RESOLUTION 4

TO: The 182nd Annual Convention of the Diocese of Kentucky
FROM: The Peace and Justice Division of the Department of Justice & Jubilee
SUBJECT: In Support of the 2009 General Convention Resolutions on Health Care

WHEREAS, the 2009 General Convention adopted Resolutions C071, "Health Care Coverage for All", and D048, "Adoption of a 'Single Payer' Universal Health Care Program", calling upon its congregations to discuss the issue of health care coverage in the United States and to aid their members in contacting elected federal and state officials encouraging them to consider the current state of health care in the United States and to "establish a system to provide basic healthcare to all"; and

WHEREAS, the Diocese of Kentucky, in 2009, adopted a Resolution, entitled "Universal Access to Health Care", decrying the "inequitable system" of health care in the United States and encouraging parishes and individuals to call upon elected officials to "devise a system of universal, affordable access, incorporating the most efficient use of resources for the benefit of people in the United States"; therefore be it

RESOLVED, the Diocese of Kentucky express support for the Church's efforts to seek improved health care in the United States by adopting Resolution C071, "Health Care Coverage for All" and Resolution D048, "Adoption of a 'Single Payer' Universal Health Care Program" adopted by the 76th Convention of the Episcopal Church, 2009; and be it further

RESOLVED, the Diocese call upon the Peace and Justice Division of the Department of Justice and Jubilee to undertake to provide information to the congregations in the Diocese on the issue of health care coverage in the United States, to encourage members to contact elected federal and state officials to urge them thoughtfully to consider the current state of health care in the United States and create a system to provide health care to all as provided in Resolutions C071 and D048.

General Conventions resolution:

Resolution: **C071**
Title: **Health Care Coverage for All**

Resolved, the House of Bishops concurring, That the 76th General Convention call on its congregations to undertake discussions within the parish of the issue of health care coverage in the United States, including:

a) recognition that health is multi-dimensional, with spiritual, social, environmental, and mental elements as well as physical,

b) reminder of personal responsibility for healthy life choices and concern for maintaining one's own health,

c) proclaiming the Gospel message of concern for others which extends to concern for their physical health as well as spiritual well-being,

d) responsibility as a parish to attend to the needs (including health-related needs) of others, both other members of the parish family and those of the wider community, the nation, and the world,

e) recognition that there are limits to what the healthcare system can and should provide and thus that some uncomfortable and difficult choices may have to be made if we are to limit healthcare costs; and be it further

Resolved, That, The Episcopal Church urge its members to contact elected federal, state and territorial officials encouraging them to:

a) create, with the assistance of experts in related fields, a comprehensive definition of "basic healthcare" to which our nation's citizens have a right,

b) establish a system to provide basic healthcare to all,

c) create an oversight mechanism, separate from the immediate political arena, to audit the delivery of that "basic healthcare,"

d) educate our citizens in the need for limitations on what each person can be expected to receive in the way of medical care under a universal coverage program in order to make the program sustainable financially,

e) educate our citizens in the role of personal responsibility in promoting good health; and be it further,

Resolved, That this resolution be distributed to all Provinces and dioceses of The Episcopal Church for their consideration and support.

Resolution: **D048**
Title: **Adoption of a "Single Payer" Universal Health Care Program**

Resolved, the House of Bishops concurring, That the 76th Convention of the Episcopal Church urge passage of federal legislation establishing a "single payer" universal health care program which would provide health care coverage for all of the people of the United States; and be it further

Resolved, That the General Convention direct the Office of Government Relations to assess, negotiate, and deliberate the range of proposed federal health care policy options in the effort to reach the goal of universal health care coverage, and to pursue short-term, incremental, innovative, and creative approaches to universal health care until a "single payer" universal health care program is established; and be it further

Resolved, That the Episcopal Church shall work with other people of good will to finally and concretely realize the goal of universal health care coverage; and be it further

Resolved, That church members and the Office of Government Relations communicate the position of the Episcopal Church on this issue to the President and Members of Congress, and advocate passage of legislation consistent with this resolution.

EXPLANATION

The Episcopal Church, along with several other denominations in the National Council of Churches, previously called upon the Congress and the President to ensure universal access to health care for all people in the United States by the end of 2006.

That deadline has now passed, and the situation is worse than ever. More than 47 million people in the U. S. are currently without health insurance, more than 75 million went without for some length of time within the last two years, and millions more have inadequate coverage or are at risk of losing coverage. People of color, immigrants and women are denied care at disproportionate rates, while the elderly and many others must choose between necessities and life sustaining drugs and care. Unorganized workers have either no or inadequate coverage. The Institute of Medicine has found that each year more than 18,000 in the U. S. die because they had no health insurance.

While we in the United States spend more than twice as much of our gross domestic product as other developed nations on health care ($7,129 per capita), we remain the only industrialized country without universal coverage, and the United States performs poorly in comparison on major health indicators such as life expectancy, infant mortality and immunization rates.

Almost one-third (31 percent) of the money spent on health care in the United States goes to administrative costs. Single-payer financing is the best way to recapture this wasted money. The potential savings on paperwork, more than $350 billion per year, are enough to provide comprehensive coverage to everyone without paying any more than we already do.

Under a single-payer system, all Americans would be covered for all medically necessary services, including: doctor, hospital, long-term care, mental health, dental, vision, prescription drug and medical supply costs. Patients would regain free choice of doctor and hospital, and doctors would regain autonomy over patient care.

Physicians would be paid fee-for-service according to a negotiated formulary or receive salary from a hospital or nonprofit HMO / group practice. Hospitals would receive a global budget for operating expenses. Health facilities and expensive equipment purchases would be managed by regional health planning boards.

A single-payer system would be financed by eliminating private insurers and recapturing their administrative waste. Modest new taxes would replace premiums and out-of-pocket payments currently paid by individuals and business. Costs would be controlled through negotiated fees, global budgeting and bulk purchasing.