## THE DIOCESE OF CHARLESTON

## February 20, 2013

Dear Brothers and Sisters in Christ,

To be Christian means that we are concerned about the wellbeing and health of all people. God took on flesh to restore the integrity of broken and wounded humanity. Indeed, Jesus made healing of the sick central to his ministry. "He came to the world to make us fully human, to help us to realize our human dignity as creatures made in the image of God. He came to bring the fullness of life" (USCCB Pastoral Letter: *Health and Health Care*, Nov. 19, 1981).

Throughout the centuries, the Church has carried on the ministry of Jesus by establishing hospitals and nurturing the apostolate to the sick in response to the needs of suffering people. Pope John XXIII included medical care as a basic right founded on the sanctity of human life in his encyclical, *Pacem in Terris*. Reaffirming this traditional concern for today, Pope Benedict XVI wrote that "Health is a precious good for the person and society to promote, conserve and protect, dedicating the means, resources and energies necessary so that more persons can enjoy it. Unfortunately, the problem still remains today of many populations of the world that do not have access to the necessary resources to satisfy fundamental needs, particularly in regard to health. It is necessary to work with greater commitment at all levels so that the right to health is rendered effective, favoring access to primary health care" (Benedict XVI: *Message to the Pontifical Council for Health Care Ministry*, Nov. 18, 2010).

The Catholic Bishops of the United States have consistently called for access to health care for all our citizens: "Our approach to health care is shaped by a simple but fundamental principle: 'Every person has a right to adequate health care. This right flows from the sanctity of human life and the dignity that belongs to all human persons, who are made in the image of God.' Health care is more than a commodity; it is a basic human right, an essential safeguard of human life and dignity" (USCCB Resolution: *A Framework for Comprehensive Health Care Reform*, June 18, 1993). While the Church's call for access to health care reflects an application of the Gospel to a contemporary need and therefore reflects the urgency of the Gospel, determining how to implement such access is open to prudential judgments of how to make it happen most effectively. We must continually discern wise solutions to the challenges we face, solutions that are both economically and politically viable. In that task of discernment, however, we as Catholics bring time-honored principles of Catholic social teaching to inform our reflection.

The Patient Protection and Affordable Care Act (PPACA) now being legally enacted in our country is an attempt to bring health care access to a broader range of citizenry in the United States. It is not perfect. In fact, the U.S. Catholic Church is deeply concerned about mandates associated with aspects of the law that would require religious institutions to provide contraception coverage, asking us to violate a consistent position by the Church on this. There

are also many concerns about how to rein in the costs of health care so that its expansion is affordable to our country. However, providing access to health care *is* consonant with Catholic social teaching. Indeed, it is more than consonant — it is called for by Catholic social teaching.

This spring, our South Carolina state legislature will consider whether to opt into the expansion of Medicaid as provided for by the Affordable Care Act. Persons eligible for Medicaid would be expanded by about three hundred thirty thousand more South Carolinians who live near the poverty line but previously have not been eligible. Key state-wide elected leaders and many in the General Assembly have voiced their opposition to this expansion. Leaders of our state's hospitals, including Catholic hospitals, on the other hand, have endorsed this legislation. It will expand their ability not only to serve the poor of our state but to pay for those services. The State of South Carolina would be required to pay for ten percent of the total cost of this expansion after three years of full funding by the Federal Government. This will require us as a state to find the revenue to pay for this expansion. It will cost us.

Bearing a cost for the sake of something greater is the heart of our faith; it brought us salvation. At the same time, we can and must make this expansion and our whole healthcare system more effective and economically viable. If health care funding as envisioned by the Affordable Care Act is not perfect, we nevertheless are not powerless as a society to refine and make it more effective even as we implement it.

I write as your Bishop in noting the call of Catholic social teaching, and I appeal as a fellow citizen in making a case for acceptance of Medicaid expansion by our state. I urge my fellow Catholics to study this issue and form your own prudential judgment on its wisdom. However, I ask that you start that evaluation with a presumption in favor of what the Church says is a good to be pursued in society, namely, the flourishing of all people through access to health care. Hold as well our faith conviction that shared sacrifice for a greater good and concern for the poor make us more like Christ. Make your views known to your legislators. For my part, I believe Medicaid expansion offers a step forward for South Carolina.

In the Lord's Peace,

+ Robert & Lan Cielmone

Most Reverend Robert E. Guglielmone

Bishop of Charleston