of conscience of medical practitioners, health care institutions, and health care payers have become increasingly more common and severe in recent years; and

Whereas, the swift pace of scientific advancement and the expansion of medical capabilities promise only to make the current crisis worse, unless something is done to restore conscience to its rightful place; and

Whereas, it is the public policy of the State of North Carolina to protect the right of conscience for medical practitioners, health care institutions, and health care payers; and

Whereas, the right of conscience is fundamental, and no medical practitioner, health care institution, or health care payer should be compelled to participate in a health care service that they object to on the basis of conscience, whether such conscience is informed by religious, moral, ethical, or philosophical beliefs or principles; and

Whereas, it is the purpose of this act to protect medical practitioners, health care institutions, and health care payers from discrimination, punishment, or retaliation as a result of an instance of conscientious medical objection; Now, therefore,

The General Assembly of North Carolina enacts:

SECTION 1. Chapter 90 of the General Statutes is amended by adding a new Article to read:

"Article 1M.

"Health Care Heroes Conscience Protection Act.

"§ 90-21.140. Short title.

This Article shall be known and may be cited as the "Health Care Heroes Conscience Protection Act."

"§ 90-21.141. Definitions.

The following definitions apply in this Article:

- (1) Conscience. Any of the following:
 - <u>a.</u> <u>The religious, moral, or ethical beliefs or principles held by any medical practitioner, health care institution, or health care payer.</u>



1		b. Any published religious, moral, or ethical guidelines or directives,
2		mission statements, articles of incorporation, bylaws, policies, or
3		regulations published or created by institutional entities or corporate
4		bodies.
5	<u>(2)</u>	<u>Disclosure.</u> – A formal or informal communication or transmission, excluding
6		a communication or transmission concerning policy decisions that lawfully
7		exercise discretionary authority, unless the medical practitioner providing the
8		disclosure or transmission reasonably believes that the disclosure or
9		transmission evinces any of the following:
10		a. Any violation of law, rule, or regulation.
11		b. Any violation of any ethical guidelines for the provision of any health
12		care service.
12 13		c. Gross mismanagement, a gross waste of funds, an abuse of authority,
14 15		or a substantial and specific danger to public health or safety.
15	<u>(3)</u>	Discrimination. – Any adverse action against any medical practitioner, health
16		care payer, or health care institution as a result of his, her, or its decision to
17		decline to participate in a health care service on the basis of conscience,
18		including any of the following, with the exception of the negotiation or
19		purchase of insurance by a nongovernmental entity:
20		a. Termination of employment.
21		b. Transfer or demotion from current position.
22		
23		 c. Adverse administrative action. d. Reassignment to a different shift or job title. e. Increased administrative duties. f. Refusal of staff privileges. g. Refusal of board certification or loss of career specialty. h. Reduction of wages, benefits, or privileges. i. Refusal to award a grant, contract, or other program. j. Refusal to provide residency training opportunities. k. Denial, deprivation, or disqualification of licensure.
24		e. Increased administrative duties.
21 22 23 24 25 26 27 28		f. Refusal of staff privileges.
26		g. Refusal of board certification or loss of career specialty.
27		h. Reduction of wages, benefits, or privileges.
28		i. Refusal to award a grant, contract, or other program.
29		j. Refusal to provide residency training opportunities.
30		k. Denial, deprivation, or disqualification of licensure.
31		l. Withholding or disqualifying from financial aid and other assistance.
32		m. Impediments to creating any health care institution or payer or
33		expanding or improving that health care institution or payer.
34		
35		<u>n.</u> <u>Impediments to acquiring, associating, or merging with any other</u> health care institution or payer.
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37		o. The threat of any action listed in this subdivision or any other penalty, disciplinary, or retaliatory action.
38	(4)	Health care service. – Medical care provided to any patient at any time over
39	<u>(4)</u>	the entire course of treatment, including testing; diagnosis; referral;
		dispensing or administering any drug, medication, or device; psychological
40		therapy or counseling; research; prognosis; therapy; record-making
41 42		
		procedure; notes related to treatment; set-up or performance of a surgery or
43 4.4		procedure; or any other care or services performed or provided by any medical
14 15		practitioner, allied health professionals, paraprofessionals, or employees of a
45 46	(5)	health care institution.
46 47	<u>(5)</u>	Health care institution. – Any public or private hospital, clinic, medical center,
47 40		physician organization, professional association, ambulatory surgical center,
48		private physician's office, pharmacy, nursing home, medical or nursing
49 -0		school, medical training facility, organizations, corporations, partnerships,
50		associations, agencies, networks, sole proprietorships, joint ventures, or any

 other entity or location in which health care services are performed on behalf of any person or which provides health care services.

- (6) Health care payer. Any employer, health plan, health maintenance organization, insurance company, management services organization, or any other entity that pays for or arranges for the payment, in whole or in part, of any health care service provided to any patient.

 (7) Medical practitioner. – Any person or individual who may be or is asked to participate in a health care service in the normal course of employment, including physicians, nurse practitioners, physician assistants, registered nurses, nurse aides, allied health professionals, medical assistants, hospital employees, clinic employees, nursing home employees, pharmacists, pharmacy technicians and employees, medical school faculty and students, nursing school faculty and students, psychology and counseling faculty and students, medical researchers, laboratory technicians, counselors, social workers, or any other person who facilitates or participates in the provision of

health care services to any person.
 Participation in a health care service. – Performance, assistance, referral, consultation with, or admittance of any person or individual to provide any health care service.

"§ 90-21.142. Protections.

 (a) A medical practitioner, health care institution, or health care payer shall have the right not to participate in or pay for any health care service which violates his, her, or its conscience.

- (b) No medical practitioner, health care institution, or health care payer shall be civilly, criminally, or administratively liable for exercising his, her, or its right of conscience not to participate in or pay for a health care service. No health care institution shall be civilly, criminally, or administratively liable for the exercise of conscience rights not to participate in a health care service by a medical practitioner employed, contracted, or granted admitting privileges by the health care institution.
- (c) It shall be unlawful for any person to discriminate against any medical practitioner, health care institution, or health care payer that refuses to participate in or pay for a health care service on the basis of conscience under this Article.

"§ 90-21.143. Exemption; limitation.

(a) Notwithstanding any other provision of law, any medical practitioner, health care institution, or health care payer that holds itself out to the public as religious, states in its governing documents that it has a religious purpose or mission, and has internal operating policies or procedures that implement its religious beliefs, shall have the right to make employment, staffing, contracting, and admitting privilege decisions consistent with its religious beliefs.

(b) No provision of this Article shall be construed to override the requirement to provide emergency medical treatment to a patient in accordance with 42 U.S.C. § 1395dd, et seq.

(c) This Article shall be supplemental to existing protections of the right of conscience recognized in this State contained in the General Statutes and the North Carolina Constitution and shall not be construed to abridge, limit, or take away any existing protections.

(d) Exercise of any right of conscience under this Article shall be limited to conscience-based objections to particular health care services.

"<u>§ 90-21.144. Civil remedies.</u>

(a) A civil action for damages or injunctive relief may be brought by any medical practitioner, health care institution, or health care payer for any violation of any provision of this Article. Any additional burden or expense on another medical practitioner, health care institution, or health care payer arising from the exercise of the right of conscience shall not be a defense to any violation of this Article. No civil action may be brought against an individual who declines

- to use or purchase health care services from a specific medical practitioner, health care institution, or health care payer for exercising the rights granted in this Article.

 (b) Any party aggrieved by any violation of this Article may commence a civil action and
 - (b) Any party aggrieved by any violation of this Article may commence a civil action and shall be entitled, upon the finding of a violation, to recover the following:
 - (1) Statutory damages equal to three times the cost of the actual damages sustained by the aggrieved party. Damages recovered under this subdivision shall be cumulative and not limited by any other remedies which may be available under any other federal, State, or municipal law.
 - (2) Total costs of the action and reasonable attorneys' fees.
 - (c) <u>Injunctive Relief. Injunctive relief may be obtained to reinstate a medical practitioner to a previous position, reinstate board certification, or re-license a health care institution or health care payer.</u>

"§ 90-21.145. Protection from retaliation.

- (a) No medical practitioner shall be discriminated against in any manner because the medical practitioner does any of the following:
 - Provided, caused to be provided, or takes steps to provide or cause to be provided to his or her employer, the Attorney General, any State agency, the United States Department of Health and Human Services, or any other federal agency, any information or an act or omission that is a violation of any provision of this Article.
 - (2) Testified or prepared to testify in a proceeding concerning a violation of this Article.
 - (3) Assisted or participated in a proceeding concerning a violation of this Article.
- (b) Unless a disclosure or report of information is specifically prohibited by law, no medical practitioner shall be discriminated against in any manner because the medical practitioner disclosed any information under this Article that the medical practitioner reasonably believes evinces any of the following:
 - (1) Any violation of law, rule, or regulation.
 - (2) Any violation of any standard of care or other ethical guidelines for the provision of any health care service.
 - (3) Gross mismanagement, a gross waste of funds, an abuse of authority, or a substantial and specific danger to public health or safety."
- **SECTION 2.** If any provision of this act or its application is held invalid, the invalidity does not affect other provisions or applications of this act that can be given effect without the invalid provisions or application, and to this end the provisions of this act are severable.
 - **SECTION 3.** This act becomes effective October 1, 2021.