

SHORT COMMENT LTR
FOR CATHOLIC HOSPITAL CEOs, BOARD MEMBERS, MISSION LEADERS, etc.

September 26, 2011

Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-9992-IFC2
Room 445-G, Hubert H. Humphrey Building
200 Independence Avenue, SW
Washington, DC 20201

Re: Interim Final Rules defining Religious Employer Exception for Group Health Plans and Health Insurance Issuers Relating to Coverage of Preventive Services under the Patient Protection and Affordable Care Act, RIN 0938-AQ07

Dear Sir or Madam:

On behalf of CHRISTUS Health, I am writing to urge you to broaden the proposed definition of “religious employer” to ensure conscience protections that will allow us to continue our health ministry as Catholic employers.

Catholic health care has long worked to ensure that everyone has access to the health care they need. For this reason, we welcome the Administration’s decision to require health plans to cover women’s preventive services, such as critical screenings that will make preventive care more widely available and affordable. However, the inclusion in that mandate of contraceptive services that the Catholic Church finds morally objectionable, including sterilization and drugs that could cause an abortion, makes it imperative that the Final Rule include broader conscience protections. While the Interim Final Rule acknowledges the need for conscience protections, we are deeply concerned that the proposed religious exception falls far short of the level of protection needed.

The proposed definition of “religious employer” determines whether a religious organization qualifies for conscience protections, thereby exempting it from providing coverage of contraceptive services that are against its religious teaching. The proposed definition as written is narrower than any conscience clause ever enacted in federal law. As currently written, the definition of religious employer would not consider Catholic health care institutions—including Catholic hospitals and long-term care facilities—religious employers. This runs contrary to a 40-year history of federal conscience statutes have been in effect to protect individuals and organizations like ours from being required to participate in, pay for, or provide coverage for certain services that are contrary to our religious beliefs or moral convictions.

The proposed definition would require religious employers to “primarily serve persons who share its religious tenets.” For over 200 years, Catholic health care providers have

served the common good of our nation and its citizens by caring for persons of **all** ages, races and religions, in a manner consistent with our religious and moral convictions.

These convictions are the source of both the work we do and the limits on what we will do. 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 form the basis for our steadfast commitment to the compelling moral implications of our ministry—from insisting on the right of all to accessible, affordable health care, to caring for persons at the end of life, to defending and preserving the conscience rights of all, including but not limited to Catholic organizations.

The definition that has been proposed is not drawn from current federal law and is instead lifted from the narrowest state definition of a religious employer—found only in three states in the nation. I request that the definition be rewritten using the principles behind the “church plan” exemption found in section 414(e) of the Internal Revenue Code, which was developed specifically to avoid church-state entanglements in religious governance relative to pension, health and welfare plans offered by religious entities. This is the statute that should be used as a guide for determining the definition of a religious employer. Section 414(e) of Title 26 considers whether an organization or institution “shares common religious bonds and convictions with a church” when determining if the organization qualifies as a “religious employer.” This definition more adequately defines religious employers to include all employers that work in ministries of the church.

Our country has acknowledged and respected the rights of conscience since its founding, and our society's commitment to pluralism lies at the heart of our diverse and vibrant nation. I request that you broaden the definition of “religious employer” as described above and as specifically laid out in the comments of the Catholic Health Association of the United States.

Sincerely,

Amanda Hebert
Sr. Applications Analyst
CHRISTUS Health Information Management