



United States Conference of Catholic Bishops

3211 FOURTH STREET NE • WASHINGTON DC 20017-1194 • 202-541-3160

WEBSITE: WWW.USCCB.ORG/healthcare • FAX 202-541-3339

September 30, 2009

United States Senate
Washington, DC 20510

Dear Senator:

On behalf of the United States Conference of Catholic Bishops (USCCB), we write to outline the bishops' policy priorities and urge you to shape and adopt genuine health care reform which protects the life and dignity of all. At their core, health care choices are not just political, technical, or economic, but also moral. This legislation is about life and death, who can take their children to the doctor and who cannot, who can afford decent health care coverage and who are left to fend for themselves. Health care reform especially needs to protect those at the beginning of life and at its end, the most vulnerable and the voiceless.

The Catholic community brings unique experience to this discussion. Our hospitals, clinics, and long-term care facilities provide quality health care to millions. Our dioceses, institutions, and ministries purchase health care for many thousands of employees and their families. Our emergency rooms, shelters, clinics, and charities pick up the pieces of a failing health care system. Our Catholic moral tradition teaches that health care is a basic human right, essential to protecting human life and dignity. These moral principles and our everyday experience lead us to work for three central priorities for health care reform.

We urge you to

1. Support long overdue health care reform that covers all people and protects the life, dignity, and health of all. Health care reform that meets this standard is an important national priority and moral imperative. Reform should make quality health care affordable and accessible to everyone.
2. Support a fair and just health care reform bill that excludes mandated coverage for abortion, and upholds longstanding laws that restrict abortion funding and protect conscience rights. No one should be required to pay for or participate in abortion. It is essential to clearly include longstanding and widely supported federal restrictions on abortion funding/mandates and protections for rights of conscience.
3. Support effective measures to safeguard the health of immigrants, their children and all of society. Maintain an adequate safety net for those who remain uncovered. Eliminate the five-year waiting period banning immigrants lawfully residing in the United States from enrolling in Medicaid. Do not impose barriers (e.g., waiting period to obtain subsidies) on immigrants seeking to obtain private health care coverage.

The following criteria need special attention as Congress moves forward with health care reform.

Respect for life and dignity No health care reform plan should use federal dollars for abortion, or compel people to pay for or be involved in other people's abortions. Longstanding federal laws governing other major health programs, including the health insurance program for federal employees, prevent federal funds from being used for abortions *or to help purchase benefits packages that include abortions*. For decades, too, Congress has respected the right of health care providers not to be involved in any abortions or abortion referrals, and has respected moral and religious objections in other areas as well. The Weldon amendment to the Labor/HHS appropriations act, approved by Congress each year since 2004, forbids any federal agency or program, and any state or local government receiving federal funds under the Act, to discriminate against individual or institutional health care providers or insurers because they decline to provide, pay for, provide coverage of, or refer for abortion.

Health care reform legislation should reflect longstanding and widely supported current policies on abortion funding, mandates, and conscience protections because they represent sound morality, wise policy, and political reality. So far, the health reform bills considered in committee, including the new Senate Finance Committee bill, have not met President Obama's challenge of barring use of federal dollars for abortion and maintaining current conscience laws. These deficiencies must be corrected.

Affordability Reform efforts must begin with the principle that decent health care is not a privilege, but a right and a requirement to protect the life and dignity of every person. All people need and should have access to comprehensive, quality health care that they can afford, and such access should not depend on their stage of life, where or whether they or their parents work, how much they earn, where they live, or where they were born. *The Bishops' Conference believes health care reform should be truly universal and genuinely affordable*. Many lower-income families simply lack the resources to meet their health care expenses. For these families, significant premiums and cost-sharing charges can serve as barriers to obtaining coverage or seeing a doctor.

The affordability provisions in the proposed Senate Finance Committee plan would impose financial burdens on low-income and moderate-income families and those families with significant and chronic illnesses. Some families living just above the federal poverty line could face out-of-pocket expenses that approach 25 percent of their income.

We urge Congress to limit premiums or to exempt families earning less than 200 percent of the federal poverty level from monthly premiums. We also recommend limiting co-payments and other costs which could discourage needed care. In order to move toward universal coverage, we support the increase in eligibility levels in Medicaid to no less than 133 percent of the federal poverty level for all citizens and immigrants residing lawfully in the United States.

In addition to assuring access and coverage for those who are uninsured and underinsured, Congress should incentivize employers to provide health care to their employees. Legislation should include provisions that encourage employers and support them in their efforts to provide adequate health care coverage that is affordable to workers and their families. The dignity of workers should be respected by offering adequate benefits as a part of fair and just compensation.

Inclusion of immigrants After health care reform is implemented, some individuals and families, including immigrants, will still lack health insurance coverage. Society has a responsibility to ensure that no one is left without the ability to see a doctor when he or she is sick, or to get emergency care when his or her health is at risk. Therefore, we urge Congress to ensure sufficient funding for safety-net clinics, hospitals, and other providers serving those who will continue to fall through the cracks of a reformed system.

The Catholic bishops renew our appeal to provide equity for legal immigrants in access to health care. This can be accomplished, in part, by making legal immigrants and their families eligible for subsidies equal to U.S. citizens; by repealing the five-year ban for legal immigrants to access Medicaid; repealing the applicability of “sponsor-deeming” for Medicaid and CHIP; and ensuring that pregnant women in the United States, who will be giving birth to children who are United States citizens, are eligible along with their unborn children for health care regardless of their immigration status. Immigrants pay the same taxes as citizens, and their health needs cannot be ignored. Leaving them outside a reformed system is both unfair and unwise.

Health care is not just another issue for the Church or for a healthy society. It is a fundamental issue of human life and dignity. Health care is a critical component of the Catholic Church’s ministry. One out of six patients is cared for in Catholic hospitals. We bring both strong convictions and everyday experience to the issue of health care.

We look forward to working with you on these priorities as you make important choices on how to strengthen and improve health care, a most important national priority.

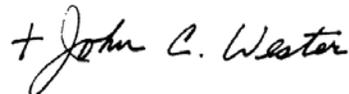
Sincerely,



Bishop William F. Murphy
Diocese of Rockville Centre
Chairman
Committee on Domestic
Justice and Human
Development



Cardinal Justin Rigali
Archdiocese of Philadelphia
Chairman
Committee on Pro-Life
Activities



Bishop John Wester
Diocese of Salt Lake City
Chairman
Committee on Migration