

Right to Refuse Model Legislation

**2022 The US Health Freedom Congress
Hilton Airport Hotel, Bloomington, Minnesota
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Submitted by National Health Freedom Action**

Right to Refuse Model Bill

THE PEOPLE OF THE STATE OF [Insert State Name Here] DO ENACT AS FOLLOWS:

SEC.1. Section [Insert State Section of Code Here] is added to the [Insert name of Section of Law Code

Here] Code to read:

[New Section Number] (a) Refusal of health interventions. Notwithstanding laws, rules, orders, or directives made or promulgated in response to an emergency, including but not limited to a national security emergency, state-wide emergency, local or other health emergency, or any peacetime emergency, and notwithstanding existing laws and rules addressing outbreaks or potential outbreaks or epidemics of a contagious, infectious, or communicable disease, individuals retain the right to be free and independent and maintain their inalienable and fundamental right of self-determination to make their own health decisions, including but not limited to the right to refuse the following health related interventions and countermeasures:

1. medical treatments or procedures;
2. testing;
3. physical or mental examination;
4. vaccination;
5. experimental procedures and protocols;
6. collection of specimens;
7. participation in tracking or tracing programs;

8. the wearing of masks;
9. the maintaining of measured distance from other humans and animals that is not otherwise unlawful;
10. the involuntary sharing of personal data or medical information; and
11. other recommended or mandated countermeasures.

An individual who has been directed or ordered by a government or its designees, or a public or private business or entity, including but not limited to a commissioner or director of health, a local health officer, a sheriff or peace officer, or any designee of such commissioner, director or officer, to submit to a directive or order as described in this part, may choose to decline to comply, respond to, or participate with said directive or order. For purposes of this Section [Insert Section number from above] parts (a)-(d), “individual” and “person” includes adults and minor children.

(b) Coercion. The government or its designees, or other employers, businesses, non-profits, institutions, churches, travel carriers, or other public or private entities, may not infringe upon, put conditions on, or restrict an individual’s right to be free and independent and maintain their inalienable and fundamental right of self-determination to make their own health decisions, by putting restrictions on education, daycare, employment, travel, religion, hobbies, entertainment, sports, and lifestyle preferences, based on a person choosing to decline interventions or countermeasures as described in part (a).

(c) Persons Needing Care. A person who is infected with, or reasonably believed to be infected with, or who has been exposed to a toxic agent that can be transferred to another individual, or who has been exposed to a communicable disease, and the agent or communicable disease is the basis on which an emergency has been declared, or is the basis of a non-emergency order, law, or rule, and who refuses to submit to countermeasure as described in part (a), may participate in isolation or quarantine according to the parameters set forth in sections [Insert citation to the State’s Existing Section of Code for isolation and quarantine].

Notwithstanding existing isolation and quarantine laws, all said isolation or quarantine must be of the least restrictive means possible, include reasonable notice and due process, be protective of the right of the individual to remain in their home, live with family members, friends or significant others at all times, and not require homes to be altered or renovated such as adding additional bathrooms. The quarantining of a non-infected person must be based on sufficient credible evidence of contact or close proximity with an infected person and may not be imposed upon an individual based on third party location data.

Treatment, testing, tracking, or prevention orders must not be imposed as a requirement for the ending of isolation or quarantine of a person. A person in isolation or quarantine has the right to utilize the health care treatments of their choice and to have a consenting person of their choice with them and attending their needs at all times.

Quarantine or isolation may not take away or alter the legal or medical custody of a person who is under a parent or legal guardian. A minor child may not be forcibly removed from their parent or home.

(d) Information Given. Before a health care provider or an individual who has been directed or ordered by a government or its designees, or a public or private business or entity, including but not limited to a commissioner or director of health, a local health officer, a sheriff or peace officer, or any designee of such commissioner, director or officer, performs a countermeasure included in an order or directive or requests participation in a countermeasure that is included in an order or a directive including but not limited to the countermeasures listed in part (a) of this section, he/she shall notify the person of his/her rights as described herein by reading aloud to him/her both part (a) and part (b) of this section. If the person being ordered is a minor, then parts (a) and (b) must be read to the person's parent or legal guardian. A copy of this section must be provided to the person, or the person's parent or legal guardian, in writing.

The provider, commissioner, director, officer or any designee shall also obtain a signature of acknowledgement of receipt of notification from a person, or the person's parent or legal guardian, who declines to participate or who exercises his/her right to refuse.

THEREFORE, BE IT RESOLVED that the following Voting Members of the US Health Freedom Congress do endorse the appended Model Right to Refuse Legislation: