

# Applying Catholic Principles in Evaluating Health Care Reform Proposals

## *CATHOLIC MEDICAL ASSOCIATION*

1. **The Dignity of the Human Person:** “The dignity of the human person is rooted in his creation in the image and likeness of God.” Medical care and the healthcare delivery system must be founded upon the truth regarding the physical, emotional, social and spiritual realities that constitute every human being as made in the image of God.
2. **The Right to Life:** Any proposed health reform initiative must respect the sanctity of human life from conception (fertilization) to natural death. The right to life is the foundation for all human and civil rights and must be reflected in our nation’s health care system.
3. **Religious Liberty and Freedom of Conscience:** People should be able to choose health care options that are consistent with their conscience and moral and religious beliefs. For decades, religious freedom and protection for the rights of conscience of patients, medical professionals and health care entities have been attacked legally, politically, and culturally with a particular animus towards Catholic health care. Medical professionals and health care entities have a right to freely exercise their conscience, religious beliefs, and informed judgment to practice in the best interests of their patients, free from government coercion. Federal and state law should not coerce doctors to perform medical procedures that are contrary to their medical judgment and violate the physician’s oath to “do no harm.”
4. **Subsidiarity:** The family, the Church, and local and state government are most effective in providing health care solutions because they are closest to the needs and resources of their communities. An overbearing federal government can suppress the rights and beliefs of both doctors and patients and suffocate voluntary communal charity. Instead of the federal government controlling decisions, resources can instead be transferred to states through grants to help those in need of assistance in accessing care and coverage. States and local governments are better equipped to allow citizens to actively engage in shaping their local health care system and advocate for programs that provide assistance consistent with the needs of their communities.
5. **Solidarity:** Health care access for all can be realized when the social safety net for those who are poor or vulnerable works together with free-market and faith-based health care options. While it is appropriate for public subsidies to focus on those in need of assistance in accessing medical care, galvanizing private and public health care resources promotes recognition of the mutual interdependence amongst the citizens and residents of our country necessary for a strong, vibrant health care system.
6. **The Centrality of the Patient-Doctor Relationship:** A health sector that respects the importance and integrity of the patient-physician relationship best protects the dignity of the human person. It is also essential to protect this relationship to achieve the highest quality medical care.

Although well intentioned, government programs designed to control costs can lead to rationing care and impose cookbook medicine on patients. They can seriously intrude on the doctor-patient relationship by requiring doctors to focus on computer data entry to meet “quality metrics” and “earn bonuses” at the expense of time devoted to caring for patients. Centering the health care system on the dignity and needs of the patient and physician leads to maximum efficiency, lower costs and the best health outcomes.

7. **Protection for the Poor and Most Vulnerable:** The preferential option for the poor requires a strong social safety net be maintained to provide medical care for the most vulnerable—especially children, mothers, the disabled, seniors and those living in poverty. When federal and state governments expand safety-net programs that are designed for our most vulnerable citizens to also cover those who have other coverage options, the safety net can be stretched to the breaking point, making it more difficult for these vulnerable individuals to get the care they need. A centrally controlled health care system will respond to those with the means to gain political advantage, disadvantaging the vulnerable and those without political power.
8. **The Essential Role for Charity:** A core tenet of the Catholic Church is expressing faith through works. There will always be a need to help the less fortunate. While physicians and hospitals have a moral claim to be paid for the services they provide, there will always be a role for the gift of charitable care based upon the reality that each person is a child of God, worthy of respect and love.
9. **Patient and Consumer Freedom:** All Americans should have access to quality medical care with options for care and coverage that are affordable and that meet their needs. To respect the dignity of the individual and the centrality of the family to civil society, individuals and families should be free to control decisions involving their health care, including market-based and faith-based coverage. A foundational principle of a sustainable health system is one in which individuals have incentives to take responsibility for themselves and their families. Healthy competition leads to better choices and lower costs while acknowledging consumer protections are necessary to ensure that those with serious illnesses and chronic conditions are protected.
10. **Patient-Centered Health Care:** Patients—not remote government entities—should be the ultimate decision-makers about the value of the medical services they receive based upon their values, weighing cost and quality. Patients must be confident that their physicians are free from bureaucratic regulations that force them to treat them as abstract reimbursement constructs rather than as unique individuals.
11. **Transparency and Trust:** People should be able to know the costs of their health coverage and care. They should have access to their medical records. They should know the range of coverage options available to them. At the same time, privacy and confidentiality must be assured to protect the trust that is essential to the doctor-patient relationship.
12. **Protecting Future Generations:** Any health system that demands young people pay a disproportionate share of health costs or that pushes liabilities to future generations compromises our future and the potential of young people to become productive members of society. To guard against that, public programs could transition to premium-support and defined-contribution models that allow greater individual control over choices and spending and which support continued innovation.