

Virtual Mentor

American Medical Association Journal of Ethics
August 2011, Volume 13, Number 8: 569-570.

HISTORY OF MEDICINE

Catholic Hospitals and the Safety Net

Marcy Doderer

The tradition of Catholic hospitals is a long one, stretching back to medieval Europe and beyond. Hospitals run by religious orders were among the first in the United States. Catholic hospitals, because of their mission and their preferential treatment of the poor, are a significant, even essential part of today's health care safety net.

Catholic facilities operate in all 50 states, employ more than 750,000 people, and provide acute care, skilled nursing, hospice, home health, assisted living, and senior housing services. According to the Catholic Health Association, Catholic hospitals account for approximately 13 percent of all hospitals in the United States and deliver care to one in six patients hospitalized in the United States each year. This translates into nearly 19 million emergency room visits and over 5.6 million hospital admissions a year. In addition, with more than one-third of Catholic hospitals located in rural or underserved areas, many Catholic facilities often provide a higher percentage of public health and specialty services—such as psychiatric services, dental care, crisis prevention, and cancer screening—than other hospitals [1].

The role of Catholic hospitals in their particular communities varies widely according to the needs and the configuration of the local health system. It can be said in general, however, that Catholic hospitals provide a great deal of free or poorly compensated inpatient care and primary care services through clinics and medical outreach programs for the uninsured. Often, Catholic hospitals become known as a “provider of last resort” for uninsured and underinsured citizens [2]. This leads to a continual balancing act, as the hospitals strive to meet their missions while remaining financially viable.

The role Catholic hospitals play in providing care for underserved populations is illustrated by San Antonio-based CHRISTUS Santa Rosa Health System, a member of CHRISTUS Health and the only nonprofit, nongovernmental health system in the area. Founded by the Sisters of Charity of the Incarnate Word of San Antonio in 1869, with a special concern for the underserved, CHRISTUS Santa Rosa now comprises four adult community hospitals and one academic children's hospital that treat large numbers of disadvantaged patients. At the Children's Hospital, more than 80 percent of the patients are either on Medicaid or uninsured. In 2010, CHRISTUS Santa Rosa Health System provided more than \$33.9 million worth of uncompensated care.

CHRISTUS also works to improve community health through outreach efforts. The health system operates mobile mammography and pediatric clinics and school-based clinics and supports other primary care services with both financial and human resources to improve access to care. In addition, CHRISTUS leaders actively participate in a wide variety of advocacy and collaborative efforts at the local, state, and federal levels to impact public policy decisions regarding health care. In 2010, the system directed more than \$28.7 million to programs like those described above aimed at improving access to care in the San Antonio community. Like many Catholic hospitals, CHRISTUS faces a growing number of uninsured or underinsured patients, declining payment rates, and escalating costs.

The Catholic Health Association envisions a health care system in which unequal access to care is no longer a burden the poor must bear. Ultimately, leaders in Catholic health care hope to influence public policy so that the limited federal and state dollars can most profoundly impact the health care needs of the nation's most vulnerable citizens.

Though the ideals are high, Catholic hospitals fully recognize that resources are not endless and sustainable systems are needed to improve the health of our nation. Catholic hospitals will continue to serve their communities through the preferential option for the poor, the vulnerable, and the underserved and also spur change to improve the health care delivery system for all.

References

1. Catholic Health Association. Catholic healthcare in the United States; 2011. <http://www.chausa.org/WorkArea/linkit.aspx?LinkIdentifier=id&ItemID=2147489259>. Accessed July 19, 2011.
2. Shields AE, O'Brien E, Gaskin DJ. *A Commitment to Caring: The Role of Catholic Hospitals in the Health Care Safety Net*. Washington, DC: Catholic Health Association of the United States; 2002: ii.

Marcy Doderer is the vice president and administrator for CHRISTUS Santa Rosa Children's Hospital in San Antonio, Texas. She has been with CHRISTUS for almost 10 years and is a board member for the National Association of Children's Hospitals and the Children's Hospital Association of Texas.

Related in VM

[Roman Catholic Ethics and the Preferential Option for the Poor](#), May 2007

[Understanding the Ethical Framework for Catholic Health Care](#), May 2007

The viewpoints expressed on this site are those of the authors and do not necessarily reflect the views and policies of the AMA.

Copyright 2011 American Medical Association. All rights reserved.