



Fact Sheet: Religious Restrictions on University of California Health Care

UC Health—the umbrella entity that oversees the University of California’s health systems and health professional schools—is the fourth largest health care provider in California and the training ground for half of the state’s medical students and residents. The University of California is also a public entity, and it is specifically required by the California Constitution to be free of religious influence.

But UC has entered into contracts that impose religion on UC health care, tying the hands of UC clinicians and prohibiting them from providing evidence-based health care to patients. These contracts place UC providers, students, and patients in Catholic hospitals where care is dictated by religious doctrine. Catholic hospital rules result in harmful and discriminatory denials of reproductive and LGBTQ-inclusive care to patients.

In May 2020, the UC Regents will adopt guidelines for UC health system contracts, following the release of a [report](#) by the [UC Working Group on Comprehensive Access](#) in January 2020. The report includes two options, one supported by UC Health leadership and another by UC faculty members on the working group who believe that UC’s values and policies stand in opposition to contracting with discriminatory entities. The Regents will adopt one of these options or something in between.

Why Is it Problematic to Place UC Providers and Patients in Catholic Hospitals?

Catholic health systems such as Dignity Health and St. Joseph Health impose religious directives issued by the U.S. Conference of Catholic Bishops on all personnel in Catholic hospitals. The religious directives explicitly prohibit clinicians in these hospitals from providing, discussing, or even referring for basic reproductive health services, including contraception, sterilization, and abortion. The religious directives characterize these procedures as “intrinsically evil.” Patients in Catholic hospitals are regularly denied access to this care, even urgent treatment for miscarriage and ectopic pregnancy.

Catholic bishops also deny the existence of transgender people and prohibit them from receiving gender-affirming care in Catholic hospitals. A California court ruled in 2019 that Evan Minton was discriminated against when a Dignity Health hospital canceled his gender-affirming hysterectomy, even though the hospital provides hysterectomies to cisgender patients.

What Should UC Do?

- **UC Must Draw a Clear Line on Religious Restrictions:** Despite UC arguments that providers and students placed in Catholic hospitals won’t be restricted by religion, contracts for every UC medical center tell a different story. Not only do they require UC clinicians to abide by the religious rules, some even include a list of “prohibited procedures” spelling out the restrictions on reproductive, LGBTQ-inclusive, and end-of-life care. **Now, UC needs to draw what should be an obvious, fundamental line: UC, a public entity, must never limit its health care based on religious doctrine.**
- **UC Must Take a Stand on Non-Discrimination in its Contracts:** Prohibiting reproductive and LGBTQ-inclusive health care is discriminatory. Any contract between UC and another hospital should affirmatively state that hospital policies prohibiting gender-affirming services for transgender people—or reproductive health services that disproportionately affect women and LGBTQ people—are in violation of UC’s non-discrimination policy.

Why Doesn't the UC Health Proposal—"Option 1"—Solve the Problem?

- **"Option 1" Does Not Draw a Clear Line on Religious Restrictions.** "Option 1" does not require that contracts with outside health systems affirmatively state that religious directives will not apply to UC providers and students—language "Option 1" rejected. Instead, under "Option 1," contracts could state that UC providers and students must follow hospital policy. Since the religious directives *are* Catholic hospital policy, "Option 1" does not change the status quo.
- **"Option 1" Does Not Take a Stand on Non-Discrimination in its Contracts:** "Option 1" also rejected language that hospital policies prohibiting gender-affirming services for transgender people or reproductive health services violate UC's non-discrimination policy.
- **"Option 1" Imposes Religious Restriction on Care and Requires Discrimination:** "Option 1" suggests that UC providers and patients will be able to provide UC-quality care in Catholic hospitals because they can make clinical decisions on site and then provide treatment at another hospital. But this is simply agreeing to limit UC providers' care when they are working in Catholic hospitals. For example, a UC physician meeting a patient in a Catholic hospital could determine that the patient needs an IUD, but the physician could not talk about the IUD or implant the IUD in the Catholic hospital. UC physicians also would not be able to discuss or provide gender-affirming care to transgender patients in Catholic hospitals—exactly what happened to Evan Minton.

Setting the Record Straight

- **Under-served Communities Need Access to Comprehensive Care, Not Restricted Care:** UC Health portrays "Option 1" as necessary for UC to expand access to care to under-served communities. But why is UC Health resistant to reaching these communities in ways that don't involve restricting access to care? Patients of color, low-income patients, and others who experience health disparities and systemic barriers to health care access are most in need of quality, comprehensive care.
- **Religious Restrictions Impact All Aspects of Care:** UC Health portrays opponents to "Option 1" as "single-issue" activists. But the Catholic religious directives affect patient care across a wide spectrum of services, including mental health, primary care, cancer care, and cardiology. For example, UC providers in Catholic hospitals would be limited from providing a pregnant patient who has cancer or a transgender patient who has mental health concerns with evidence-based care they may need.
- **This is About UC-Provided Health Care, Not Employee Benefits:** UC Health says a vote against "Option 1" would somehow limit UC employee benefits. But prohibiting contracts that require UC providers and students to follow religious directives would have no impact on where those or other UC employees can access care.

Take Action!

- **Sign the Petition from UC Campus Leaders:** Demand accountability from UC! Follow the link here: <http://bit.ly/ProtectUCHealthCare>.
- **Speak Up at the May 20-21, 2020 UC Regents Meeting in San Francisco:** Public comments are critical for ensuring that your voices are heard. The UC Regents will hear a presentation on the WGCA report and make their final decision during this meeting! Sign up here: <http://bit.ly/UC-RSVP>.