

Testimony on SB 19

Submitted To

The Senate Public Health and Welfare Committee

By

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Kansas Association of Local Health Departments (KALHD)

February 5, 2025

On behalf of the Kansas Association of Local Health Departments (KALHD) and our 100 member Health Departments, I appreciate the opportunity to provide this testimony on Senate Bill 19. We are an opponent of this bill.

This bill proposes to enact the conscientious right to refuse act. Under this act, individuals who refuse certain specified medical care would have a cause of action against employers, healthcare entities, schools, or a person, if the individual suffered a direct or indirect injury due to the actions defined in this bill. The actions include:

- 1) an adverse employment action
- 2) denial of goods or services
- 3) denial of entry to a place otherwise accessible to the public
- 4) segregation or separation of the individual from others without a valid business necessity
- 5) denial of housing
- 6) assessment of a financial penalty
- 7) treating the individual differently than another individual who accepted medical care

In restricting the ability of employers of one or more persons to determine what is best for the health and safety of their customers and workforce, this legislation will negatively impact the family farm, small business, corporations, and government.

While the negative results from this bill are many, here are a few examples.

- 1) How will an employer be impacted if they discharge an employee for poor work performance [Sec. 1 (b)(1)], and the discharged employee attempts to use SB19 to redress that action? Such claims could increase the cost professional liability insurance, require additional human resources and legal services, and reduce the overall efficiency of private and public employers as they shift resources to

investigate and resolve any claims. Costs that ultimately would fall on citizens in both increased costs of goods and services, and higher taxes.

- 2) As an employer means any person employing one or more persons, any business could be accused under this bill. How would reasonable and prudent business decisions to not rent property, deny a loan, or simply not doing business with an individual due to conflicts in schedules, workload or other resources considerations [Sec. 1(b)(2)] be impacted by individuals who might conflate sound business decisions with their own views on healthcare?
- 3) As an individual person [Sec. 1(b)] is subject to these provisions, how would a neighbor respond to a neighbor who could under this bill claim they have been treated differently [Sec. 1(b)(7)] than another individual? Some have expressed, and I would agree, that something about our current society is leading us to be less connected to one another and our communities than generations past. This bill seems likely to further those divides when we should be working to bring people together.

I encourage you to conclude that this bill will not improve any future disease response and takes unnecessary risks to the health of everyone, our economy, and how we simply live together in this world.

I urge you to cancel final action scheduled for Thursday, February 6, 2025, or to vote against this bill if final action proceeds.

Thank you for the opportunity to contribute to this hearing.