1	AN ACT relating to the recruitment and retention of medical professionals and
2	declaring an emergency.
3	WHEREAS, Kentucky has a statewide hospital workforce vacancy rate of 17.1
4	percent; and
5	WHEREAS, many faith-based medical organizations would rather stop practicing
6	medicine than be forced to violate their conscience; and
7	WHEREAS, it is common for doctors, medical students, and other health care
8	professionals to face discrimination for declining to participate in activities or provide
9	medical procedures to which they have moral or religious objections; and
10	WHEREAS, forcing doctors, nurses, and other health care professionals to violate
11	their conscience could exacerbate and lead to additional increases in shortages, depriving
12	Kentucky patients of critical care; and
13	WHEREAS, neighboring states have provided comprehensive protections for rights
14	of conscience in the practice of medicine since as early as 1977; and
15	WHEREAS, Kentucky law does not currently provide a legal remedy for health
16	care professionals who are forced to violate their conscience; and
17	WHEREAS, Kentucky patients benefit from conscience-informed medical care;
18	and
19	WHEREAS, Section 5 of the Constitution of Kentucky requires that "No human
20	authority shall, in any case whatever, control or interfere with the rights of conscience.";
21	and
22	WHEREAS, conscience-driven health care professionals care for patients even
23	when they cannot according to their conscience provide particular medical procedures;
24	and
25	WHEREAS, the federal Emergency Medical Treatment and Active Labor Act
26	requires treatment for emergency medical conditions, and only nonemergency medical
27	services can be declined for reasons of conscience;

1	NOW, THEREFORE,
2	Be it enacted by the General Assembly of the Commonwealth of Kentucky:
3	→SECTION 1. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
4	READ AS FOLLOWS:
5	Nothing in Sections 1 to 6 of this Act shall be construed to override the requirement to:
6	(1) Provide emergency medical treatment to all patients as set forth in 42 U.S.C. sec.
7	1395dd or any other federal law governing emergency medical treatment; or
8	(2) Conduct examinations and collect evidence set forth in federal law governing
9	sexual assault crimes.
10	→SECTION 2. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
11	READ AS FOLLOWS:
12	As used in Sections 1 to 6 of this Act:
13	(1) "Conscience" means the sincerely held religious, moral, or ethical principles
14	held by a medical practitioner, a health care institution, or a health care payer.
15	For purposes of Sections 1 to 6 of this Act, a health care institution or health care
16	payer's conscience shall be determined by reference to its existing or proposed
17	governing documents, including religious, moral, or ethical guidelines, mission
18	statement, constitution, bylaws, articles of incorporation, policies, regulations, or
19	other relevant documents;
20	(2) "Disclosure" means a formal or informal communication or transmission, but
21	does not include a communication or transmission concerning policy decisions
22	that lawfully exercise discretionary authority, unless the medical practitioner
23	providing the communication or transmission reasonably believes that the
24	communication or transmission evinces:
25	(a) A violation of any law, rule, or regulation;
26	(b) A violation of any standard of care or other ethical guidelines for the
27	provision of any medical service; or

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1		(c) Gross mismanagement, a gross waste of funds, an abuse of authority,
2		practices or methods of treatment that may put patient health at risk, or a
3		substantial and specific danger to public health or safety;
4	<u>(3)</u>	"Discrimination" means any adverse action taken against, or any threat of
5		adverse action communicated to, a medical practitioner, health care institution,
6		or health care payer as a result of his, her, or its decision to decline to participate
7		in a medical service on the basis of conscience. "Discrimination" includes but is
8		not limited to:
9		(a) Termination of employment;
10		(b) Transfer or demotion from current position;
11		(c) Adverse administrative action;
12		(d) Reassignment to a different shift or job title;
13		(e) Refusal of staff privileges;
14		(f) Refusal of board certification;
15		(g) Loss of career specialty;
16		(h) Reduction of wages, benefits, or privileges;
17		(i) Refusal to award a grant, contract, or other program;
18		(j) Refusal to provide residency training opportunities;
19		(k) Denial, deprivation, or disqualification of licensure;
20		(1) Withholding or disqualifying from financial aid and other assistance;
21		(m) Reducing, excluding, terminating, materially altering the terms of
22		conditions of, or otherwise making unavailable or denying, any grant,
23		contract, subcontract, cooperative agreement, guarantee, loan, or other
24		similar program or benefit;
25		(n) Impediments to creating any health care institution or payer or expanding
26		or improving that health care institution or payer;
27		(o) Impediments to acquiring, associating with, or merging with any other

1		health care institution or payer;
2		(p) The threat with regard to any of the actions in paragraphs (a) to (o) of this
3		subsection; or
4		(q) Any other penalty, disciplinary, or retaliatory action, whether executed or
5		threatened;
6	<u>(4)</u>	"Health care institution" means any public or private hospital, clinic, medical
7		center, professional association, ambulatory surgical center, private physician's
8		office, pharmacy, nursing home, medical school, nursing school, medical
9		training facility, or any other entity or location in which medical services are
10		performed on behalf of any person. "Health care institutions" includes but is not
11		limited to organizations, corporations, partnerships, associations, agencies,
12		networks, sole proprietorships, joint ventures, or any other entity that provides
13		medical services;
14	<u>(5)</u>	"Medical practitioner" means any person or individual who may be or is asked to
15		participate in a medical service. "Medical practitioner" includes but is not limited
16		to doctors, nurses, practitioners, physician's assistants, nurses, nurse's aides,
17		allied health professionals, medical assistants, hospital employees, clinic
18		employees, nursing home employees, pharmacists, pharmacy technicians and
19		employees, medical school faculty and students, nursing faculty and students,
20		psychology and counseling faculty and students, medical researchers, laboratory
21		technicians, counselors, social workers, or any other person who facilitates or
22		participates in the provision of health care to any person;
23	<u>(6)</u>	"Medical service" means medical care provided to any patient at any time over
24		the entire course of treatment or medical research, including but not limited to:
25		(a) Testing;
26		(b) Diagnosis;
27		(c) Referral;

1	(d) Dispensing or administering any drug, medication, or device;
2	(e) Psychological therapy or counseling:
3	(f) Recordkeeping procedures;
4	(g) Notes related to treatments;
5	(h) Research;
6	(i) Prognosis;
7	(j) Therapy;
8	(k) Creating medical records; or
9	(1) Any other medical care or necessary medical services performed or provided
10	by any medical practitioner;
11	(7) "Participate in a medical service" means to provide, perform, assist with,
12	facilitate, refer for, counsel for, consult with regard to, admit for the purposes of
13	providing, or take part in any way in providing, any medical service or any form
14	of such a service; and
15	(8) "Regulated healthcare entity" means any medical practitioner, health care
16	institution, or health care payer that is certified, authorized, or licensed by the
17	Commonwealth of Kentucky, or that receives any form of state funding or state
18	insurance reimbursement.
19	→SECTION 3. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
20	READ AS FOLLOWS:
21	(1) A medical practitioner or health care institution shall have the right to not
22	participate in or pay for any medical service which violates his, her, or its
23	conscience. A health care payer shall not decline to pay for a medical procedure
24	or service it is contractually obligated to pay for under the terms of its contract
25	with an insured party.
26	(2) A medical practitioner or health care institution shall not be liable civilly,
27	criminally, or administratively for exercising his, her, or its right of conscience

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1	with respect to a medical service.
2	(3) A medical practitioner or health care institution shall not be subject to
3	discrimination in any manner by the Commonwealth, any of its political
4	subdivisions, or any regulated health care entity as a result of his, her, or its
5	decision to decline to participate in a medical service on the basis of conscience.
6	(4) The exercise of the right of conscience is limited to conscience-based objections
7	to a particular medical procedure or service. This section shall not be construed
8	to waive or modify any duty a health care practitioner or health care institution
9	may have to provide other medical procedures or services that do not violate the
10	practitioner's or institution's conscience.
11	→SECTION 4. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
12	READ AS FOLLOWS:
13	(1) A medical practitioner shall not be discriminated against because he or she:
14	(a) Provided, caused to be provided, or is about to provide to his or her
15	employer, the Attorney General, any agency of the Commonwealth charged
16	with protecting health care rights of conscience, the United States
17	Department of Health and Human Services, Office for Civil Rights, or any
18	other federal agency charged with protecting health care rights of
19	conscience with information relating to any violation, act, or omission the
20	medical practitioner reasonably believes to be a violation of any provision of
21	Sections 1 to 6 of this Act;
22	(b) Testified or is about to testify in a proceeding concerning a violation; or
23	(c) Assisted, participated, or is about to assist or participate in related
24	proceedings.
25	(2) Unless the disclosure is prohibited by law, a medical practitioner shall not be
26	discriminated against because he or she disclosed information that he or she
27	reasonably believes evinces:

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1	(a) A violation of a relevant law, rule, or regulation;
2	(b) A violation of a standard of care or other ethical guideline for the provision
3	of medical services; or
4	(c) Gross mismanagement, gross waste of funds, abuse of authority, practices
5	or methods of treatment that may put patient health at risk, or a substantial
6	and specific danger to public health or safety.
7	→SECTION 5. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
8	READ AS FOLLOWS:
9	(1) The State Board of Medical Licensure shall not reprimand, sanction, deny,
10	revoke or threaten to revoke a license, certification, or registration of a medical
11	practitioner for engaging in speech or expressive activity that is protected by the
12	First Amendment to the United States Constitution, unless the board
13	demonstrates beyond a reasonable doubt that the medical practitioner's speech
14	was the direct cause of physical harm to a person with whom the practitioner had
15	a practitioner-patient relationship within the three (3) years immediately
16	preceding the incident of physical harm.
17	(2) The State Board of Medical Licensure shall provide a medical practitioner with
18	any complaints it has received which may result in the revocation of the medical
19	practitioner's license, certification, or registration within twenty-one (21) days
20	after receipt of the complaint. The board shall pay the medical practitioner an
21	administrative penalty of five hundred dollars (\$500) for each day the complaint
22	is not provided to the medical practitioner after the specified twenty-one (21) day
23	period.
24	→SECTION 6. A NEW SECTION OF KRS CHAPTER 344 IS CREATED TO
25	READ AS FOLLOWS:
26	(1) Any person injured by a violation of Sections 1 to 6 of this Act shall have a civil
27	cause of action in the Circuit Court of competent jurisdiction to enjoin further

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1	violations, to recover the actual damages sustained, and to recover the costs of the
2	lawsuit and to provide any other appropriate relief, which may include
3	reinstatement of a medical practitioner to his or her previous position,
4	reinstatement of board certification, and relicensure of a health care institution
5	or health care payer.
6	(2) If a violation is found to have occurred, the court's order or judgment shall
7	include a reasonable attorney's fee.
8	(3) Any additional burden or expense on another medical practitioner, health care
9	institution, or health care payer arising from the exercise of the right of
10	conscience shall not be a defense to any violation of Sections 1 to 6 of this Act.
11	Section 7. If any provision of this Act or the application thereof to any person \bullet
12	or circumstance is held invalid, the invalidity shall not affect other provisions or
13	applications of the Act that can be given effect without the invalid provision or
14	application, and to this end the provisions of this Act are severable.
15	→Section 8. This Act may be cited as the Healthcare Heroes Recruitment and
16	Retention Act.
17	\Rightarrow Section 9. Whereas it is crucial that the Commonwealth's regulatory policies
18	reflect the statutory intent of the General Assembly, an emergency is declared to exist,
19	and this Act takes effect upon its passage and approval by the Governor or upon its
20	otherwise becoming a law.

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