May 16, 2019

United States House of Representatives
Washington, DC 20515

Dear Representative:

On behalf of the Catholic Health Association of the United States (CHA), the national leadership organization of more than 2,200 Catholic health care systems, hospitals, long-term care facilities, sponsors, and related organizations, I am writing in regard to the Equality Act, H.R. 5.

As a Catholic health ministry, our mission and our ethical standards in health care are rooted in the Catholic Church's teachings about the dignity of each and every human person, created in the image of God. For this reason, we reject all forms of unjust discrimination. Access to health care is essential to promote and protect the inherent and inalienable worth and dignity of every individual and every individual seeking health care should always be treated with compassion and respect. Our members are committed to providing health care services to any person in need of care. Refusing to provide medical assistance or health care services because of discomfort with or animus against an individual on any basis is unacceptable.

However, federal law has long recognized that certain services can present a potential conflict for some faith-based health care providers with religious or moral objections to providing those services, and protected them from having to do so. We are concerned that the Equality Act omits and could erode or reverse those protections.

For example, the Act’s amendments to the civil rights laws could be found to create an obligation to provide or participate in abortion or sterilization. Federal conscience laws such as the Church, Coates-Snowe and Weldon amendments, as well as state conscience laws, have long protected Catholic and other health care providers with religious and moral objections to these procedures. It is unclear whether the Equality Act’s amendments to the civil rights laws would preserve or undermine those protections.

We are also deeply troubled by the nullification of the Religious Freedom Restoration Act (RFRA) with respect to claims arising under the Equality Act. RFRA was passed with nearly unanimous bipartisan support in both houses of Congress. It requires a showing of a compelling government interest to justify substantial burdens on religious exercise, allowing courts to weigh the fundamental right to religious freedom against other important government interests.

In addition, certain services directly related to gender transition could present a potential conflict for some faith-based health care providers. The Equality Act could be found to mandate such
services. But because the Act both lacks conscience protection language and precludes application of RFRA, there may be no opportunity to find a balance between the free exercise rights of health care providers and others with moral or religious objections to providing certain health care services and the ability of those who seek such services to receive them.

We share with the Act’s authors a desire to end unjust discrimination against any person. We urge Congress to craft a bill that would respect the dignity and protect the rights of all who could be affected by the legislation. For the above reasons, however, we are unable to support the Equality Act as written.

Sincerely,

Sr. Carol Keehan, DC
President and CEO