

No. 15-862

In the
Supreme Court of the United States

STORMANS, INC., D/B/A RALPH'S THRIFTWAY, ET AL.,
Petitioners,

v.

JOHN WIESMAN, SECRETARY, WASHINGTON STATE
DEPARTMENT OF HEALTH, ET AL.,
Respondents.

On Petition for a Writ of Certiorari
to the United States Court of Appeals
for the Ninth Circuit

**BRIEF OF *AMICI CURIAE* 43 MEMBERS OF CONGRESS IN
SUPPORT OF PETITIONERS**

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INTEREST OF *AMICI CURIAE*¹

Amici are 43 Members of Congress who share a strong interest in protecting the constitutional rights of their constituents and in upholding Congress's longstanding tradition of acknowledging and accommodating conscience rights. They are in a unique position to explain the consensus throughout the United States of codifying and vindicating that tradition.

Amici are:

United States Senators

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James Lankford (R-OK)

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1. Pursuant to this Court's Rule 37, *amici curiae* Members of Congress state that no counsel for any party authored this brief in whole or in part, and no person or entity other than counsel for *amici curiae* Members of Congress made a monetary contribution to the preparation or submission of this brief. Counsel of record for all parties were timely notified of the filing of this brief more than 10 days prior to the filing of this brief. The parties have consented to the filing of this brief, and the letter confirming such consent has been lodged with the Clerk.

Doug Collins (R-GA)	J. Randy Forbes (R-VA)
John Culberson (R-TX)	Bob Goodlatte (R-VA)
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SUMMARY OF ARGUMENT

Since its founding, the United States has recognized and protected conscience rights. Even in an area as vital as military service, conscientious objectors' rights were recognized in the colonies before and during the Revolutionary War. And since that time, rights of conscience have continued to be affirmed and protected throughout American history.

In the modern era, a remarkably uniform consensus has developed in both the federal government and the States with regard to protecting the conscience rights of *healthcare* professionals. Because healthcare professionals maintain a unique and noble calling to care for their patients, governments have overwhelmingly codified measures that expressly allow them to abstain from participating in practices they believe violate their duty not to kill or cause harm. For example, States across the political spectrum responded to *Roe v. Wade* by enacting statutes to protect conscience rights in the abortion context, and many States continue to effectuate these rights as they are implicated in new contexts. Likewise, the federal government has also enacted conscience-rights legislation across numerous subjects pertaining to healthcare.

The Ninth Circuit's decision rejecting the conscience rights of pharmacists and pharmacies deviates sharply from this widespread consensus. If left unaddressed, this outlier decision could provide a dangerous blueprint for other States to negate the

conscience rights of our healthcare service providers. Therefore, *amici curiae* Members of Congress respectfully urge the Court to grant the petition for a writ of certiorari.

ARGUMENT

I. CONSCIENCE RIGHTS HAVE BEEN RECOGNIZED IN THE UNITED STATES SINCE THE TIME OF THE FOUNDING FATHERS.

A. Conscience Rights Were Acknowledged in the Colonial Period and Revolutionary War.

Conscience rights in America are rooted in our earliest days, beginning with the right to refuse to bear arms. Soon after the establishment of Jamestown and the Plymouth Colony, the first conscientious objectors—members of religious sects whose beliefs forbade them to take up arms—arrived in America. The Quakers arrived in 1656, the Mennonites in 1683, and the Brethren in 1719. CONSCIENCE IN AMERICA: A DOCUMENTARY HISTORY OF CONSCIENTIOUS OBJECTION IN AMERICA, 1757–1967, 17 (Lillian Schlissel ed., 1968); PETER BROCK, PACIFISM IN THE UNITED STATES FROM THE COLONIAL ERA TO THE FIRST WORLD WAR 21, 160 (1968).

Though they came to the New World to live in peace, they were met with fierce persecution for refusing to serve in the colonial militia. Over time, however, they came to win the liberty of conscience for which they had come to the New World. CONSCIENCE IN AMERICA, *supra*, at 17–18. Massachusetts in 1661, Rhode Island in 1673, and

Pennsylvania in 1757 all relieved conscientious objectors from the duty to take up arms. CONSCIENCE IN AMERICA, *supra*, at 28. Eventually, every one of the original thirteen colonies (except for Georgia, which was founded as a frontier defense colony) enacted exemptions for conscientious objectors from military service. THE NEW CONSCIENTIOUS OBJECTION: FROM SACRED TO SECULAR 26 (Charles C. Moskos & John Whiteclay Chambers II eds., 1993).

Consistent with this emergent practice, during the Revolutionary War the Continental Congress assured conscientious objectors that it “intend[ed] no Violence to their Consciences.” CONSCIENCE IN AMERICA, *supra*, at 31; THE NEW CONSCIENTIOUS OBJECTION, *supra*, at 29. Similarly, after the war George Washington wrote to a Quaker leader expressing his subjective disagreement with their conscientious objection but affirming:

I assure you very explicitly, that in my opinion the conscientious scruples of all men should be treated with great delicacy and tenderness: and it is my wish and desire, that the laws may always be extensively accommodated to them, as a due regard for the protection and essential interests of the nation may justify and permit.

Letter from George Washington to the Religious Society called Quakers (Oct. 1789), *in* 12 THE WRITINGS OF GEORGE WASHINGTON 168-69 (Jared Sparks, ed., 1838).

And although conscientious objectors still faced persecution for their faith on occasion, their right to object was recognized by those in highest authority. For example, in 1816 President Madison pardoned a group of seven Maryland Quakers who had been imprisoned by the local sheriff for their failure to pay their militia commutation fines. JAMES S. KABALA, *CHURCH-STATE RELATIONS IN THE EARLY AMERICAN REPUBLIC, 1787-1846* (2013).

B. Our Nation Has Continued to Protect Conscience Rights in a Manner Tailored to Individuals' Specific Beliefs.

The tradition of protecting conscientious objectors that began in colonial times has endured through our Nation's history, often through individualized accommodations tailored to objectors' specific beliefs. During the Second World War, for example, 25,000 conscientious objectors accepted noncombat service in the military. CYNTHIA ELLER, *CONSCIENTIOUS OBJECTORS AND THE SECOND WORLD WAR: MORAL AND RELIGIOUS ARGUMENTS IN SUPPORT OF PACIFISM* 66, 69 (1991).² For those objectors whose beliefs precluded any form of military service, 12,000 entered Civil Public Service. *Id.* In tailoring exemptions from military duty to be either a complete exemption or an exemption from combat

2. Statistics as to conscientious objection during World War II vary from source to source. See *CHURCH-STATE ISSUES IN AMERICA TODAY* 110 n.46 (Ann Duncan & Steven Jones, eds., 2008) (collecting sources).

positions, the federal government ably effectuated the interests of both conscience rights and the Nation.

And allowing conscientious objectors to serve their country consistent with their beliefs has served America well. In this regard, the story of Desmond Doss, a Seventh-day Adventist who refused to kill or carry a weapon due to his personal beliefs, is instructive. *See* Richard Goldstein, *Desmond T. Doss, 87, Heroic War Objector, Dies*, N.Y. TIMES, March 25, 2006. Doss was permitted to serve his country as a medic in the Pacific theater during World War II. *Id.* Without ever firing a shot, Doss saved the lives of numerous American soldiers. In one engagement, Doss repeatedly exposed himself to enemy fire in order to carry, one by one, seventy-five injured soldiers to safety. Shortly thereafter, Doss was wounded by a grenade and, at one point, crawled over 300 yards using a rifle-stock splint after being struck by a sniper's bullet. He was awarded the Medal of Honor, our Nation's highest military decoration. *Id.*³

Continuing the tradition of protecting conscience rights, the contemporary conscientious-objector process is particularized and belief-specific to ensure

3. *See also* Danae Tuley, *The Courage of their Convictions: Three Conscientious Objectors and the Heroism that earned them the Medal of Honor*, SELECTIVE SERV. SYS., <https://www.sss.gov/Alternative-Service/CO-Story-1> (last visited Feb. 2, 2016) (highlighting the bravery of Desmond Doss as a conscientious objector).

that Americans are allowed to serve in a manner consistent with their deepest values. Partial objectors such as Seventh-day Adventists, Mennonites, or secular objectors who are opposed only to offensive military action are assigned non-combat service roles. In contrast, Quakers, Jehovah's Witnesses, or secular objectors opposed to both offensive and defensive military action are assigned to "alternative service," which includes conservation, caring for the very young or very old, education, or health care.⁴

If the federal government can protect conscience rights when the interest at stake is *national security*, then administrative agencies should be fully capable of tailoring true accommodations when the asserted interest at stake is in the marginally increased use of widely available contraceptives. And unsurprisingly, as described below, administrative agencies and state governments almost universally do so.

4. See *Conscientious Objection and Alternative Service*, SELECTIVE SERV. SYS., <https://www.sss.gov/consobj> (last visited Feb. 2, 2016) ("Two types of service are available to conscientious objectors, and the type assigned is determined by the individual's specific beliefs. The person who is opposed to any form of military service will be assigned to alternative service . . . The person whose beliefs allow him to serve in the military but in a noncombatant capacity will serve in the Armed Forces but will not be assigned training or duties that include using weapons.").

II. THE STATES AND FEDERAL GOVERNMENT HAVE A LONGSTANDING, UNBROKEN TRADITION OF PROTECTING RIGHTS OF CONSCIENCE IN HEALTHCARE.

In the modern era, the States and the federal government recognize and accommodate conscience rights in areas beyond military service, particularly those of healthcare professionals.⁵

The consensus that the medical profession must be afforded such protection arose as a direct result of the Court's decision in *Roe v. Wade*, 410 U.S. 113 (1973). In immediate response to that decision, Senator Frank Church sponsored legislation that exempted private hospitals receiving federal funds from any requirement to provide abortions or sterilizations when they objected on "the basis of religious beliefs or moral convictions."⁶ Notably, the recognition of healthcare professionals' conscience rights was distinct from the underlying issue of abortion. Demonstrating the near-unanimous recognition of conscience rights across the political spectrum, the "Church Amendment" was passed by the Senate on a vote of 92-1 (119 CONG. REC. 9607 (1973)).⁷

5. *Amici* include as an Appendix to this brief a survey of federal and state laws protecting rights of conscience.

6. Health Programs Extension Act of 1973, P.L. 93-45, 87 Stat. 91; 42 U.S.C. § 300a-7.

7. The Court's jurisprudence likewise reflects the uncontroversial recognition of healthcare professionals' conscience rights: In

In addition to the Church Amendment, 42 U.S.C. § 300a-7(c)(1), which remains in force, additional federal laws also recognize conscience rights with regard to non-participation in abortion. For example, the Legal Services Corporation Act, 42 U.S.C. § 2996f(b)(8), provides that legal services funds may not be used to compel individuals or institutions to assist in performing abortions contrary to their religious or moral beliefs. Similarly, the Public Health Services Act, 42 U.S.C. § 238n, states that healthcare entities may not be discriminated against by the federal government or governments receiving federal funds for refusing to perform, train, or refer for abortions.

The States also reacted quickly to *Roe v. Wade*. Demonstrating the virtually universal recognition of healthcare professionals' conscience rights, by the end of 1974 approximately half the States had enacted laws along the lines of the Church Amendment, and by the end of 1978 nearly all States had done so.⁸ Today, forty-seven States recognize by statute that healthcare professionals—individuals, institutions, or both—should not be compelled to

Doe v. Bolton, 410 U.S. 179, 197 (1973), handed down the same day as *Roe v. Wade*, *Roe* author Justice Blackmun observed that Georgia's conscience clause constituted "appropriate protection to the individual and to the denominational hospital."

8. Jody Feder, CONG. RESEARCH SERV., RS21428, *The History and Effect of Abortion Conscience Clause Laws* 2 (2006).

violate their sincerely held beliefs through legally required assistance with abortions.⁹

Some of these statutes, representing the first wave of modern era conscience-protection laws, also protected against mandatory participation in sterilization procedures. Currently, eighteen States allow healthcare providers to refuse to participate in sterilization procedures. Georgia passed the first such statute in 1970, GA. CODE § 31-20-6, and most recently, Missouri recognized this right in 2012, MO. REV. STAT. § 191.724(4).¹⁰

Beginning in the 1980s, concern about physician involvement in state executions led to another wave of statutes that protected the conscience rights of physicians.¹¹ Many States that allow the death penalty do not require physician involvement at all, and some statutes were passed specifically to ensure that healthcare professionals are not forced by law to participate in capital punishment when doing so would violate their conscience. *E.g.*, ALA. CODE § 15-18-82.1(i) (“Nothing contained in this section is intended to require any physician, nurse,

9. *See* Appendix.

10. *Id.*

11. For instance, the American Medical Association issued an ethics opinion in 1980 stating that “[a] physician, as a member of a profession dedicated to preserving life when there is hope of doing so, should not be a participant in a legally authorized execution.” AMA CODE OF MEDICAL ETHICS, Opinion 2.06 (“Capital Punishment”) (originally issued in July 1980).

pharmacist, or employee of the Department of Corrections or any other person to assist in any aspect of an execution which is contrary to the person's moral or ethical beliefs.”). At the present time, at least five of the remaining death-penalty States expressly protect healthcare professionals' right to not participate in capital punishment, *see* Appendix, as does the federal government, *see* 18 U.S.C. § 3597(b) (stating that employees of state departments of corrections, the U.S. Department of Justice, the Federal Bureau of Prisons, or the U.S. Marshals Service and employees of their contractors are not required to attend or participate in executions contrary to their moral or religious convictions).

Additionally, in 1994, the first law in American history permitting assisted suicide was passed in Oregon. OR. REV. STAT. § 127.805. That law, and every one of the other three state statutes subsequently legalizing assisted suicide (those of California, Vermont, and Washington), contains explicit recognition and legal protection of conscience rights for healthcare providers who object to participating in assisted suicide. *Id.* § 127.885; CAL. HEALTH & SAFETY CODE §§ 443.14(b), (e); VT. STAT. ANN. tit. 18, §§ 5285, 5286; WASH. REV. CODE. § 70.245190(1)(b).¹² The State of Vermont, for

12. Washington's recognition of conscience protection for those who oppose assisted suicide underscores that the pharmacy rules challenged here are an outlier even within Washington. *See* WASH. REV. CODE § 70.245190(1)(b) (prohibiting penalty to

example, protects both individual healthcare professionals' and healthcare facilities' rights to refuse to participate in assisted suicide. VT. STAT. ANN. tit. 18, §§ 5285, 5286.

As additional conscience-rights issues have arisen over time, States have responded by enacting corresponding conscience-rights protections. Many current conscience-protection statutes focus on contraceptive and embryonic issues. For example, in the fifteen states with laws requiring insurance coverage for infertility treatments, such as *in vitro* fertilization, self-insured employers are exempt pursuant to the Employee Retirement Income Security Act, and six States also have express religious exemptions.¹³ Similarly, while participation in stem cell research is typically not required by law, some States have passed statutes to ensure that healthcare professionals' conscience rights are protected in that area as well.¹⁴

In sum, virtually all fifty States have enacted conscience protections for healthcare professionals. And the pharmacy rules of the type at issue in this case are no exception. Indeed, the only State with conscience restrictive regulations comparable to Washington's is Illinois, which had its regulations

a professional association or health care provider for refusing to participate in assisted suicide).

13. *See* Appendix.

14. *Id.*

struck down.¹⁵ Thus, by making conscience-based referrals for emergency contraception illegal, Washington radically departs from the nationwide consensus protecting conscience rights.

III. LEFT UNDISTURBED, THE NINTH CIRCUIT'S DECISION PROVIDES A BLUEPRINT FOR NEGATING HEALTHCARE PROFESSIONALS' CONSCIENCE RIGHTS.

Although Washington's approach to conscience rights is an outlier, left undisturbed the Ninth Circuit's decision ratifying that approach could provide a blueprint for negating the conscience rights of healthcare providers in other States. If the government is allowed to exert that power, healthcare professionals could be denied employment, dismissed, or penalized because of their religious objections to any number of procedures that they believe to be harmful.

Such government interference and intolerance runs afoul of the Constitution and is likewise irreconcilable with our Nation's tradition of recognizing and honoring the rights of individuals to maintain and act according to their own sincerely held beliefs. Healthcare professionals are not defined by their profession. As noted by the American Medical Association: "They are moral agents in their own right and, like their patients, are informed by and committed to diverse cultural,

15. *Morr-Fitz, Inc. v. Quinn*, 976 N.E.2d 1160 (Ill. App. Ct. Sept. 20, 2012).

religious, and philosophical traditions and beliefs.” AMA CODE OF MEDICAL ETHICS, Opinion 10.06 (“Physician Exercise of Conscience”). Those beliefs are entitled to recognition and accommodation in our diverse society.

And while most would agree that a healthcare professional’s right to exercise her conscience is not unlimited, when accommodation is readily available without impacting patient care it should be allowed. Here, there is no dispute that a reasonable accommodation exists for pharmacists in Washington facing the choice between dispensing drugs to which they are morally opposed and violating their personal beliefs. The parties have stipulated to the existence of a robust referral system that ensures protecting pharmacists’ conscience rights has no impact on patient care. As such, the accommodation of sincerely held religious beliefs should prevail.

Freedom of conscience and religion are basic human rights. “The rights of freedom of thought, conscience, religion and belief are fundamental. The ability to exercise conscientious objection is a keystone of democracy. All of us should have the right to hold a belief and not be compelled by the State to act contrary to that conviction. It is the difference between the free society and the one subject to tyranny.”¹⁶

16. Statement of Cardinal George Pell, Archbishop of Sydney, (Oct. 9, 2008), https://www.sydneycatholic.org/news/media_releases/2008/2008109_1149.shtml (last visited Feb. 2, 2016).

The Ninth Circuit's decision authorizes an unprecedented and dangerous intrusion on the most basic right of conscience. If left intact, that decision will invite other States to adopt similar regulations, upsetting a longstanding, nationwide consensus on core First Amendment rights. The Court should grant review and reverse.

CONCLUSION

The petition for a writ of certiorari should be granted.

Respectfully submitted.

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APPENDIX

Survey of State and Federal Conscience Protection Laws

This Appendix is intended to provide a survey of state and federal conscience provisions related to abortion, contraception, fertility treatments, sterilization, military service, capital punishment, assisted suicide, euthanasia, and others.

Note: The summaries do not include all relevant conscience protections, definitions, conditions, or requirements. For instance, many statutes exempting conscience objectors also provide that conscience objectors may not be subjected to discrimination or liability because of their conscience objection.

Citation	Conscience Objection	Protected Objector
FEDERAL		
Public Health Service Act, Church Amendment, 42 U.S.C. § 300a-7	Abortion, Sterilization	Individuals or entities receiving federal health grants, contracts, loans, or loan guarantees are not required to participate in abortion or sterilization procedures due to religious or moral beliefs.
Legal Services Corporation Act, 42 U.S.C. § 2996f(b)(8)	Abortion	Legal services funds may not be used to compel individuals or institutions to assist in performing abortions contrary to their religious or moral beliefs.
Consolidated and Further Continuing Appropriations Act 2015, Title III of Division J, Pub. L. No. 113-235, 128 Stat. 2130 ¹	Family Planning	Foreign aid grant applicants under Section 104 of the Foreign Assistance Act of 1961 may not be discriminated against for offering only natural family planning due to their religious or conscientious beliefs.

1. Approved each year since 1986.

<p>Civil Rights Restoration Act, Danforth Amendment, 20 U.S.C. § 1688</p>	<p>Abortion</p>	<p>Title IX of the Education Amendments of 1972 may not be construed to require or prohibit any person, public entity, or private entity to provide or pay for abortion services.</p>
<p>Public Health Service Act, Coats-Snowe Amendment, 42 U.S.C. § 238n</p>	<p>Abortion</p>	<p>Health care entities may not be discriminated against by the federal government or governments receiving federal funds for refusing to perform, train, or refer for abortions.</p>
<p>Consolidated and Further Continuing Appropriations Act 2015, Section 726 of Title VII of Division E, Pub. L. No. 113-235, 128 Stat. 2130²</p>	<p>Contraception</p>	<p>Carriers for federal employees health care plans are not required to provide contraceptive coverage on the basis of the carriers' religious beliefs. All plans may not subject individuals to discrimination for refusing to prescribe or provide contraceptives due to religious or moral beliefs.</p>

² Approved each year since 1999.

Citation	Conscience Objection	Protected Objector
Consolidated and Further Continuing Appropriations Act 2015, Section 808 of Title VIII of Division E, Pub. L. No. 113-235, 128 Stat. 2130 ³	Contraception	Congress expressed intent that all health insurance plans in the District of Columbia include a “conscience clause” that provides exceptions for religious and moral beliefs.
Affordable Care Act, 42 U.S.C. § 18023(b)(4), (c)(2)(A)	Abortion	Health plans offered through an Exchange may not discriminate against any individual health care provider or health care facility because of its unwillingness to provide, pay for, provide coverage of, or refer for abortions.

³ Approved each year since 2000.

<p>Hyde/Weldon Amendment, Consolidated and Further Continuing Appropriations Act 2015, Section 507 of Title V of Division G, Pub. L. No. 113-235, 128 Stat. 2130⁴</p>	<p>Abortion</p>	<p>Health care entities, including individual health care professionals, facilities, organizations, and plans may not be discriminated against by governments or agencies receiving federal funds for not providing, paying for, or referring for abortions.</p>
<p>Federal Death Penalty Act of 1994, 18 U.S.C. § 3597(b)</p>	<p>Capital Punishment</p>	<p>Employees of state departments of corrections, the U.S. Department of Justice, the Federal Bureau of Prisons, or the U.S. Marshals Service and employees of their contractors are not required to attend or participate in executions contrary to their moral or religious convictions.</p>

⁴ Approved each year since 2004.

Citation	Conscience Objection	Protected Objector
Affordable Care Act, Prohibition Against Discrimination on Assisted Suicide, 42 U.S.C. § 18113(a)	Assisted Suicide ⁵	Recipients of federal funds under the Affordable Care Act may not discriminate against individuals and institutional health care entities for refusing to assist in causing the death of any individual.
Medicare + Choice Program, 42 U.S.C. § 1395w-22(j)(3)(B)	Medical Counseling or Referral	Organizations offering Medicare + Choice plans are not required by this section to provide coverage or reimbursements for counseling or referrals due to moral or religious objections.
Medical Assistance Programs, 42 U.S.C. § 1396u-2(b)(3)(B)	Medical Counseling or Referral	Medicaid managed care organizations are not required by this section to provide coverage or reimbursements for counseling or referrals due to moral or religious objections.

⁵ Four states have statutes permitting assisted suicide: California, Oregon, Vermont, and Washington. All of those statutes include a conscience exemption protecting health care providers who do not wish to participate. Montana, through *Baxter v. Montana*, 224 P.3d 1211 (Mont. 2009), allows consent as a defense to homicide in cases of assisted suicide.

<p>Medical Assistance Programs, 42 C.F.R. § 438.102(a)(iv)(2)</p>	<p>Medical Counseling or Referral</p>	<p>A managed care organization, prepaid inpatient health plan, or prepaid ambulatory health plan that would be required to provide, reimburse for, or provide coverage for a counseling or referral service is not required to do so due to a religious or moral objection.</p>
<p>United States Leadership Against HIV/AIDS, Tuberculosis, and Malaria Act of 2003, 22 U.S.C. § 7631(d)</p>	<p>Foreign Aid Programs or Activities Generally</p>	<p>Organizations eligible to receive foreign aid assistance to prevent and treat HIV/AIDS are not required to endorse, utilize, refer, or participate in programs or activities to which they have religious or moral objections.</p>
<p>Federal Employees Health Benefits Acquisition Regulation, 48 C.F.R. § 1609.7001(c)(7)</p>	<p>Discussing Treatment Options</p>	<p>Providers, health care workers, or health plan sponsoring organizations providing care under federal employees health benefits program are not required to discuss treatment options inconsistent with their ethical, moral, or religious beliefs.</p>

Citation	Conscience Objection	Protected Objector
<p>Sec. 533 of the National Defense Authorization Act for Fiscal Year 2013, Pub. L. No. 112-239, 126 Stat. 1727, as amended by Sec. 532 of the National Defense Authorization Act for Fiscal Year 2014, Pub. L. No. 113-66, 127 Stat. 672</p>	<p>General Military Rights of Conscience</p>	<p>The Armed Forces shall accommodate the conscience, moral principles, or religious beliefs of a member of the armed forces in so far as practicable, and may not use such expression of belief as the basis of any adverse personnel action.⁶ No member of the Armed Forces may require a chaplain to perform any rite, ritual, or ceremony that is contrary to the conscience, moral principles, or religious beliefs of the chaplain.</p>

⁶ Unless it could have an adverse impact on military readiness, unit cohesion, and good order and discipline.

General Military Law, Religious Apparel, 10 U.S.C. § 774	Military Uniform	A member of the armed forces may wear an item of religious apparel while wearing the uniform unless wearing the item would interfere with the member's duties.
Department of Defense Directive No. 6000.14 (Sept. 26, 2011) ⁷	General Health Care in Military	A provider who disagrees with a patient's wishes as a matter of conscience shall arrange for transfer of care to another qualified provider willing to proceed according to the patient's wishes.
Military Selective Service Act, 50 U.S.C. § 3806(j), formerly 50 U.S.C. App. § 456(j)	Military Conscientious Objection	This title does not require any person to be subject to combatant training and service in the armed forces of the United States who, by reason of religious training and belief, ⁸ is conscientiously opposed to participation in war in any form.

⁷ Available at <http://www.dtic.mil/whs/directives/corres/pdf/600014p.pdf>.

⁸ *Welsh v. United States*, 398 U.S. 333, 344 (1970) (“[The] section exempts from military service all those whose consciences, spurred by deeply held moral, ethical, or religious beliefs, would give them no rest or peace if they allowed themselves to become a part of an instrument of war.”).

Citation	Conscience Objection	Protected Objector
Department of Defense Instruction 1300.06 (May 5, 2007) ⁹	Military Conscientious Objection	An application for classification as a Conscientious Objector may be approved for any individual who is conscientiously opposed to participation in war in any form, whose opposition is based on religious training and/or belief, and whose position is firm, fixed, sincere and deeply held.
Air Force Instruction 36-3204 (July 15, 1994), Procedures for Applying as a Conscientious Objector ¹⁰	Military Conscientious Objection	This instruction describes Air Force procedures for establishing conscientious objector status and applies to all members of the Air Force and its Reserve components .

9 Available at <http://www.dtic.mil/whs/directives/corres/pdf/130006p.pdf>.

10 Available at http://static.e-publishing.af.mil/production/1/af_a1/publication/afi36-3204/afi36-3204.pdf.

<p>Army Regulation 600-43 (Aug. 21, 2006), Conscientious Objection¹¹</p>	<p>Military Conscientious Objection</p>	<p>This regulation establishes uniform standards for processing conscientious objector applications for the Army.</p>
<p>Commandant Instruction 1900.8 (Nov. 30, 1990), Conscientious Objectors and the Requirement to Bear Arms¹²</p>	<p>Military Conscientious Objection</p>	<p>This Instruction governs conscientious objectors and processing requests for discharge based on conscientious objection. It is applicable to all officers and enlisted personnel of the Coast Guard and Coast Guard Reserve.</p>
<p>Marine Corps Order 1306.16F (June 11, 2013), Conscientious Objectors¹³</p>	<p>Military Conscientious Objection</p>	<p>This order provides current policy and procedures concerning conscientious objection applicable to all Marines.</p>

11 Available at http://www.apd.army.mil/pdf/r600_43.pdf.

12 Available at http://www.uscg.mil/directives/ci/1000-1999/CI_1900_8.pdf.

13 Available at <http://www.marines.mil/Portals/59/Publications/MCO%201306.16F.pdf>.

Citation	Conscience Objection	Protected Objector
Milpersman 1900-020 (Aug. 22, 2002), Convenience of the Government Separation Based on Conscientious Objection (Enlisted and Officers) ¹⁴	Military Conscientious Objection	Navy members may be separated on the basis of Conscientious Objection when their religious training and belief have a firm, fixed, and sincere objection of their participation in war in any form, or the bearing of arms.
ALABAMA		
ALA. CODE § 15-18-82.1(i) (LexisNexis)	Capital Punishment	This section does not require any physician, nurse, pharmacist, or employee of the Department of Corrections or any other person to assist in any aspect of an execution which is contrary to the person's moral or ethical beliefs.

14 Available at <http://www.public.navy.mil/bupers-npc/reference/milpersman/1000/1900Separation/Documents/1900-020.pdf>.

ALASKA		
ALASKA STAT. § 18.16.010(b)	Abortion	No hospital ¹⁵ or person may be required to participate in abortion.
ALASKA STAT. § 13.52.060(e)	General Conscience Protection	A health care provider, health care institution, or health care facility may decline to comply with an instruction or health care decision except for a “do not resuscitate” order due to reasons of conscience.
ARIZONA		
ARIZ. REV. STAT. § 36-3205(C)(1) (LexisNexis)	General Conscience Protection	Health care providers are not liable for refusing to comply with a direction that violates the provider’s conscience.

¹⁵ Limited by *Valley Hospital Association v. Mat-Su Coalition for Choice*, 948 P.2d 963 (Alaska 1997) (holding that the statute cannot apply to quasi-public institutions).

Citation	Conscience Objection	Protected Objector
ARIZ. REV. STAT. § 36-2154 (LexisNexis)	Abortion, Abortifacient, Emergency Contraception	Hospitals are not required to admit patients for abortions. Physicians and other employees of medical facilities are not required to participate in abortions on moral or religious grounds. Pharmacies, hospitals, health professionals, and any of their employees are not required to participate in the provision of abortions, abortion medication, emergency contraception, or any medication or device intended to inhibit implantation of a fertilized ovum due to moral or religious beliefs.
ARIZ. REV. STAT. §§ 20-826(Z), -1057.08(B), -1402(M), -1404(V), -2329(B), (C) (LexisNexis)	Abortion, Abortifacient, Contraception, Sterilization	A religiously-affiliated employer may offer a health plan that does not cover contraceptives used for contraceptive, abortifacient, abortion, or sterilization purposes based on the religious beliefs of the employer or beneficiary.

ARKANSAS		
ARK. CODE ANN. § 20-13-1403(b)(1)	Emergency Contraception	A health care professional employed by a health care facility does not have to provide information about emergency contraception to sexual assault survivors due to religious or moral beliefs.
ARK. CODE ANN. § 20-16-304(4)-(5)	Contraception	Private institutions, physicians, and their employees , as well as employees of public institutions , shall not be prohibited from refusing to provide contraceptive procedures, supplies, and information due to religious or conscientious objections.
ARK. CODE ANN. § 20-16-601	Abortion	No person shall be required to participate in abortions, and no hospital, hospital director, or governing board shall be required to permit abortions within the institution.

Citation	Conscience Objection	Protected Objector
ARK. CODE ANN. §§ 23-79-1102(3), -1103(b), -1104(b)(3)	Abortion, Abortifacient, Emergency Contraception	The subchapter does not require insurance companies to provide coverage for any abortion, abortifacient, or emergency contraception. The subchapter does not require religious employers to cover contraceptives in their health benefit policies.
CALIFORNIA		
CAL. PROB. CODE §§ 4734, 4736 (Deering)	General Health Care	A health care provider may decline to comply with an individual health care instruction or decision for reasons of conscience. A health care institution may decline to comply with an individual health care instruction or decision if contrary to its conscience-based policy and timely communicated to the patient.

CAL. BUS. & PROF. CODE § 733(b)(3) (Deering)	General Prescription Drug or Device, Contraception	A health care licentiate may decline to dispense a prescription drug or device on ethical, moral, or religious grounds. The licentiate's employer can, without creating undue hardship, provide a reasonable accommodation of the licentiate's objection.
CAL. HEALTH & SAFETY CODE §§ 443.14(b), (e), 443.15 (Deering)	Assisted Suicide	Health care providers are not required to take any action in support of assisted suicide due to reasons of conscience, morality, or ethics. Health care providers may prohibit employees and independent contractors from participating in assisted suicide.
CAL. PENAL CODE § 3605(c) (Deering)	Capital Punishment	No physician or any other person , whether or not employed by the Department of Corrections, shall be compelled to attend an execution, and any physician's attendance shall be voluntary.

Citation	Conscience Objection	Protected Objector
CAL. HEALTH & SAFETY CODE § 123420 (Deering)	Abortion	No employee or person with staff privileges in a health facility shall be required to directly participate in an abortion due to moral, ethical, or religious beliefs. Nonprofit hospitals organized or operated by a religious corporation are not required to perform abortions.
CAL. HEALTH & SAFETY CODE § 1374.55(e)-(f) (Deering); CAL. INS. CODE § 10119.6(d)-(e) (Deering)	Infertility Treatment ¹⁶	This section does not require any religious employer or religious organization's plan to cover infertility treatments in a manner inconsistent with the religious organization's religious and ethical principles.

16 Of the fifteen states with laws requiring insurance coverage for infertility treatments, such as *in vitro* fertilization, six states have enacted express religious exemptions. Additionally, employers that self-insure are exempt from state regulation under The Employment Retirement Income and Security Act of 1974.

<p>CAL. HEALTH & SAFETY CODE § 1367.25(c) (Deering); CAL. INS. CODE § 10123.196(e) (Deering)</p>	<p>Contraception</p>	<p>A religious employer may request a health care service plan or disability insurance policy that does not cover contraceptives, if contrary to the employer's religious tenets.</p>
<p>COLORADO</p>		
<p>COLO. REV. STAT. §§ 25-6-102(9), -207</p>	<p>Contraception, Family Planning</p>	<p>No private institution or physician, nor any of their employees, shall be prohibited from refusing to provide contraceptives and information due to religious or conscientious objection. Any city or county employee may refuse to offer family planning and birth control services due to personal religious beliefs.</p>
<p>COLO. REV. STAT. § 25-3-110(3)(a)</p>	<p>Emergency Contraception</p>	<p>A health care professional employed by a health care facility does not have to provide information about emergency contraception to sexual assault survivors due to religious or moral beliefs.</p>

Citation	Conscience Objection	Protected Objector
CONNECTICUT		
CONN. AGENCIES REGS. § 19-13-D54	Abortion	No person shall be required to participate in any phase of an abortion that violates his or her judgment, philosophical, moral or religious beliefs.
CONN. GEN. STAT. §§ 38a-536(c), 38a-509(c)	Infertility Treatment	A religious employer may be issued a group health insurance policy that excludes coverage for methods of diagnosis and treatment of infertility that are contrary to the employer's religious tenets.
CONN. GEN. STAT. §§ 38a-503e(b), (e), (f), 38a-530e(b), (e), (f)	Contraception	A religious employer may be issued a health insurance policy that excludes coverage for contraceptives that are contrary to the employer's religious tenets.
DELAWARE		
DEL. CODE ANN. tit. 24, § 1791(a)-(b)	Abortion	No person shall be required to participate in an abortion. No hospital, hospital director, or governing board shall be required to permit abortions within its institution.

DEL. CODE ANN. tit. 18, § 3559(d)	Contraception	A religious employer may exclude contraceptive coverage under its health policy, plan, or contract due to the organization's religious beliefs and practices.
DISTRICT OF COLUMBIA		
45 D.C. Reg. 7353	General Health Care	Department Heads shall not discipline or in any way penalize an employee for refusing to participate in certain aspects of direct patient care that conflict with religious or ethical beliefs.
FLORIDA		
FLA. STAT. § 765.1105 (LexisNexis)	General Health Care	A health care provider or facility that is unwilling to carry out the wishes of the patient because of moral or ethical beliefs must transfer the patient to another health care provider or facility.
FLA. STAT. § 922.105(9) (LexisNexis)	Capital Punishment	This chapter does not require any physician, nurse, pharmacist, or employee of the Department of Corrections or any other person to assist in any aspect of an execution which is contrary to the person's moral or ethical beliefs.

Citation	Conscience Objection	Protected Objector
FLA. STAT. § 381.0051(5) (LexisNexis)	Contraception, Family Planning	The section does not prevent a physician or other person from refusing to furnish any contraceptive or family planning service, supplies, or information for medical or religious reasons.
FLA. STAT. § 390.0111(8) (LexisNexis)	Abortion	The section does not require any hospital or any person to participate in an abortion.
FLA. STAT. § 409.973 (LexisNexis)	Family Planning	Managed care plans may elect to not provide family planning services due to an objection on moral or religious grounds.
GEORGIA		
GA. COMP. R. & REGS. 480-5-.03(n)	General Pharmacy	It shall not be considered unprofessional conduct for any pharmacist to refuse to fill any prescription based on his/her professional judgment or ethical or moral beliefs.

GA. CODE ANN. § 17-10-38(d) (LexisNexis)	Capital Punishment	No state agency, department, or official may, through regulation or otherwise, require or compel a physician to participate in the execution of a death sentence.
GA. CODE ANN. § 16-12-142 (LexisNexis)	Abortion	The article does not require a hospital, other medical facility, or physician to admit patients for abortions. Any person with a moral or religious objection to abortion is not required to participate in abortion procedures.
GA. CODE ANN. § 49-7-6 (LexisNexis)	Family Planning	Any employee of state agencies may refuse to offer family planning services if contrary to the employee's religious beliefs.
GA. CODE ANN. § 31-20-6 (LexisNexis)	Sterilization	The chapter does not require a hospital to admit patients for sterilization procedures. A physician, staff member, or employee of a hospital who objects on moral or religious grounds is not required to participate in procedures leading to sterilization.

Citation	Conscience Objection	Protected Objector
HAWAII		
HAW. REV. STAT. ANN. § 327E-7(e) (LexisNexis)	General Health Care	A health-care provider may decline to comply with an individual instruction or health-care decision for reasons of conscience. A health-care institution may decline to comply with an individual instruction or health-care decision if contrary to its conscience-based policy.
HAW. REV. STAT. ANN. § 453-16(e) (LexisNexis)	Abortion	The section does not require any hospital or any person to participate in an abortion.
HAW. REV. STAT. ANN. § 431:10A-116.7 (LexisNexis)	Contraception	Any religious employer may request an accident and health or sickness insurance plan without coverage for contraceptive services and supplies that are contrary to the employer's religious tenets.

IDAHO		
IDAHO CODE § 18-611	General Health Care	No health care professional shall be required to provide any health care service that violates his or her conscience.
IDAHO CODE § 18-612	Abortion	The act does not require any hospital to furnish facilities or admit patients for abortion. Any physician, nurse, technician, or other employee shall not be required to participate in an abortion for personal, moral, or religious reasons.
IDAHO CODE § 39-3915	Sterilization	No hospital is required to furnish facilities or admit patients for sterilization. Any physician, nurse, technician, or other employee shall not be required to participate in a sterilization for moral or religious reasons.

Citation	Conscience Objection	Protected Objector
745 ILL. COMP. STAT. ANN. §§ 70/1-70/14 (LexisNexis) ¹⁷	General Health Care	<p style="text-align: center;">ILLINOIS</p> <p>No physician or health care personnel shall be liable by reason of his or her refusal to participate in any way in any health care service¹⁸ which is contrary to the conscience of such physician or health care personnel. No health care facility shall be liable for refusing to permit or provide any form of health care service which violates its documented conscience policy. No health care payer shall be liable for refusing to pay for any form of health care service which violates its documented conscience policy.</p>

¹⁷ Health care personnel maintain their duty to provide emergency medical care. 745 ILL. COMP. STAT. ANN. 70/6. “Emergency contraception” is not emergency medical care. *Morr-Fitz, Inc. v. Quinn*, 976 N.E.2d 1160 (Ill. App. Ct. 2012); see also *Vandersand v. Wal-Mart Stores, Inc.*, 525 F. Supp. 2d 1052 (C.D. Ill. 2007).

¹⁸ “Health care” is defined as any phase of patient care, including but not limited to family planning, contraceptives, sterilization, and abortion procedures or services.

215 ILL. COMP. STAT. ANN. § 5/356m(b)(2)	Infertility Treatment	Infertility treatment procedures are not required to be contained in any policy or plan issued to or by a religious organization or to or by an entity sponsored by a religious organization that finds the procedures violate its religious and moral teachings and beliefs.
720 ILL. COMP. STAT. § 510/13 (LexisNexis); 745 ILL. COMP. STAT. § 30/1 (LexisNexis)	Abortion	No physician, hospital, ambulatory surgical center, nor employee thereof, shall be required against conscience to permit or participate in any abortion.
INDIANA		
IND. CODE ANN. §§ 16-34-1-3 to -7 (LexisNexis)	Abortion	No private hospital shall be required to permit its facilities to be utilized for abortions. No physician, employee, or staff member of a hospital or other facility shall be required to participate in abortion procedures, if the individual objects on ethical, moral, or religious grounds.

Citation	Conscience Objection	Protected Objector
IOWA		
IOWA CODE §§ 146.1-1.2	Abortion	Individuals shall not be required against their religious beliefs or moral convictions to participate in abortion procedures. A non-public hospital shall not be required to permit the performance of an abortion.
KANSAS		
KAN. STAT. ANN. § 65-1637 ¹⁹	General Pharmacy	The section does not preventing a pharmacist from refusing to fill or refill any prescription in the pharmacist's professional judgment and discretion.

19 Although the text broadly encompasses professional judgment and discretion, it is not specific to religion or conscience. A pro-choice advocacy group lists the statute as potentially relevant to its issues. See Kansas Refusal to Provide Medical Services, NARAL, available at <http://www.prochoiceamerica.org/government-and-you/state-governments/state-profiles/kansas.html?templateName=template-161602701&issueID=14&ssumID=2593>.

KAN. STAT. ANN. §§ 65-443, -6737	Abortion, Abortifacient	No person shall be required to refer for or participate in medical procedures or in the administration of devices or drugs which the person reasonably believes may result in the termination of a pregnancy.
KAN. STAT. ANN. §§ 65-444, -6737	Abortion, Abortifacient	No medical care facility shall be required to permit, refer for, or participate in medical procedures or in the administration of devices or drugs which the administrator or board reasonably believe may result in the termination of a pregnancy.
KAN. STAT. ANN. §§ 65-446, -447	Sterilization	No person shall be required to perform, refer for or participate in sterilization procedures. No medical care facility shall be required to permit the performance, referral for or participation in sterilization procedures within its facility.

Citation	Conscience Objection	Protected Objector
KENTUCKY		
KY. REV. STAT. ANN. § 311.800(3)-(5) (LexisNexis)	Abortion	No private hospital or private health care facility shall be required to permit the performance of abortion contrary to its stated ethical policy. No physician, nurse, staff member, or employee with a moral, religious, or professional objection shall be required to participate in abortion.
KY. REV. STAT. ANN. § 311.800(5)(c) (LexisNexis)	Abortion, Sterilization	Any public agency, private agency, institution, or person may not discriminate against an individual on account of a refusal to participate in abortion or sterilization on moral, religious or professional grounds. ²⁰

²⁰ Provided the health care facility is not operated exclusively for the purposes of performing abortions or sterilizations.

LOUISIANA		
<p>LA. STAT. ANN. § 40:1299.31 (LexisNexis)</p>	<p>Abortion</p>	<p>No person or corporation shall be held liable or discriminated against because of a refusal to recommend, counsel, perform, assist with, or accommodate an abortion. No worker or employee in any social service agency shall be held liable, discriminated against, or pressured in any way for refusal to take part in, recommend, or counsel an abortion.</p>
<p>LA. STAT. ANN. §§ 40:1299.32, .33(C) (LexisNexis)</p>	<p>Abortion</p>	<p>No facility or institution of any kind shall be held liable or discriminated against because of any refusal to permit or accommodate the performance of any abortion.</p>
<p>LA. STAT. ANN. §§ 15:569(c), 570(c) (LexisNexis)</p>	<p>Capital Punishment</p>	<p>No health care professional shall be compelled to administer a lethal injection. Any person requested to attend an execution shall not be required to attend.</p>

Citation	Conscience Objection	Protected Objecter
L.A. STAT. ANN. §§ 40:1299.35.9, 40:1300:301	Abortion, Abortifacient, Stem Cell Research, Cloning, Euthanasia, Assisted Suicide	Any person has the right not to participate in, and no person shall be required to participate in any health care service ²¹ that violates his conscience to the extent that patient access to health care is not compromised.
MAINE		
M.F. REV. STAT. tit. 18-A, § 5-807(E) (LexisNexis)	General Health Care	A health-care provider may decline to comply with an individual instruction or health-care decision for reasons of conscience. A health-care institution may decline to comply with an individual instruction or health-care decision if contrary to its conscience-based policy.

21 The term “health care service” is limited to abortion, dispensation of abortifacient drugs, human embryonic stem cell research, human embryo cloning, euthanasia, or physician-assisted suicide.

ME. REV. STAT. tit. 32, § 13795 (LexisNexis) ²²	General Pharmacy	A pharmacist may refuse to fill any prescription if unsatisfied about the legitimacy or appropriateness of the prescription.
ME. REV. STAT. tit. 22, §§ 1591-1592 (LexisNexis)	Abortion	No person who refuses to perform or assist in an abortion, and no hospital or health care facility that refuses to permit an abortion on its premises, shall be liable or discriminated against for the refusal.
ME. REV. STAT. tit. 22, § 1903(4) (LexisNexis)	Family Planning	No private institution or physician , or their employees , shall be prohibited from refusing to provide family planning services when such refusal is based upon religious or conscientious objection.

²² The text is not specific to religion or conscience. A pro-choice advocacy group lists the statute as potentially relevant to its issues. See Maine Refusal to Provide Medical Services, NARAL, available at <http://www.prochoiceamerica.org/government-and-you/state-governments/state-profiles/maineh.html?templateName=template-161602701&issueID=14&ssumID=2628>.

Citation	Conscience Objection	Protected Objector
ME. REV. STAT. tit. 24, § 2332-J(2) (LexisNexis); ME. REV. STAT. tit. 24-A, §§ 2756, 2847-G, 4247(2) (LexisNexis)	Contraception	A religious employer may request an exclusion under the policy or contract for coverage if the required contraceptive coverage conflicts with the employer's religious beliefs and practices.
ME. REV. STAT. tit. 34-B, § 7016 (LexisNexis)	Sterilization	The chapter does not require any hospital or any person to participate in any sterilization procedure.
MARYLAND		
MD. CODE ANN., HEALTH-GEN. § 20-214(a)-(b) (LexisNexis) ²³	Abortion, Artificial Insemination, Sterilization	A person may not be required to perform, participate in, or refer for artificial insemination, sterilization, or abortion. A hospital may not be required to permit within the hospital or refer for artificial insemination, sterilization, or abortion.

²³ Limited by *St. Agnes Hospital, Inc. v. Riddick*, 748 F. Supp. 319 (D. Md. 1990), and *County Executive of Prince George's County v. Doe*, 291 Md. 676 (Md. 1981).

MD. CODE ANN., INS. § 15-810 (LexisNexis)	<i>In Vitro</i> Fertilization	If <i>in vitro</i> fertilization coverage conflicts with the beliefs and practices of a religious organization , an entity subject to this section shall exclude the coverage in a policy or contract with the religious organization.
MD. CODE ANN., INS. § 15-826 (LexisNexis)	Contraception	A religious organization may request an exclusion from coverage under the policy, plan, or contract for contraceptive coverage if it conflicts with the organization's religious beliefs and practices.
MASSACHUSETTS		
MASS. ANN. LAWS ch. 112, § 12I (LexisNexis)	Abortion, Sterilization	A physician or other person associated with the medical staff of health facility who has a moral or religious objection shall not be required to participate in abortion or sterilization procedures

Citation	Conscience Objection	Protected Objector
MASS. ANN. LAWS ch. 272, § 21B (LexisNexis)	Abortion, Sterilization	No private hospital or health facility is required to permit abortion or sterilization procedures, or to furnish contraceptive devices or information or family planning services or referrals when contrary to religious or moral principles.
MASS. ANN. LAWS ch. 175, § 47W (LexisNexis); MASS. ANN. LAWS ch. 176A, § 8W (LexisNexis); MASS. ANN. LAWS ch. 176B, § 4W (LexisNexis); MASS. ANN. LAWS ch. 176G, § 40 (LexisNexis)	Contraception, Hormone Therapy	Insurance or contract coverage provisions regarding contraception and hormone therapy do not apply to church employers or church-controlled organizations .

MICHIGAN		
MICH. COMP. LAWS SERV. §§ 333.20181- .20184	Abortion	A health facility, physician, or other person may refuse to perform, participate in, or allow to be performed on its premises an abortion. Individuals who state an objection to abortion on professional, ethical, moral, or religious grounds are not required to participate in abortion procedures.
MINNESOTA		
MINN. STAT. §§ 145.414, .42	Abortion	No person and no hospital or institution ²⁴ shall be coerced, held liable or discriminated against because of a refusal to perform, accommodate, assist or submit to an abortion.
MINN. STAT. § 145.925(6)	Family Planning	Any agency employee may refuse to offer family planning services to the extent that the duty is contrary to personal beliefs.

24 Limited to non-public hospitals or institutions by *Hodgson v. Lawson*, 542 F.2d 1350 (8th Cir. 1976).

Citation	Conscience Objection	Protected Objector
MISSISSIPPI		
MISS. CODE ANN. § 41-41-215(5)	General Health Care	A health-care provider may decline to comply with an individual instruction or health-care decision for reasons of conscience. A health-care institution may decline to comply with an individual instruction or health-care decision if the instruction or decision is contrary to its conscience-based policy.
MISS. CODE ANN. §§ 41-107-1 to -13	General Health Care	Health-care providers and health-care institutions have the right not to participate and shall not be required to participate in a health-care service that violates their conscience. Health-care payers have the right to decline to pay and shall not be required to pay for a health-care service that violates their conscience.

MISSOURI		
Mo. REV. STAT. § 338.255 ²⁵	General Pharmacy	No pharmacy shall be required to carry or maintain in inventory any specific prescription or nonprescription drug or device.
Mo. REV. STAT. §§ 188.105-.120, 197.032	Abortion	No physician or surgeon, registered nurse, practical nurse, midwife, or public or private hospital shall be required to treat or admit for abortions if contrary to established policy, or moral, ethical, or religious beliefs.
Mo. REV. STAT. §§ 191.724, 376.805	Abortion, Contraception, Sterilization	No person shall be compelled to obtain coverage for, and no employer, health plan provider, health plan sponsor, health care provider, or any other person or entity shall be compelled to provide coverage for, abortion, contraception, or sterilization if contrary to the religious or moral beliefs.

25 Although the text broadly encompasses pharmacies' inventory choices, the text is not specific to religion or conscience.

Citation	Conscience Objection	Protected Objector
MONTANA		
MONT. CODE ANN. § 50-20-111	Abortion	All persons have the right to refuse to participate in abortion because of religious or moral beliefs. No private hospital or health care facility is required, contrary to religious or moral tenets to permit or admit any person for abortion.
MONT. CODE ANN. §§ 50-5-502 to -505	Sterilization	All persons have the right to refuse to participate in sterilization because of religious or moral beliefs. No private hospital or health care facility is required, contrary to religious or moral tenets to permit or admit any person for sterilization.
NEBRASKA		
NEB. REV. STAT. ANN. §§ 28-337 to -341 (LexisNexis)	Abortion	No person shall be required to perform or participate in any abortion. No hospital, clinic, institution, or other facility shall be required to admit for an abortion or to allow the performance of an abortion.

NEVADA		
NEV. REV. STAT. ANN. §§ 632.475, 449.191 (LexisNexis)	Abortion	Any person employed to furnish direct personal health services is not required to participate directly in an abortion due to a moral, ethical, or religious objection. A non-public hospital or other medical facility is not required to permit the use of its facilities for an abortion, except in a medical emergency.
NEV. REV. STAT. ANN. §§ 689A.0415(5), 689A.0417(5), 689B.0376(5), 689B.0377(5), 695B.1916(5), 695B.1918(5), 695C.1694(5), 695C.1695(5) (LexisNexis)	Contraception	An insurer or health maintenance organization affiliated with a religious organization is not required to provide contraceptive coverage due to religious objection.

Citation	Conscience Objection	Protected Objector
NEW JERSEY		
N.J. REV. STAT. §§ 2A:65A-1, to -4	Abortion, Sterilization	No person shall be required to perform or assist in the performance of an abortion or sterilization. No hospital or other health care facility ²⁶ shall be required to provide abortion or sterilization services or procedures.
N.J. REV. STAT. §§ 17B:27-46.1x(b), 17:48A-7w(b), 17:48-6x(b), 17:48E-35.22(b), 26:2J-4.23(b)	Fertility Treatment, <i>In Vitro</i> Fertilization	A religious employer may request an exclusion for coverage of <i>in vitro</i> fertilization, embryo transfer, artificial insemination, zygote intra fallopian transfer and intracytoplasmic sperm injection if it conflicts with the employer's religious beliefs and practices.

26 Limited by *Doe v. Bridgeton Hospital Association*, 366 A.2d 641 (N.J. 1976) (construing the statute as not applying to non-sectarian, non-profit hospitals).

<p>N.J. REV. STAT. §§ 17:48-6ee, 17:48A-7bb, 17:48E- 35.29, 17B:27-46.1ee, 17B:26-2.1y, 26:2J- 4.30, 17B:27A-19.15, 17:48F-13.2, 17B:27A-7.12</p>	<p>Contraception</p>	<p>A religious employer may request an exclusion for contraceptive coverage if it conflicts with the employer's religious beliefs and practices.</p>
<p>NEW MEXICO</p>		
<p>N.M. STAT. ANN. § 24-7A-7(E) (LexisNexis)</p>	<p>General Health Care</p>	<p>A health-care practitioner may decline to comply with an individual instruction or health-care decision for reasons of conscience. A health-care institution may decline to comply with an individual instruction or health-care decision if contrary to its conscience-based policy and timely communicated to the patient.</p>
<p>N.M. STAT. ANN. § 30-5-2 (LexisNexis)</p>	<p>Abortion</p>	<p>The article does not require a hospital to admit any patient for an abortion. A staff member or employee of a hospital who objects on moral or religious grounds is not required to participate in an abortion.</p>

Citation	Conscience Objection	Protected Objector
N.M. STAT. ANN. §§ 59A-22-42, 59A-46-44(C) (LexisNexis)	Contraception	A religious entity purchasing health insurance or health maintenance organization coverage may elect to exclude contraceptives.
N.M. STAT. ANN. § 24-8-6(A) (LexisNexis)	Sterilization	Any hospital or clinic that objects on moral or religious grounds is not required to admit any person for the purpose of being sterilized.
NEW YORK		
N.Y. CIV. RIGHTS LAW § 79-i (Consol.)	Abortion	Any person may refuse to perform or assist in an abortion when contrary to conscience or religious beliefs.
N.Y. COMP. CODES R. & REGS. tit. 10, § 405.9(10)	Abortion	No hospital shall be required to admit any patient for an abortion, nor shall any hospital be liable for its failure or refusal to participate in any abortion.

N.Y. COMP. CODES R. & REGS. tit. 18 § 463.6(d)	Family Planning	A staff member of a local social services department whose cultural values, conscience, or religious conviction prohibits participating in family planning services shall so report, and another staff member will be assigned.
N.Y. INS. LAW §§ 3221(l)(16)(A), 4303(cc)(1) (Consol.)	Contraception	A religious employer may request a contract without coverage for contraceptive methods that are contrary to the employer's religious tenets.
NORTH CAROLINA		
21 N.C. ADMIN. CODE 46.1801 ²⁷	General Pharmacy	A pharmacist or device and medical equipment dispenser shall have a right to refuse to fill or refill a prescription order if doing so would be contrary to his or her professional judgment.

²⁷ Although the text broadly encompasses pharmacists' professional judgment, it is not specific to religion or conscience. A pro-choice advocacy group lists the statute as potentially relevant to its issues. See North Carolina Refusal to Provide Medical Services, NARAL, available at <http://www.prochoiceamerica.org/government-and-you/state-governments/state-profiles/north-carolina.html?templateName=template-161602701&issueID=14&ssumID=2752>.

Citation	Conscience Objection	Protected Objector
N.C. GEN. STAT. § 14-45.1(e)-(f)	Abortion	No physician, nurse, or any other health care provider who states an objection to abortion on moral, ethical, or religious grounds is required to perform or participate in an abortion. The section does not require a hospital, other health care institution, or other health care provider to perform an abortion or to provide abortion services.
N.C. GEN. STAT. § 58-3-178(e)	Contraception	A religious employer may request an insurer providing a health benefit plan to exclude coverage for contraceptives that are contrary to the employer's religious tenets.
NORTH DAKOTA		
N.D. CENT. CODE § 23-16-14	Abortion	No hospital or person may be required to participate in the performance of an abortion, if such hospital or person objects to abortion.

OHIO		
OHIO REV. CODE ANN. § 4731.91 (LexisNexis)	Abortion	No public or private hospital is required to permit an abortion. No person is required to perform or participate in medical procedures which result in abortion.
OKLAHOMA		
OKLA. STAT. tit. 63, §§ 1-728c, to -728f	Abortion, Procedures Harmful to Embryos or Fetuses, Assisted Suicide, Euthanasia	No health care facility is required to admit any patient or to allow the use of facilities for certain purposes: abortion, procedures harmful to embryos or fetuses, assisted suicide, or euthanasia. A physician, nurse, pharmacist, or employee or staff member at a health care facility, who refuses in writing to participate on moral or religious grounds shall not be required to participate in those activities.

Citation	Conscience Objection	Protected Objecter
OKLA. STAT. tit. 63, § 1-741	Abortion	No private hospital is required to permit abortions to be performed or induced. No person may be required to participate in abortion procedures, except emergency aftercare necessary to protect the life of the patient.
OKLA. STAT. tit. 63, § 1-568	Abortion	The act does not require genetic counselors to discuss, recommend, or refer for abortion.
OREGON		
OR. REV. STAT. § 127.885	Assisted Suicide	No health care provider shall be under any duty to participate in assisted suicide. A health care provider may prohibit another health care provider from participating in assisted suicide.
OR. REV. STAT. § 127.625	Withdrawal of Life-Sustaining Procedures	No health care provider shall be under any duty to participate in the withdrawal or withholding of life-sustaining procedures.

OR. REV. STAT. § 435.475	Abortion	No private hospital is liable for refusing to participate in abortion if the hospital has adopted a policy not to admit patients for abortion.
OR. REV. STAT. § 435.485	Abortion	No physician is required to give advice about or participate in any abortion, and no hospital employee or staff member is required to participate in any abortion.
OR. REV. STAT. § 435.225	Contraception	Any Oregon Health Authority employee may refuse to offer family planning and birth control services due to personal or religious beliefs.
PENNSYLVANIA		
43 PA. STAT. § 955.2; 16 PA. CODE §§ 51.1- 51.61	Abortion, Sterilization	No hospital or other health care facility shall be required to permit the performance of abortion or sterilization contrary to its stated ethical policy. ²⁸ No physician, nurse, staff member, or employee with a moral, religious or professional objection shall be required to participate in abortion or sterilization.

²⁸ According to 16 PA. CODE § 51.31, public health facilities may not prohibit sterilization or abortions prior to the third trimester in their ethical policies. Nonpublic health facilities may prohibit sterilizations or abortions.

Citation	Conscience Objection	Protected Objector
18 PA. CONS. STAT. § 3213(d), (f)(1)	Abortion, Abortifacient	Except for a facility devoted exclusively to the performance of abortions, no medical personnel or medical facility , nor any employee, agent, or student thereof, shall be required against conscience to aid, abet, or facilitate performance of an abortion or dispensing of an abortifacient.
RHODE ISLAND		
R.I. GEN. LAWS § 23-17-11	Abortion, Sterilization	A physician, employee, or staff member at a health care facility, with a moral or religious objection, shall not be required to participate in abortion or sterilization procedures.
R.I. GEN. LAWS §§ 27-18-57, 27-19-48, 27-20-43, 27-41-59	Contraception	Any insurance company, hospital service corporation, medical service corporation, or health maintenance corporation may issue to a religious employer a health insurance contract, plan, or policy that excludes coverage for contraceptive methods which are contrary to the employer's religious tenets.

SOUTH CAROLINA		
S.C. CODE ANN. § 44-41-40	Abortion	No private hospital or clinic shall be required to admit a patient for an abortion, nor permit their facilities to be utilized for abortions.
S.C. CODE ANN. § 44-41-50	Abortion	No physician, nurse, technician, or other employee shall be required to recommend, perform or assist in the performance of an abortion.
SOUTH DAKOTA		
S.D. CODIFIED LAWS § 36-11-70	Abortion, Abortifacient, Assisted Suicide, Euthanasia	No pharmacist may be required to dispense medication if there is reason to believe that the medication would be used to cause an abortion, destroy an unborn child, or cause the death of any person by means of an assisted suicide, euthanasia, or mercy killing.
S.D. CODIFIED LAWS §§ 34-23A-11 to -13	Abortion	No counselor or social worker shall be liable for refusing to arrange or encourage abortion. No physician, nurse, or other person who refuses to perform or assist in an abortion shall be liable.

Citation	Conscience Objection	Protected Objector
S.D. CODIFIED LAWS § 34-23A-14	Abortion	No hospital is required to admit any patient for the purpose of terminating a pregnancy.
TENNESSEE		
TENN. CODE ANN. §§ 39-15-204 to -205	Abortion	No physician shall be required to perform an abortion and no person shall be required to participate in the performance of an abortion. No hospital shall be required to permit abortions to be performed therein.
TENN. CODE ANN. § 68-34-104(5)	Contraception	No private institution or physician , nor their employees , shall be prohibited from refusing to provide contraceptive procedures, supplies, and information when such refusal is based upon religious or conscientious objection.

TEXAS		
TEX. INS. CODE § 1271.007	General Health Care	Named chapters do not require a health maintenance organization, physician, or provider to pay for, provide, or participate in any health care service that violates religious convictions.
TEX. INS. CODE § 1366.006	<i>In Vitro</i> Fertilization	An insurer, health maintenance organization, or self-insuring employer affiliated with a religious denomination that includes as an integral part of its beliefs and practices that <i>in vitro</i> fertilization is contrary to moral principles is not required to offer coverage for <i>in vitro</i> fertilization.
TEX. INS. CODE § 1369.108	Contraception	This subchapter does not require a religious organization's health benefit plan or any health care provider providing services under the plan to pay for, provide, or participate in contraceptive services that violates its religious convictions, unless coverage is necessary to preserve the life or health of the enrollee.

Citation	Conscience Objection	Protected Objector
TEX. OCC. CODE §§ 103.001-.004	Abortion	A physician, nurse, staff member, or employee of a health care facility who objects may not be required to participate in abortion procedures. A private hospital or health care facility is not required to make its facilities available for the performance of an abortion unless life of the mother is immediately endangered.
UTAH		
UTAH CODE ANN. § 76-7-306 (LexisNexis)	Abortion	A health care provider may, on religious or moral grounds, refuse to perform or participate in any way, in an abortion or a procedure that is intended to, or likely to, result in the termination of a pregnancy.

VERMONT		
Vt. STAT. ANN. tit. 18, §§ 5285-5286	Assisted Suicide	A physician, nurse, pharmacist, or other person shall not be under any duty to participate in providing a lethal dose of medication. A health care facility may prohibit physicians from writing prescriptions for lethal medications to be used by residents on the premises.
VIRGINIA		
VA. CODE ANN. § 54.1- 2957.21	Genetic Counseling	The chapter does not require any genetic counselor to participate in counseling that conflicts with deeply-held moral or religious beliefs.
VA. CODE ANN. § 18.2-75	Abortion	The sections regarding lawful abortions do not require a hospital or other medical facility or physician to admit any patient for the purpose of performing an abortion. Any person who objects on personal, ethical, moral or religious grounds shall not be required to participate in abortion procedures.

Citation	Conscience Objection	Protected Objector
VA. CODE ANN. § 32.1-134	Family Planning	Any hospital operated by a religious institution objecting to distributing lists of family planning clinics on religious grounds is not required to distribute them.
WASHINGTON		
WASH. REV. CODE ANN. §§ 48.43.065(2), 70.47.160(2) (LexisNexis)	General Health Care	No individual health care provider, religiously sponsored health carrier, or health care facility may be required to participate in the provision of or payment for a specific service if they object to so doing for reason of conscience or religion.
WASH. ADMIN. CODE § 284-43-800(2)	General Health Care	A religiously sponsored carrier who elects, for reasons of religious belief, not to participate in the provision of certain services otherwise included in the model plan, shall file for such plan a description of the process by which enrollees will have timely access to all services in the model plan.

WASH. REV. CODE ANN. § 9.02.150	Abortion	No person or private medical facility who objects may be required to participate in the performance of an abortion.
WASH. REV. CODE ANN. § 70.245.190(1) (b), (2)	Assisted Suicide	A professional association or health care provider may not subject a person to any penalty for refusing to participate in assisted suicide. A health care provider may prohibit another health care provider from participating in assisted suicide on its premises.
WEST VIRGINIA		
W. VA. CODE ANN. § 16-30-12 (LexisNexis)	General Health Care	The article does not require a health care facility to change a published policy that is expressly based on religious or moral beliefs. The article does not require an individual health care provider to honor a health care decision if contrary to religious or moral beliefs.
W. VA. CODE ANN. § 16-2B-4 (LexisNexis)	Family Planning	Any state employee may refuse to offer family planning services to the extent that such duty is contrary to his personal religious beliefs.

Citation	Conscience Objection	Protected Objector
W. VA. CODE ANN. §§ 33-16E-2, to -7 (LexisNexis)	Contraception	A religious employer may exclude from any health-care insurance plan contract benefits for contraceptives that are contrary to the employer's religious tenets.
W. VA. CODE ANN. § 16-11-1 (LexisNexis)	Sterilization	No hospital shall be subject to any legal or other penalty because of any refusal to perform, accommodate or assist in any sterilization procedure. No person shall be required to perform or participate in sterilization procedures.
WISCONSIN		
WIS. STAT. §§ 253.09, 441.06(6), 448.03(5)(a)	Abortion, Sterilization	No hospital shall be required to admit any patient for or to allow sterilization procedures or removing a human embryo or fetus. A physician or hospital staff member or employee with a objection on moral or religious grounds shall not be required to participate in such medical procedures.

WIS. STAT. § 253.07(3)(b)	Family Planning	Agency employees may refuse to offer family planning services to the extent it is contrary to their personal beliefs.
WYOMING		
WYO. STAT. ANN. § 35-6-105	Abortion	No private hospital or other private facility in this state is required to admit any patient for an abortion nor to allow the performance of an abortion.
WYO. STAT. ANN. §§ 35-6-106, -114	Abortion, Euthanasia	No person shall be required to participate in any abortion or in any act or thing which accomplishes or performs a human miscarriage, euthanasia or any other death of a human fetus or human embryo.
WYO. STAT. ANN. §§ 42-5-101(d), -102(a)(ii)	Family Planning, Contraception	Any person may refuse to offer family planning and birth control services to the extent the duty is contrary to personal or religious beliefs.

Citation	Conscience Objection	Protected Objector
GUAM		
9 GUAM CODE ANN. § 31.22	Abortion	No person shall require a physician, nurse, or employee or staff member , to directly participate in an abortion, if he or she has filed a statement indicating a moral, ethical or religious basis for refusal. The chapter does not require a non-profit hospital or other facility or clinic operated by a religious organization to perform or permit abortions.
VIRGIN ISLANDS		
14 V.I. CODE R. § 154 (LexisNexis)	Abortion	Except in case of emergency, no physician, nurse, or any other hospital personnel shall be required to perform, assist or in any other way associate with the performance of an abortion.