



Department of Justice, Peace and Human Development Office of Domestic Social Development

HEALTH CARE REFORM February 2011

ISSUE

Catholic teaching insists that health care is a basic right flowing from the sanctity of human life and dignity of the human person. In March 2010, President Obama signed health care reform legislation into law. The law significantly expanded the accessibility and affordability to tens of millions of uninsured Americans. However, the Catholic bishops opposed final passage because there is compelling evidence that it would expand the role of the federal government in funding and facilitating abortion and plans that cover abortion. The statute appropriates billions of dollars in new funding without explicitly prohibiting the use of these funds for abortion, and it provides federal subsidies for health plans covering elective abortions. Its failure to preserve the legal status quo that has regulated the government's relation to abortion, as did the original bill adopted by the House of Representatives in November 2009, undermines what has been the law of our land for decades and ignores the consensus of the majority of Americans: that federal funds not be used for abortions or plans that cover abortions. Additionally, the statute forces all those who choose federally subsidized plans that cover abortion to pay for other peoples' abortions with their own funds.

The statute is also profoundly flawed because it has failed to include necessary language to provide essential conscience protections (both within and beyond the abortion context). In another essential problem, I, many immigrant workers and their families could be left worse off since they will not be allowed to purchase health coverage in the new exchanges to be created, even if they use their own money.

BACKGROUND

Catholic teaching supports adequate and affordable health care for all, because health care is a basic human right. Genuine health care reform must protect human life and dignity, not threaten them, especially for the most voiceless and vulnerable. Health care legislation must respect the consciences of providers, taxpayers, and others, not violate them. Coverage should be truly universal and should not be denied to those in need because of their condition, age, where they come from or when they arrive here. Providing affordable and accessible health care that clearly reflects these fundamental principles is a public good, moral imperative and urgent national priority.

Prospects for fixing the serious moral flaws in the law:

Three bills currently in the U.S. House of Representatives would help ensure that adequate protections are in place for the consciences of taxpayers and health care providers and against federal funding of abortion. The Protect Life Act, H.R. 358, would address flaws in the new health care reform law and bring it into line with policies on abortion and conscience rights that have long prevailed in other federal health programs. It would do so by preventing funds under the new law from subsidizing abortion or health care plans that cover abortion, protecting the consciences of health care providers who decline to participate in an abortion, and ensuring that the law doesn't override state laws on abortion and conscience. This act reflects the provisions of the "Stupak Amendment" that passed the House in November 2009.

The Abortion Non-Discrimination Act (ANDA), H.R. 361, will codify into law the longstanding policy of the Hyde/Weldon amendment and give health care entities that do not provide abortions legal recourse when faced with government-sponsored discrimination. The Office for Civil Rights at the Department of Health and Human Services would be designated to investigate complaints.

The No Taxpayer Funding for Abortion Act, H.R. 3, would write into permanent law a policy on which there has been strong popular and congressional agreement for over 35 years: The federal government should not use taxpayers' money to support and promote elective abortion. Even public officials who take a 'pro-choice' stand on abortion, and courts that have insisted on the validity of a constitutional 'right' to abortion, have agreed that the government can validly use its funding power to encourage childbirth over abortion. This agreement is so longstanding that, during the health care debate, many assumed it was already in place at all levels of the federal government, when in fact the Hyde amendment is

only a rider to the annual Labor/HHS appropriations bill and only governs funds under that act. The benefit of H.R. 3 is that it would prevent problems and confusions on abortion funding in future legislation.

Future legislation is needed that would remove the five year barrier to Medicaid for legal immigrants that is in current law. Future legislation on immigration reform or health care reform should expand access to health care for all immigrants.

USCCB POSITION

For decades, the bishops have consistently insisted that access to decent health care is a basic safeguard of human life and an affirmation of human dignity from conception until natural death. Health care reform legislation and implementation should be supported that 1) ensures access to quality, affordable, life giving health care for all; 2) retains longstanding requirements that federal funds not be used for elective abortions or plans that include them, and effectively protects conscience rights; and 3) protects the access to health care that immigrants currently have and removes current barriers to access.

In *A Framework for Comprehensive Health Care Reform: Protecting Human Life, Promoting Human Dignity, Pursuing the Common Good*, the bishops support health coverage that is affordable for the poor and needy, moving our society substantially toward the goal of universal coverage. The bishops are equally clear in stating that this must be done in accord with the dignity of each and every human person, showing full respect for the life, health and conscience of all.

As Pope Benedict recently stated, in the health care sector “it is important to establish a real distributive justice which, on the basis of objective needs, guarantees adequate care to all.” Moreover, “if it is not to become inhuman, the world of health care cannot disregard the moral rules that must govern it” (Message to the Pontifical Council for Health Care Workers, November 15, 2010). We wholeheartedly commit ourselves to health care reform that achieves these worthy goals. We will advocate for addressing the current problems in the Patient Protection and Affordable Care Act, as well as others that may become apparent in the course of its implementation.

For more detail analysis and information, please visit www.usccb.org/healthcare

To read the full text of the legislation, please visit <http://Thomas.loc.gov>

ACTION

- Work for Congressional Action on health care that reflects the three USCCB moral criteria.
- Contact your Senators and Representative and urge them to co-sponsor the three House bills that would ensure that federal law continues to protect consciences and prohibit federal funding for abortion. The three bills are the Protect Life Act, H.R. 358; the Abortion Non-Discrimination Act (ANDA), H.R. 361; and the No Taxpayer Funding for Abortion Act, H.R. 3. (For contact information, visit www.house.gov and www.senate.gov).
- Work with your State Catholic Conference to ensure that health care reform implementation at the state level is consistent with the bishops’ moral criteria for health care.

For more information

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