Health Reform that Respects Life: A Victory and A Challenge

By Richard M. Doerflinger

EDITOR’S NOTE: At press time, the U.S. Senate defeated the Nelson-Hatch-Casey amendment, similar to the Stupak-Pitts-Dahlkemper amendment in the House (54-45). Senator Casey (a sponsor of the amendment) voted yes, Senator Specter voted no. See back page for next steps for grassroots advocates.

On November 7, Congress gave many observers a big surprise. On a vote of 240 to 194, the House of Representatives approved an amendment to maintain longstanding policies against federal abortion funding in proposed health care reform legislation. What’s more, the House then passed an ambitious health care reform bill, and inclusion of the pro-life amendment was hailed as decisive in making its approval possible.

Two realities helped produce this result. First, there has long been a significant pro-life caucus in the Democratic party, and it has grown in the 2006 and 2008 elections. Pro-life Democrats, led by Rep. Bart Stupak (D-MI), united to insist that House leaders allow a vote on an amendment to fix the abortion problem in this bill.

The second reality is that one of the strongest voices for health care reform, the Catholic Church, has consistently urged that authentic reform must respect the life of all, including immigrants, the poor, and the unborn. The Church has credibility because of its clear moral teaching, its decades-long support for reform, its experience in running the largest nonprofit health care system in the nation, and its preferential love for the poor and vulnerable. The bishops supported the pro-life Democrats’ effort so much-needed reform would not become a vehicle for forcing more Americans to pay for abortions. When the effort succeeded, more members could support the bill.

Abortion advocates, stunned by this defeat, have put their “spin machine” into high gear. The legislative process was hijacked by the Catholic Church, they say, to pass an extreme amendment that goes far beyond current law and restricts private abortion coverage.

But what the Church did here, on a large scale, was what it always does: It raised facts and arguments to support an effort in Congress, led by members of Congress who have been consistent in their pro-life convictions. The amendment was introduced with the aim of striking a balance.

Pennsylvania Catholic Bishops’ Statement on Health Care Reform

Health care reform was discussed at a meeting of Pennsylvania’s Catholic Bishops on October 6, 2009. Together, they issue the following statement:

Our Catholic moral tradition teaches that every human being, from the moment of conception to natural death, has an innate dignity that entitles him or her to certain rights and protections. Included among these is the right to life and to have access to health care, which is essential to preserving human life and promoting human dignity. As the Catholic Bishops of Pennsylvania, we must frankly express our concerns that the health care reform proposals currently under review by the U.S. Congress do not yet guarantee these fundamental rights.

True health care reform must maintain longstanding public policies which restrict funding for abortion and respect the consciences of health care providers. The cost structures of the resulting plan must not impose excessive financial burdens on low and moderate-income individuals and families. Measures must be in place to safeguard the health of all of society, including the poor, the elderly, and immigrants. Legal immigrants and their family members must be...
the majority party, to improve legislation that directly impacts Catholic values — and it informed lay Catholics around the country so they could raise their voices as well.

Charges against the amendment itself are also misplaced. Exactly reflecting the Hyde amendment and other provisions that have long governed all other federal health programs, the Stupak amendment keeps federal funds from subsidizing elective abortions and health plans that include such abortions. Health plans using only private funds are not affected; even people who use federal subsidies to purchase their overall health plan may use their own money to purchase a supplemental abortion policy if they want to.

So the Stupak amendment simply ensures that when federal funds are used, Americans will not be forced against their will to pay for other people’s abortions. In a nation where most Americans do not want public funding of abortion, and do not want abortion in

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allowed timely access to comprehensive and affordable health care coverage and an adequate safety net must be maintained for those who remain uncovered.

The Catholic community of Pennsylvania can be a strong and reliable partner in advancing health care reform; but as faith leaders, we cannot and will not support or urge the Catholic faithful to support reform that violates the Church’s long held principles on life and dignity. We will work tirelessly to improve the legislation to reflect these essential priorities.

Health care is not just another issue for the Church or for a healthy society. It is a fundamental issue. Health care is a critical component of the Catholic Church’s ministry. Every year, Pennsylvania’s Catholic hospitals, nursing homes and home health agencies provide quality health care to millions. The Church itself is a major purchaser of health insurance for thousands of employees in our many agencies and institutions. In some cases, the Church is self-insured. The Catholic Church in Pennsylvania brings both strong convictions and everyday experience to the issue of health care reform.

This debate presents our country with a unique opportunity to improve the health care system for all, especially those who lack affordable coverage and decent care. We believe that health care reform legislation can be drafted to truly protect human life and dignity.

Catholics have been leading proponents of health care reform for many years in America. If a final health care reform bill does not have respect for life at all stages of development, respect for consciences, affordability and inclusion of all of society, the Bishops will be forced to oppose it. Therefore, we pray that critical shortcomings in the current proposals will be remedied.

See the back page for information about how to get involved in the health care reform debate.
The PCC supports the following legislation:

**Senate Bill 841**

**Public Eating & Drinking Place Law** - This bill includes a broad exemption that removes church kitchens and religious school cafeterias from the licensure and regulatory requirements under the Public Eating and Drinking Place Law.

**Social Concerns Department**

**House Bill 928**

**The Child Rapist and Predator Detection Act** - This bill would require healthcare practitioners treating a minor who is pregnant or has a sexually transmitted disease to determine if the child is less than 13 years of age. If the patient is less than 13, the practitioner would be required to make a report to the Child Predator Unit.

**Education Department**

**Senate Bill 899**

**EITC Amendments** - This bill amends the Educational Improvement Tax Credit (EITC) program to raise the income threshold for scholarship eligibility, institutes an annual cost of living adjustment, adopts an income qualifier for special needs children, and corrects timing issues for pass-through entity tax credit provisions. **NOTE:** This bill was passed into law in conjunction with the passage of the state budget in October.

**Pennsylvania Catholic Health Association**

**Senate Bill 1555**

**Drug & Alcohol Treatment & Prevention Fund** - This bill would provide needed funding for a continuum of services including prevention, treatment, intervention and care management for Medical Assistance and General Assistance-eligible individuals.

**House Bill 1804**

**Benevolent gesture in assisted living or personal care homes** - This bill would prohibit admissibility of any “benevolent gesture” or “admission of fault” made by a health care provider to an assisted living or personal care home patient or relative concerning a patient’s discomfort, pain and suffering, injury or death resulting from a medical treatment or procedure. Such expressions of sympathy or admissions of fault have been suggested as a means to curb medical malpractice actions and to display genuine sorrow for health care related problems. The bill would not prevent a plaintiff from pursuing a case of professional negligence based upon records or testimony.

**House Bill 1843**

**Benevolent gesture** - Similar to HB 1804, this bill would prohibit admissibility of any benevolent gesture made by an individual person who is a health care provider.

Thank you to these Pennsylvania Members of Congress who voted in favor of the Stupak-Pitts-Dahlkemper pro-life amendment to the health care reform bill in the House of Representatives.

**MEMBER OF CONGRESS**

- Jason Altmire (D)
- Christopher Carney (D)
- Kathy Dahlkemper (D)
- Charles Dent (R)
- Mike Doyle (D)
- James Gerlach (R)
- Tim Holden (D)
- Paul Kanjorski (D)
- Tim Murphy (R)
- John Murtha (D)
- Joe Pitts (R)
- Todd Platts (R)
- Bill Shuster (R)
- Glenn Thompson (R)

**DIOCESES**

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- Scranton, Harrisburg
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- Altoona/Johnstown, Greensburg, Pittsburgh
- Harrisburg, Allentown, Philadelphia
- Harrisburg
- Altoona/Johnstown, Greensburg, Erie, Harrisburg
- Erie, Altoona/Johnstown, Harrisburg, Scranton

*These members were co-sponsors of the Stupak-Pitts-Dahlkemper amendment and should be thanked particularly for their leadership.*
The House of Representatives passed a health care reform bill restricting public funding of abortion; but the Senate defeated a similar pro-life amendment. If they pass a bill without abortion restrictions, the two versions must be reconciled in a conference committee. Concerned citizens should visit, call, send a fax, write a letter or e-mail their Members of Congress urging them to:

- Exclude mandated coverage for abortion, and specifically incorporate longstanding policies against abortion funding and in favor of conscience rights. No one should be required to pay for or participate in abortion.

- Adopt measures that protect and improve people’s health care. Reform should make quality health care affordable and accessible to everyone, particularly those who are vulnerable and those who live at or near the poverty level.

- Include effective measures to safeguard the health of immigrants, their children and all of society. Ensure that legal immigrants and their family members have comprehensive, affordable, and timely access to health care coverage. Maintain an adequate safety net for those who remain uncovered.

Viewpoint is published by the Pennsylvania Catholic Conference, the public affairs agency of Pennsylvania’s Catholic bishops. For more information, contact Amy B. Hill, APR, editor, at (717) 238-9613 or email at abhill@pacatholic.org. Visit our website at www.pacatholic.org.