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Pro-Life Chair Welcomes HHS Exclusion of Abortion from Federal Insurance Program, Calls For Permanent Law

WASHINGTON— Following public criticisms of new federally-funded health insurance plans that would have covered elective abortions in Pennsylvania and New Mexico, the Department of Health and Human Services (HHS) issued a statement that the agency will act to exclude abortion from this program. Cardinal Daniel DiNardo of Galveston-Houston, chairman of the U.S. Catholic bishops' Committee on Pro-Life Activities, welcomed the statement as averting an "alarming precedent" and called for permanent law to exclude abortion from all programs under the new Patient Protection and Affordable Care Act (PPACA).

"We welcome this new policy," the Cardinal said, "while continuing to be gravely concerned that it was not issued until after some states had announced that pro-abortion health plans were approved and had begun to enroll patients."

"This situation illustrates once again the need for Congress to enact legislation clearly stating once and for all that funds appropriated by PPACA will not pay for abortions or for insurance coverage that includes abortion," Cardinal DiNardo said. "The issue of government involvement in the taking of innocent human life should not remain subject to the changeable discretion of executive officials or depend on the continued vigilance of pro-life advocates."

"It is vitally important for people with serious medical conditions who have been unable to obtain coverage to receive the help offered by programs such as this – and for them to be assured that their coverage will be life-affirming, not life-threatening," the Cardinal concluded.

The full text of his statement follows:

This week it was reported that the U.S. Department of Health and Human Services (HHS) had approved a new high-risk health insurance program for residents of Pennsylvania that by its terms would cover abortions without meaningful limits. This federal program, established by the new Patient Protection and Affordable Care Act (PPACA), will provide health services until 2014 to uninsured persons with pre-existing conditions. The Pennsylvania plan, while purporting not to fund "elective" abortions, made clear in its text that all abortions that satisfy the requirements of certain Pennsylvania statutes (i.e., all abortions that are not illegal in that state) would be covered, and reimbursed, with a combination of private premiums and federal funds drawn from the U.S. Treasury. This first announcement that \$160 million in federal funds would be used to provide pro-abortion coverage raised an alarming precedent. Later the news also became public that the state of New Mexico would be covering "elective abortions" in its federal high-risk pool, which was already accepting enrollees.

Last night, however, HHS reacted to public criticisms by announcing that it will act to exclude abortion from this federally funded program, in accord with the assurances that Secretary Sebelius and President Obama have repeatedly made that PPACA will not be used to promote abortion. We welcome this new policy, while continuing to be gravely concerned that it was not issued until after some states had announced that pro-abortion health plans were approved and had begun to enroll patients. This situation illustrates once again the need for Congress to enact legislation clearly stating once and for all that funds appropriated by PPACA will not pay for abortions or for insurance coverage that includes abortion. Such legislation would mirror the Hyde amendment and similar provisions which prevent such abortion funding in all other federal health programs.

In this program as in others, the issue of government involvement in the taking of innocent human life should not remain subject to the changeable discretion of executive officials or depend on the continued vigilance of pro-life advocates. It is vitally important for people with serious medical conditions who have been unable to obtain coverage to receive the help offered by programs such as this – and for them to be assured that their coverage will be life-affirming, not life-threatening.

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