



November 24, 2017

Center for Faith-Based and Neighborhood Partnerships Office of Intergovernmental and External Affairs U.S. Department of Health and Human Services *Attn: RFI Regarding Faith-Based Organizations* Hubert Humphrey Building 200 Independence Avenue, S.W. Washington, DC 20201

Re: HHS-9928-RFI

Dear Sir or Madam:

I am writing on behalf of the Catholic Health Association of the United States in response to the request by the HHS Center for Faith-Based and Neighborhood Partnerships (the Center) for information related to the role of religious and faith-based organizations in partnering with HHS to provide services to adults, children and families through HHS-funded programs or activities.

The Catholic Health Association of the United States (CHA) is the national leadership organization of the Catholic health ministry, representing more than 2,000 Catholic health care sponsors, systems, hospitals, long-term care facilities, and related organizations across the continuum of care. CHA represents the largest not-for-profit provider of health care services in the nation:

- 1 in 6 patients in the United States are cared for in a Catholic hospital each year.
- Nearly 5 million admissions to Catholic hospitals each year
- All 50 states and the District of Columbia are served by Catholic health care organizations.
- Approximately 725,000 individuals are employed in Catholic hospitals.

For over two hundred years, individual and institutional Catholic health care providers have served the common good of our nation and its citizens by caring for persons of all ages, races and religious faces, in a manner consistent with our consciences. For the past several decades, we have done so with the explicit protection of federal laws which defend our right to provide health care in accord with our religious and moral convictions. These convictions are the source of both the work we do and the limits on what we can do.



A Passionate Voice for Compassionate Care

CHA's mission and ministry are grounded in the values that drive each of our organizations. Our ethical standards in health care flow from the Catholic Church's teachings about the dignity of the human person and the sanctity of human life from conception to natural death. These values are the foundation of our commitment to the moral dimensions of health care. They direct us to insist on accessible and affordable health care for all, to care for the sick and dying, and to defend the conscience rights of all health care providers, Catholic and non-Catholic alike.

Our society's commitment to pluralism lies at the heart of our diverse and vibrant nation. For this pluralism to flourish the health care system should allow and encourage involvement of the public and private sectors including voluntary, religious and not-for-profit organizations, and it should respect the religious and ethical values of patients and health care providers alike. Catholics and others with deep respect for the sanctity of life must not be forced to perform procedures – such as the taking of the life of the unborn – that are contrary to their deeply held moral beliefs and principles.

Thus, we appreciate the Center's request for information on ways in which HHS can strengthen its partnership with faith-based organizations to provide social services by identifying and removing barriers that might prevent those organizations from participating in HHS grants, contracts and other funding opportunities

We would like to call your attention to an area of deep concern to the Catholic health ministry. CHA has long supported and worked for the enactment of conscience clause protections such as the Church Amendments, Section 245 of the Public Health Service Act, and the Weldon Amendment. Legal protections such as these are essential for the continuation of both our own ministry and our nation's commitment to freedom of religion and of conscience. We urge HHS to include conscience protection language in any regulations that would limit our ability to serve in accordance with our beliefs, so that organizations and individuals will not be required to participate in, pay for, provide coverage for or refer for services that directly contradict their deeply held religious or moral beliefs and convictions. Where the regulations are explicitly covered by the above-referenced laws HHS should reference them to increase awareness of and compliance with them.

Once again, thank you for reaching out to faith-based organizations. We look forward to working with the Center in the future.

Sincerely,

Michael Redgen_

Michael Rodgers Senior Vice President, Advocacy & Public Policy