A BILL

IN THE COUNCIL OF THE DISTRICT OF COLUMBIA

To amend the Human Rights Act of 1977 to recognize the right to choose or refuse contraception or sterilization and to decide whether to carry a pregnancy to term to term, to give birth, or to have an abortion, to prohibit the District government from interfering with reproductive health decisions and from imposing a punishment or penalty on an individual for a self-managed abortion, miscarriage, or adverse pregnancy outcomes, and to prohibit employment discrimination against health care professionals based on the professional’s participation in or the fact that the health care professional is willing to participate in, abortion or sterilization procedures.

BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Strengthening Reproductive Health Protections Amendment Act of 2019”.

Sec. 2. The Human Rights Act of 1977, effective July 17, 1985 (D.C. Law 6-8; D.C. Official Code § 2-1401.01 et seq.), is amended as follows:

(a) Section 102 (D.C. Official Code § 2-1401.02) is amended by adding a new paragraph (27A) to read as follows:
“(27A) The term “reproductive health decisions” includes a decision by an individual, an individual’s dependent, or an individual’s spouse related to:

“(A) The use or intended use of a particular drug, device, or medical service, including the use or intended use of contraception or fertility control; or

“(B) The planned or intended initiation or termination of a pregnancy.”

(b) Section 105 (D.C. Official Code § 2-1401.05) is amended as follows:

(1) Subsection (a) is amended by striking the phrase “This section shall not be construed to require an employer to provide insurance coverage related to a reproductive health decision.”.

(2) Subsections (b) and (c) are repealed.

(c) A new section 105a is added to read as follows:

“Sec. 105a. Ensuring government noninterference in reproductive health decisions.

“(a) The District recognizes the right of every individual to choose or refuse contraception or sterilization.

“(b) The District recognizes the right of every individual who becomes pregnant to decide whether to carry a pregnancy to term, to give birth to a child, or to have an abortion.”.

“(c) The District government shall not:

“(1) Deny, interfere with, or restrict, in the regulation or provision of benefits, facilities, services, or information, the right of an individual, including individuals under state control or supervision, to:

“(A) Choose or refuse contraception or sterilization; or

“(B) Choose or refuse to carry a pregnancy to term, to give birth to a child, or to have an abortion;
“(2) Interfere with or restrict, in the regulation or provision of benefits, facilities, services, or information, the decision of a health care practitioner acting within the scope of the health care practitioner’s license to participate in a consenting patient’s prenatal care, labor or delivery, or abortion; or

“(3) Seek to punish or penalize an individual for:

“(A) Seeking, inducing, or attempting to induce the individual’s own abortion; or

“(B) Any act or omission during the individual’s own pregnancy based on the potential or actual impact on the individual’s health or pregnancy.

“(d) For the purposes of this subsection, the term “health care practitioner” means a person, groups of persons, partnership, or corporation, including a health care facility, that is licensed, certified, or otherwise authorized by law to provide professional health care services in the District to an individual.”.

(c) Section 211(a)(4) (D.C. Official Code § 2-1402.11(a)(4)) is amended by adding a new subparagraph (E) to read as follows:

“(E) Fail to treat individuals affected by pregnancy, childbirth, related medical conditions, or breastfeeding, and employees affected by reproductive health decisions the same for all employment-related purposes, including receipt of benefits under fringe benefit programs, as other persons not so affected but similar in their ability or inability to work, and this requirement shall include, but not be limited to, a requirement that an employer must treat an employee temporarily unable to perform the functions of the employee’s job because of the employee’s pregnancy-related condition in the same manner as it treats other employees with
temporary disabilities; provided, that this subparagraph shall not be construed to require an
employer to provide insurance coverage related to a reproductive health decision.”.
(b) Title II is amended by adding a new part J to read as follows:
“PART J - Prohibition on discrimination against health care professionals.
“Sec. 291. Definitions.
“For the purposes of this part:
“(1) “Health care professional” means a physician; advance practice clinician;
nurse; nurse’s aide; medical assistant; hospital employee; clinic employee; nursing home
employee; pharmacist; pharmacy employee; medical researcher; medical or nursing school
faculty, student, or employee, counselor or social worker; or any other individual involved in
providing health care in any manner.
“(2) “Health care provider” means:
“(A) Any person, group of persons, partnership, institution, corporation,
organization, or board engaged in the provision of health care in any manner; or
“(B) Any person, group of persons, partnership, institution, corporation,
organization, or board engaged in, or authorized for, credentialing or licensing of a health care
professional.
“Sec. 292. Prohibited discrimination.
“(a) It shall be an unlawful discriminatory practice for a health care provider to engage in
any of the following acts with respect to a health care professional based on the health care
professional’s participation in abortion or sterilization procedures or related training outside the
course and scope of the health care professional’s employment with that health care provider or
based on the fact that the health care professional is willing to participate in abortion or
sterilization procedures:

“(1) Fail or refuse to hire;

“(2) Discharge from employment or medical training program;

“(3) Transfer;

“(4) Discriminate with respect to:

(A) Compensation or promotion;

(B) Residency or other medical training opportunities;

(C) Staff privileges, admitting privileges, or staff appointments; or

(D) Licensure or board certification;

“(5) Take adverse administrative action against;

“(6) Cause loss of career specialty;

“(7) Harass; or

“(8) Otherwise penalize, discipline, or take adverse or retaliatory action.”

Sec. 3. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal
impact statement required by section 4a of the General Legislative Procedures Act of 1975,

Sec. 4. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the
Mayor, action by the Council to override the veto), a 30-day period of congressional review as
provided in section 602(c)(1) of the District of Columbia Home Rule Act, approved December
24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.