



CATHOLIC MEDICAL ASSOCIATION

Upholding the Principles of the Catholic Faith in the Science and Practice of Medicine

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Health Care in America: A Catholic Proposal for Renewal

2008 Executive Summary

In 2004, the Catholic Medical Association issued *Health Care in America: A Catholic Proposal for Renewal*. In preparation for the national debate on health care reform set to begin again, the CMA has published an Executive Summary of its Task Force Report. To obtain a copy of the full report, contact the CMA or visit us online at: www.cathmed.org/publications/taskforce.htm

Introduction

The American health sector is facing a crisis, as ever-rising costs force millions of people to go without health insurance and threaten access to health care for many more. But the crisis extends beyond costs and access to include issues of bureaucratic intrusion into the physician-patient relationship and compromised health care ethics. There is a loss of a common understanding, within and without the medical profession, of the sanctity and inviolability of each human life.

More than 46 million Americans lack health insurance, creating barriers to accessing health care services, but many more are mis-insured: They are unable to obtain coverage that meets their needs or, more importantly, coverage which accords with their fundamental moral beliefs. The mis-insurance of America, defined as the systematic, inequitable and unjust allocation of public and private resources for health purposes, is a near-universal phenomenon.

The crisis in ethics exploded with the Supreme Court decision of *Roe v. Wade* in 1973, and attacks on the sanctity and inviolability of human life are increasing in American society, with catastrophic effects on the unborn, the elderly, and the disabled. Lacking statutory protection that applies comprehensively and with equal force to institutions as well as individuals, some Catholic hospitals have been forced to choose between governmental accreditation and training residents in abortion procedures.

The sanctity of the physician-patient relationship also is in crisis. Physicians are frustrated with financial, regulatory and bureaucratic intrusions that dictate every aspect of the delivery of health care. In the vision of Christian, and particularly Catholic, health care, this encounter is much more than a meeting of need and skill. No advance in technology, no deprivation in finance, can alter the fact that the patient-physician relationship

is grounded in the meeting of whole persons, operating under presumptions of virtue, seeking the restoration of well-being, benefiting the individual and serving the common good.

Causes of the Crisis

The key to understanding the crisis in American health care today is that it violates essential norms of justice and charity on both sides of the physician-patient relationship. It impairs the ability of the physician to decide and act as Jesus would, and it ignores the dignity of the poor in countless ways. This results from government policies that dictate the financing and delivery of health care services in America. These forces are complex, resulting from both the diversity and freedom of American society and from contingent factors such as tax policy.

Key Problems

State laws dictate the services health insurance policies must cover, often forcing people to pay for services they have no desire to use. Moreover, state legislators and courts have started forcing individuals and institutions to provide insurance for services that conflict with their deepest values, even while health care providers are being forced to provide or cooperate with dictates that conflict with their conscientious judgment. With increasing frequency, pharmacists are facing charges of unprofessional conduct or being dismissed for acting on their convictions by refusing to fill birth control prescriptions or distribute the “morning-after” pill.

Government programs for children and low-income families, especially Medicaid and the State Children’s Health Insurance Program (SCHIP), not only fund unethical services (including abortion and contraceptives) but also provide a mechanism for paying for these services without parental knowledge or permission.

The mechanisms for supporting the purchase of private insurance, primarily through tax policies, generously support those with the highest incomes who get health insurance at work, but offer little or nothing to people with modest incomes. Further, decisions over health care and health coverage are removed from families and dictated by corporate or government bureaucracies.

New federal privacy policy (HIPAA) has essentially

transferred control of personal health care information to the government and other entities without patient consent.

These flawed policies have hurt the poor most of all. Increasing regulation, rising costs, and lower reimbursements have undermined the ability of physicians and institutions to provide charitable health care services. Moreover, the poor are denied the means to direct their own families' health care, while their neighborhoods have been saturated with "reproductive health" facilities and philosophies that have contributed to extraordinarily high rates of abortion and sexually transmitted disease.

Together, these policies have replaced individual responsibility and family authority with bureaucratic decision-making, violating the fundamental principle of subsidiarity. And this impacts every aspect of health. When responsibility is taken from the individual and turned over to bureaucracies, individuals are robbed of their dignity and the incentive to take responsibility for themselves and their families.

The Vision and Experience of the Church

The Catholic faith provides substantive resources for addressing the health care crisis, including consistent ethical guidance on respect for human dignity, comprehensive social teachings, and a history rich with examples of saints, religious orders, bishops and faithful Catholics extending the healing ministry of Jesus Christ through hospices, hospitals, clinics and individual practices.

The Catholic vision for health care is both inspiring and practical. From the smallest medical office to the largest hospital, the metaphysical symmetry of Catholic medicine can be glimpsed, just as it is present in cathedrals and basilicas. Jesus Christ is its cornerstone. The pillars are those of subsidiarity, solidarity, the sanctity of human life, and virtue. The floor is justice, and the light that fills its space is charity, by which all that occurs there is illuminated. The whole of the structure gives rise to the common good.

Proposals for Renewal

We began this statement with cautionary words about the crisis we face, and we conclude with practical suggestions to help correct past errors and to build a new health care system shaped as much by faith, hope and love as by financial and regulatory forces.

Individual ownership of health insurance. Every American should be able to obtain needed medical care. Congress could begin by providing a new set of incentives for Americans to purchase their own health insurance directly. These incentives should be properly structured to create an opportunity for people to purchase coverage that conforms to the dictates of their conscience and moral convictions.

Freedom from health insurance mandates. People

must be able to purchase insurance that is free of restrictions and bureaucratic dictates, including state health insurance mandates. States have enacted more than 1,900 health insurance mandates over the last several decades, including everything from toupees to in vitro fertilization procedures, dictating the shape and structure of health plans for small businesses, individuals, and anyone else purchasing state-regulated policies.

Choice of private insurance policies. The federal government and states should work together to provide more health care insurance options, giving individuals and families and employers the ability to choose among competing plans or to join groups and associations that share their values. Faith-based health providers must be able to develop and offer health care delivery systems that serve the needs of their members and communities. New associations, including faith-based groups, would be welcome, even essential, additions to the array of health care options for families.

Comprehensive protection of conscience. No reform of the American health care system will restore the patient-physician relationship if health care workers are not afforded comprehensive protection of conscience. These protections should be enacted at the state and federal level so that health care providers are not required, for any reason, to participate in procedures that violate their religious or ethical beliefs.

Conclusion

Our vision for the renewal of health care is based upon Catholic principles of morality, social justice and charity. The challenge is to create new incentives to drive power and responsibility for purchasing health care toward individuals and families and restore the central tenet of subsidiarity. Together, in the fellowship of the Holy Spirit, we hope to build a health care culture of life to serve all Americans.

Guiding Documents

Catechism of the Catholic Church (2d ed. 2003)

Pontifical Council for Pastoral Assistance to Health Care Workers, *The Charter for Health Care Workers* (Vatican City, 1995)

Pope Leo XIII, *Rerum Novarum* (1891)

Pope Pius XI, *Quadragesimo Anno* (1931)

Pope John XXIII, *Pacem in Terris* (1963)

Pope John Paul II, *Salvifici Doloris* (1984),

Centesimus Annus (1991), *Evangelium Vitae* (1995)



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