

March 2017

ETHICAL INTEGRITY AND CONSCIENCE PROTECTIONS

THE ISSUE

The Catholic health ministry in the United States traces its history to 1727 when French Ursuline sisters arrived in New Orleans to serve the city's sick and poor and to educate its children. The explicit recognition of the right of Catholic organizations to perform their ministries in fidelity to their faith is almost as old as our nation itself. President Thomas Jefferson reassured the Ursuline nuns by letter on May 15, 1804, "that your institution will be permitted to govern itself according to it's [sic] own voluntary rules, without interference from the civil authority, whatever diversity of shade may appear in the religious opinions of our fellow citizens, the charitable objects of your institution cannot be indifferent to any; and it's [sic] furtherance of the wholesome purposes of society...cannot fail to ensure it the patronage of the government it is under. be [sic] assured it will meet all the protection which my office can give it."

Today, as in 1727, the Catholic health care ministry welcomes and serves persons of all ages, races and religious faiths. Our deeply held religious and moral convictions are the source of both the work we do and the limits on what we will do.

The historic role of the Catholic health care provider to serve the common good in a manner consistent with its institutional conscience is often challenged. Catholic providers have increasingly been criticized for not offering what some label a "full range of health services" (e.g., abortion, sterilization, contraception). In recent years, a variety of groups have mounted orchestrated campaigns to challenge some of the fundamental values of Catholic health care. These campaigns have included the introduction of adversarial legislation, lawsuits and public relations events designed to force Catholic health care providers to offer services that conflict with Catholic moral teaching, or prevent the affiliation or mergers between them and non-Catholic entities. These efforts have led to the introduction of legislation in several states and localities that could, if enacted, ultimately force Catholic hospitals to close or substantially reduce their services to the community, rather than violate their consciences.

Catholic health care facilities and other faith-based providers should be afforded adequate legal protections to ensure they are not forced to provide services that are contrary to fundamental moral values.

MINISTRY TRADITION

Catholic health and social service organizations represent one of the oldest and largest traditions of public service in our nation. The role of voluntary private institutions has its roots in our nation's Constitution and Bill of Rights, which guarantee the freedoms of association, religion and speech. Catholic health care providers are participants in the healing ministry of Jesus Christ. Our mission and our ethical standards in health care are rooted in and inseparable 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 form the basis for our steadfast commitment to the compelling moral implications of our heath care ministry, whether it be caring with compassion for all persons, throughout all stages of life;

insisting on the right of all to accessible, affordable health care; or defending and preserving the conscience rights of health care providers, including but not limited to Catholic facilities.

Specifically, the *Ethical and Religious Directives for Catholic Health Care Services* note that the "ministry is rooted in a commitment to promote and defend human dignity; this is the foundation of its concern to respect the sacredness of every human life from the moment of conception until death."

CHA'S POSITION AND ACTIVITIES

CHA will continue to work with the administration and congressional leaders to ensure that public policies reflect the importance of religious freedom and conscience clause protections in the delivery of health and social services. We will advocate measures that allow us to maintain our Catholic identity and protect and defend human life from conception to natural death. Specifically, we seek to address:

- Provider Conscience Protections—CHA has long supported, and Congress has enacted annually since 2004, provider conscience protections known as the "Weldon Amendment." The "Weldon Amendment" protects providers from discrimination on the basis that the provider does not provide, pay for, provider coverage of, or refer for abortions. We view this existing legal protection as essential for the continuation of both our own ministry and our nation's commitment to freedom of religion and of conscience. We believe it should be codified permanently into law rather than being annually renewed through a rider on the Labor-HHS appropriations legislation.
 - O The Health Care Provider and Hospital Conscience Protection Act—CHA supports the Health Care Provider and Hospital Conscience Protection Act, introduced by Senator Robert Casey (D-PA). The bill would permanently codify protections for individuals and institutional health care providers' conscience rights and includes a private right of action for any violation of the Act.
 - O The Conscience Protection Act of 2017—CHA also supports the Conscience Protection Act of 2017 (S. 301/HR 644), introduced by Sen. James Lankford (R-OK) and Reps. Diane Black (R-TN) and Jeff Fortenberry (R-NE). The bills would protect health care providers, including health care professionals, entities and health insurance plans from government discrimination if they decline to participate in abortions. The codification of the Weldon Amendment with the addition of a private right of action is a legislative priority.
- The Protection of Religious Freedom CHA will analyze other legislation and suggest appropriate amendments to protect religious health care entities from intentional or unintentional efforts to abridge their religious freedom.
- The Women's Preventive Health Proposed Regulation—CHA will continue to monitor developments related to the previous Administration's proposed definition of "religious employer" relative to the women's preventive health care contraceptive mandate, to ensure the ministry's ability to serve in a manner consistent with our mission and values.