**What is the Human Right to Health and Health Care?**

The human right to health means that everyone has the right to the highest attainable standard of physical and mental health, which includes access to all medical services, sanitation, adequate food, decent housing, healthy working conditions, and a clean environment.

The human right to health guarantees a system of health protection for all.

Everyone has the right to the health care they need, and to living conditions that enable us to be healthy, such as adequate food, housing, and a healthy environment.

Health care must be provided as a public good for all, financed publicly and equitably.

The human right to health care means that hospitals, clinics, medicines, and doctors’ services must be accessible, available, acceptable, and of good quality for everyone, on an equitable basis, where and when needed.

The reforms resulting from the Affordable Care Act (ACA) over the past 6 years have led to increases in health care coverage. There is broad consensus that an estimated 20 million to 22 million individuals have obtained health care insurance since 2010 primarily through the expansion of Medicaid, coverage through parents’ policies for young adults until age 26 years, and the health care exchanges. But that leaves more than 25 million US residents without health insurance.

Is the United States a just and fair society if so many individuals lack health care coverage?

The United States guarantees all citizens an education, access to fire and police services, a national postal service, protection by the military, a national park system, and many other federal- and state-funded services. But the country has not yet committed to ensuring that all of its citizens have health care coverage.

The months and years ahead are filled with uncertainty regarding how the US health care system will evolve.

* Will block granting Medicaid lead to a 2-tiered health care system and reduced access, or will it improve quality and reduce the increase in health care costs?
* If health savings accounts and tax credits replace the individual mandate, will individuals purchase health insurance?
* Will selling health insurance across state lines truly increase competition and reduce cost, or will it adversely affect the right of states to decide what represents adequate care for their citizens, lead to fewer health care networks with less competition rather than more, and create confusion for individuals who will not understand how such an insurance plan works in their state?
* Will a pool of dollars to ensure coverage of those with preexisting medical conditions be sufficient, or will these individuals once again be “uninsurable”?
* Will the various changes being discussed destabilize the commercial insurance market, leading to higher costs and less coverage particularly for those with preexisting health care conditions?
* Will these reforms solve the problem of increasingly oppressive cost of care for the working and middle classes and small businesses?

The ACA needs to be modified, even though it has accomplished a great deal, principally by expanding the number of newly insured individuals. However, much remains to be accomplished, including how to ensure high-quality, affordable health insurance for all residents and how to control the continual increases in annual health care spending; now exceeding $3 trillion.

Whether the proposals currently being discussed will help the United States reach these goals is uncertain, and as with the ACA, measuring outcomes will be important. Sorting out the most effective way to provide health care coverage in the United States is a work in progress and will require careful assessment and likely repeated changes. If the goals of further health care reform are clear and are measured but are not reached, then it will be necessary to return to previous discussions that have included a public option, a single-payer system, lowering the eligibility for Medicare, or further privatization of the health care system.

Hopefully all physicians, including those who are members of Congress, other health care professionals, and professional societies would speak with a single voice and say that health care is a basic right for every person, and not a privilege to be available and affordable only for a majority.

The solution for how to achieve health care coverage for all may be uniquely American, but it is an exceedingly important and worthy goal, emblematic of a fair and just society.

# Sample Letter To Congress Regarding Health Care Policy

Date:

United States Senate / United States House of Representatives  
Washington, DC 20510 / 20515

Dear Senator / Representative:

Health care is a vital concern for nearly every person in the country.  Discussions on health care reform have reached a level of intensity which is making open and fruitful dialogue difficult, even while most people recognize that improvements to the health care system are needed to ensure a life-giving and sustainable model for both the present and future.  Given the magnitude and importance of the task before us, we call for a new spirit of cooperation for the sake of the common good.

We ask that you consider and honor the following moral criteria as you debate health care policy in the days ahead:

***Universal Access:***Access to health care must be universal, guaranteed for all on an equitable basis. Health care must be affordable and comprehensive for everyone, and physically accessible where and when needed.

***Availability***: Adequate health care infrastructure (hospitals, community health facilities, trained health care professionals), goods (drugs, equipment), and services (primary care, mental health) must be available in all geographical areas and to all communities.

***Acceptability and Dignity***: Health care institutions and providers must respect dignity, provide culturally appropriate care, be responsive to needs based on gender, age, culture, language, and different ways of life and abilities. They must respect medical ethics and protect confidentiality.

***Quality***: All health care must be medically appropriate and of good quality, guided by quality standards and control mechanisms, and provided in a timely, safe, and patient-centered manner.

The human right to health also entails the following *procedural principles*, which apply to all human rights:

***Non-Discrimination***: Health care must be accessible and provided without discrimination (in intent or effect) based on health status, race, ethnicity, age, sex, sexuality, disability, language, religion, national origin, income, or social status.

***Transparency***: Health information must be easily accessible for everyone, enabling people to protect their health and claim quality health services. Institutions that organize, finance or deliver health care must operate in a transparent way.

***Participation***: Individuals and communities must be able to take an active role in decisions that affect their health, including in the organization and implementation of health care services.

***Accountability***: Private companies and public agencies must be held accountable for protecting the right to health care through enforceable standards, regulations, and independent compliance monitoring.

Please act to assure we have a comprehensive Healthcare system for ALL through necessary dialogue, cooperation, compromise, and common sense. Work with your colleagues. Make this happen now!!

Sincerely,