



Michigan National Organization for Women

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Representative Pam Byrnes, Chair
Public Employee Health Care Reform Committee
251 Capitol Building
Lansing, Michigan

Dear Representative Byrnes and Members of the Committee:

Re: HB 5345

Michigan NOW has reviewed HB 5345 and finds an omission that we would like addressed.

That is, we would like to see a clause in the bill which would limit the power of the Board created in the bill to adopt the viewpoint of one or more religions and mandate or ban a health care benefit coverage or treatment for all public employees, retirees, and their eligible dependents based on that viewpoint. This clause should also require the Board to provide options that respond to the diversity of religious viewpoints about health care matters.

Everyone in Michigan contributes their taxes to public employee benefits, the public employee earns the benefit by working in the public sector, and the Board created in the bill should not be allowed to impose religious viewpoints on public employee health care to ban or mandate benefits coverage. We believe public employees should have the same religious freedom rights as all others in Michigan when deciding personal medical matters. This would be consistent with Michigan Constitution, Article I, Section 2 which provides:

No person shall be denied the equal protection of the laws; nor shall any person be denied the enjoyment of his civil or political rights or be discriminated against in the exercise thereof because of religion, . . .

An example of our concern is that the U.S. Conference of Catholic Bishops recently adopted an amendment to their *Ethical and Religious Directives for Catholic Health Care Services* concerning withdrawal of food and water during end-of-life care in hospitals or facilities they control. It clarified that patients with chronic conditions who are not imminently dying should receive food and water by "medically assisted" means if they cannot take them normally. "This obligation extends to patients in chronic and presumably irreversible conditions (e.g., the 'persistent vegetative state') who can reasonably be expected to live indefinitely if given such care," the new text adds. The new text also deletes a reference to hydration and nutrition not being morally obligatory "when they cannot be assimilated by a person's body."

NOW's purpose is to take action to bring women into full participation in the mainstream of American society now, exercising all privileges and responsibilities thereof in truly equal partnership with men.

Michigan NOW's Comments on HB 5345

Michigan law permits living wills and advanced directives concerning end-of-life care and choices. We don't think Board members with a health care agenda consistent with the U.S. Conference of Catholic Bishops *Ethical and Religious Directives for Catholic Health Care Services* should be allowed to impose their religious doctrine on all in the public health care plans by requiring or giving health care providers incentives to impose medically assisted food and hydration for those determined to be in a persistent vegetative state who might have personal advanced directives refusing that treatment. Nor do we think Board members with a health care agenda consistent with other aspects of the USCCB's *Directives* should impose their viewpoint on the nearly 2 million potential recipients of public employee, retiree and eligible dependents' health insurance by banning or giving health care providers incentives to discourage other medical procedures. Other organized religions may have established health care policy that the USCCB and its adherents would find offensive. All must be accommodated; choices must be provided in any public health care insurance reform.

The Board established in this act should be neutral on religiously influenced policy about health care matters and prohibited from interfering with either statutorily or constitutionally protected private medical decisions that an individual public employee, retiree, or dependent might make concerning their health care by mandating procedures or banning insurance coverage for procedures. She should be as free as any other Michigan resident with health insurance to decide with her medical advisers how to use her health care benefit.

Further, in its range of health plans developed for public employees, it should be required to offer options that would satisfy the diversity of religious beliefs concerning medical care and treatments rather than only providing options that ban or mandate coverage based on either a majority or minority religious viewpoint.

The National Organization for Women (NOW) is the largest, most comprehensive multi-issue feminist advocacy group in the United States. Our purpose is to take action to bring women into full participation in society — sharing equal rights, responsibilities and opportunities with men, while living free from discrimination.

Thank you for the opportunity to comment.

Mary Pollock
Legislative Vice President