

The line in the sand:

Religious liberty and health care

by Bob Laird

The Obama Administration has drawn a line in the sand, daring Catholics to practice their faith in the public square. There is little precedence for this attack on religious liberty. Previous Congresses and administrations always upheld the First Amendment non-interference of the government in the free practice of religion. Today, however, we are faced with an administration whose actions point toward removing any vestiges of religion in the public square. Its current directed attacks are specifically against the Catholic Church — unprovoked, but not unheeded.

The latest infringement on religious liberty occurred on Feb. 10, when the president unilaterally decided to end the debate over religious exemptions to his health care plan. With this new precedence in place, what is happening? In a Feb. 16 press conference, Anthony Picarello, Associate General Secretary of the United States Conference of Catholic Bishops (USCCB) delineated:

“We are now entering a new stage. It has gone from that which is allowed by the government, to that which is supported by the government, to that which is mandated by the government. The latter step is what makes it a religious liberty issue.”



Previous administrations always respected the rights of conscience in health care. The Obama Administration initiated the current problem by asking Congress to pass health care legislation but to leave the structure of the details for his Administration to work out. Previously, when Congress passed health care legislation, it provided the details of the implementation in the legislation. This time, the Obama Administration asked the Democratic Congress to pass a framework for health care...details to be worked out later. This is why then-Speaker Nancy Pelosi made her famous comment that we need to pass the health care legislation “so that we can see what is in it.”

Thus, the administration had a blank check in implementing a government health care system unless the prohibition was explicitly written into the legislation. For example, the Bart Stupak Amendment was designed to prevent the administration from using federal funds to pay for abortions. Had it passed, it would have prohibited the use of federal funds to pay for abortions. After President Obama convinced Stupak to pull this amendment from the final bill because he, the president, would take care of it via an executive order, there became no legislative protection prohibiting federal funding for abortion. This *carte blanche* authority given to the Executive

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Branch opened the door for Planned Parenthood’s influence on the administration to reach new heights.

One provision of the bill was that the Secretary of Health and Human Services (HHS), Kathleen Sebelius, would determine what constituted preventative services, and such services would be provided at no direct cost to the user. HHS carried out its mandate by asking the Institute of Medicine (IOM) to convene a panel of experts to determine what preventative services entailed. I attended one of the public hearings. It was clear¹ that the board, because of its composition, was choreographed to reach a pre-determined conclusion. The invited speakers were all affiliated with Planned Parenthood or the National Abortion Rights Action League (NARAL) Pro-Choice America. Most significantly, though, there was no representation of the largest health care provider in the U.S.: the Catholic Church. The IOM recommendation 5.5 stated:

“Women will have access to all Food and Drug Administration-approved contraceptive methods, sterilization procedures, and patient education and counseling.”

Deirdre McQuade of the USCCB was permitted to make a statement during the public comment period. Her argument appeared in the summary of the USCCB comments of the HHS Interim Final Rules:

“The Department of Health and Human Services should not require coverage of contraception or sterilization in group or individual health plans as part of ‘preventative services.’ These drugs, devices and procedures prevent not a disease condition, but the healthy condition known as fertility; they

pose significant risks of their own to women’s life and health; and a federal program to mandate their inclusion would pose an unprecedented threat to rights of conscience.”

This comment from the USCCB links the requirements for preventative services to the issue of religious liberty. If the Obama Administration can require a religious organization to provide services clearly against its religious beliefs, it can also infringe on the rights of religious individuals or organizations in other ways, for example with regard to free speech. This precedent will in effect void the First Amendment. Textbooks in Catholic schools could be censored for content. There would be nothing to prohibit the administration from forbidding the discussion of transubstantiation, for example, from occurring. If one thinks that such actions are not plausible, one merely needs to look north to Canada, where current Canadian law makes it a hate crime to speak in a public place against homosexuality. The issue now is not so much contraception or sterilization but primarily religious freedom and the First Amendment of the Constitution. If the mandate stays in place, the result could be the end of Catholic charities, Catholic hospitals and Catholic schools in the United States.

The president of the USCCB, Cardinal Timothy Dolan, asked for and was granted a meeting with the president to discuss this issue in November. During the meeting, the president stated that he would try to work something out.

Finally, on Feb. 10, the president offered a veiled olive branch to the Catholic Church by insisting that Churches would not have to pay for the services they deem to be immoral but that the insured would be reimbursed directly from the insurance carrier. The problem is that Catholic organizations pay their health insurance premiums to insurance companies, and those premiums would include payments for the immoral services. Additionally, many Catholic dioceses and other large organizations are self insured. Thus, they are the insurance company.

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Cardinal Dolan is not finished. He wrote to his fellow bishops on March 2, telling them that “religious freedom is under attack, and we will not cease our struggle to protect it.” He further stated, “We did not ask for this fight, but we will not run from it.” While we do not know

¹ See www.thepublicdiscourse.com/2011/09/4031



the next step for the USCCB, we do expect that the HHS mandate will be challenged in the courts. When questioned about this option, Mr. Picarello said, “nothing is off the table.”

What can friends of CCL do to protect religious liberty?

1. **Pray for the president** that he will relent and uphold the First Amendment of the U.S. Constitution as it pertains to religious liberty.
2. **Stay abreast with federal legislation** to protect religious liberties and the rights of individuals, particularly in the medical profession, to work in accordance with their consciences.
3. **Talk to your children about religious liberty** and what is happening to it in the United States. The conversation must begin for a massive conversion of hearts and minds.
4. **Start one-on-one conversations** with individuals (many of whom are Catholic) who may not understand or who may disagree with these arguments. Use the talking points on CCL’s blog, artofnfp.org.
5. **Promote NFP classes in your area.** In some areas, there has been a glut of couples wanting to attend NFP

classes, but all of the classes are full. Learn to be an NFP Teaching Couple.

An opportunity for changing Congress and the administration comes in November by defeating individuals who refuse to recognize the cherished freedoms that we uphold as Americans. The president has surrounded himself with “Catholics” who do not accept Catholic moral teachings, and yet they claim to represent a majority of Catholics. These individuals recently advised the USCCB staff that they should “listen to the ‘enlightened’ voices of accommodation,” as if the Catholic teachings on religious liberty and marital chastity are something that is negotiated across a table.

Against this backdrop, we must make our voices heard by evangelizing firmly and clearly about the beauty of the Church teachings on marital chastity and confidently offer NFP as the alternative to contraception, sterilization, and abortion-inducing drugs.

The current situation is grave. We need to defend the Church and reclaim the culture immediately before religious freedom in America becomes a thing of the past.

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