

# As Momentum Builds, Principles Give Voice to Ministry Priorities



BY JEFF TIEMAN

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**A**t the Catholic Health Assembly in June, the Covering a Nation initiative presented a draft “Vision for U.S. Health Care.” The document built on years of work by CHA and the Catholic health ministry to articulate the values that should drive our health care system. We asked leaders of CHA-member organizations to comment on the draft.

August 31 was the deadline for submitting comments. As this is being written in early August, we are still receiving feedback. It will be analyzed and then incorporated into a final version of the document, which will be published later this year. The document is intended to serve the ministry and the U.S. health care system by:

- Providing a values-based set of criteria against which health care reform proposals can be thoughtfully and thoroughly evaluated
- Enabling members of the Catholic health ministry to speak with a strong, unified voice on the important work of creating a system that truly works for everyone

## VIEWS OF ASSEMBLY PARTICIPANTS

At the assembly, we had an opportunity to ask more than 1,000 Catholic health care leaders their views on the most pressing issues in health care—and how best to deliver our message about them. We asked these questions during the Covering a Nation plenary session and used handheld voting devices to register each attendee’s response.

When asked what is the most effective action that local advocates can take to advance the cause of health care for everyone, the assembly audience answered as follows:

- Petitioning influencers—28%
- Community organizing—17%
- Engaging media—7%
- Working toward widespread social change—48%

Former U.S. senator John Breaux, D-LA, who spoke in the same assembly plenary session, said reform will take a combination of all those tactics to be effective—and that Catholic health care leaders should raise their voices early and often because the power of their message is so significant.

When assembly attendees were asked to rank the importance of several issues currently facing health care, they gave the highest score to ensuring the adequacy of Medicare and Medicaid payments, followed by (in the order of importance ranked by the audience):

- Reauthorizing the State Children’s Health Insurance Program (SCHIP)
- Focusing health care more on prevention than treatment of acute illness
- Standardizing and expanding information technology throughout health care
- Modernizing and properly funding long-term and palliative care
- Reforming the medical malpractice system
- Allocating proper resources for medical research and innovation

When they were asked which type of reform plan they favored, audience members voted as follows:

- Combined approach (model of shared responsibility)—69%
- Single payer (government-sponsored health care)—16%
- Coverage mandate (requirement that every individual carry insurance)—8%
- Incremental improvements (SCHIP/Medicaid expansion)—4%
- Market-based health care (health savings accounts, etc.)—3%

This was, of course, a non-scientific poll but it does give a sense of ministry priorities and perspectives. Whether expressed in polls like this one or in meetings with lawmakers, the opinion of the Catholic health ministry is quite clear—and unani-



# THE PRINCIPLES

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The United States has a moral obligation to ensure that no one goes without any of life's basic necessities, including health care. Accordingly, we believe that a reformed health care system addressing the needs of the body, mind and spirit must abide by the following principles and essential elements:

## **The health care system we envision will be available and accessible to everyone.**

*Accordingly, it should:*

- Provide a basic health benefit package to everyone that includes services across the life span of care — preventive, primary, acute, long-term and end-of-life.
- Never limit access to health care coverage based on one's age, health status, employment status or financial means.

## **The health care system we envision will pay special attention to the duty of protecting the poor and vulnerable.**

*Accordingly, it should:*

- Address the particular needs of poor, immigrant and elderly populations; collectively assume responsibility for providing care to those who cannot help themselves, including persons who are not competent, by involving government, charitable organizations and health care providers.
- Provide the same quality of care for everyone, not varying on the basis of socio-economic status, race, ethnicity or any other factor.

## **The health care system we envision will be health and prevention-oriented, with the goal of creating healthy U.S. communities.**

*Accordingly, it should:*

- Emphasize and make available to persons in every community primary and preventive care as well as chronic disease management.
- Make readily available information on the prevalence of major health conditions so that proper steps can be taken to identify root causes and prevent these conditions.

## **The health care system we envision will be sufficiently and fairly financed.**

*Accordingly, it should:*

- Share among all stakeholders the responsibility of financing the health care system; fairly and equitably distribute the financial burden of providing essential health care services to every person among all members of society, not unjustly allocating that burden to

any selected element including employers, providers and individuals.

- Finance the government's share of health care through a system of progressive taxation.

## **The health care system we envision will allocate resources in ways that are transparent and participative.**

*Accordingly, it should:*

- Promote the efficient and cost-effective use of facilities, equipment and services while minimizing unnecessary administrative expenses; be highly efficient, avoiding waste or mismanagement of financial, material and human resources.
- Not spend resources on care that medical judgment determines to be futile.

## **The health care system we envision will put patients and families at the center of the care process.**

*Accordingly, it should:*

- Respect the uniqueness of all persons by considering their physical, psychological and spiritual needs; ensure that the needs, values and preferences of patients are the primary consideration in decisions about care and treatment.
- Thoughtfully design end-of-life and palliative care to ensure the best possible treatment protocols for these vulnerable populations.

## **The health care system we envision will deliver care safely and effectively.**

*Accordingly, it should:*

- Standardize the use of information technology throughout the health care system to improve clinical coordination and reduce medical errors.
- Expand evidence-based medicine to improve safety and continually improve outcomes; prioritize patient safety by minimizing the systemic causes of errors.

## **The health care system we envision will respect the role of religiously affiliated health care organizations.**

*Accordingly, it should:*

- Protect the free exercise of ethical and religious beliefs; ensure that providers of health care services are not required to perform acts or procedures that infringe on their religious beliefs.
- Reject public financing for procedures prohibited by the *Ethical and Religious Directives for Catholic Health Care Services*, including abortion and euthanasia.



mous—about the fundamental goal at stake: ensuring that everyone in the United States can obtain high-quality, affordable health care. Now we need to bring along our nation's leadership.

### THE NATION WANTS CHANGE

CHA's most recent public opinion survey offers evidence that presidential candidates, members of Congress, and other national and state leaders need to listen closely to what the public is saying. Seven out of 10 respondents to the survey (71 percent) stated that they think the federal government should take financial responsibility to cover uninsured children, a result representing a 6 percent increase over that noted in a survey conducted a year ago.<sup>1</sup>

Another notable response gleaned from this year's survey was this: No domestic priority is more important than health care to likely voters—29 percent named health care as the one issue that should receive the most attention from government, followed by ensuring homeland security (22 percent) and reducing government spending and taxes (19 percent).

CHA's opinion research confirms other recent findings. In a CBS/*New York Times* poll conducted in February, 73 percent of respondents said the government should provide a national health insurance program for all children under the age of 18, even if doing so would require higher taxes.<sup>2</sup>

This level of support is nothing short of

astounding—people often express support for a measure but hesitate to see their taxes increase as a result of that support. The confirmed finding that so many Americans are willing to pay more in taxes for children to receive health care sends a message to lawmakers and other leaders that the public is solidly behind building a health care system that makes sense and reaches everyone.

Please take a few minutes to read the draft principles for health care reform (see **Box**, p. 9). Then, feel free to register your opinions about the draft—and share with us your suggested edits—by visiting [www.chausa.org/healthcarevision](http://www.chausa.org/healthcarevision).

CHA and the *Covering a Nation* staff believe that the momentum is now palpable. The public is behind real change, and the presidential campaign trail is filled with talk of a better health care system. To really get there, the voice of Catholic health care will have to be heard loudly, clearly, and as often as possible. With all of us working together, the ministry's "Vision for U.S. Health Care" will carry a consistent, powerful message. ■

### NOTES

1. The survey included responses from 800 likely voters nationwide, was conducted by telephone May 21-23, 2007, and has a margin of error of plus or minus 3.5 percent. The survey was conducted on CHA's behalf by Public Opinion Strategies, Alexandria, VA.
2. Robin Toner and Janet Elder, "Most Support U.S. Guarantee of Health Care," *New York Times*, March 2, 2007.

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