

**EMERGENCY RESOLUTION NO. 0530  
(OPERATIONAL BUSINESS ITEM)  
CONCERNING THE FUTURE OF CHURCHWIDE HEALTHCARE**

**Background Information**

The Christian Church (Disciples of Christ) in its General Assembly in Portland, Oregon, faces a critical decision with regard to its Churchwide Health Care Program. It must either renew its strong commitment to church wide healthcare and take the steps required to support it or the church at large must understand and deal with the consequences of the demise of our current health care program.

While it is true that the costs of the current program have driven some local churches, pastors, some regions, colleges, seminaries and at least one general unit to look for more affordable health care elsewhere, it is also true that there remain in our health care program hundreds of ministers who are very likely uninsurable due to pre-existing conditions. The closure of our health care plan will present for these persons a severe financial hardship and will no doubt stress the church's ability to do ministry in countless ways, including the possible loss of these people to ministry as they lose access to health care, and/or they make requests for Ministerial Relief and Assistance to pay for expensive health care bills far beyond currently available resources. Hence, that understandable stewardship choice to move to a less expensive health plan has come at the expense of an uninsurable colleague, who could well be you or your pastor, sometime in the future.

The Churchwide Health Plan is self-insured. This is to say, what is charged for health care premiums is a direct result of what we actually spend as a group on healthcare. The current trustee of the Christian Church Health Care Benefit Trust is the Pension Fund of the Christian Church (Disciples of Christ), which is governed by its Board of Directors and which was given that job by Resolution 7133, at the 1971 General Assembly meeting in Louisville, Kentucky. As healthcare costs have risen far more rapidly than other sectors of the economy, it has been difficult for the trustee to raise premiums quickly enough to cover rising costs (even though premiums were raised an average of 19.9% last year alone). The program was never intended to operate at a profit-and it certainly hasn't. Yet the Trustee understands that, by law, pension funds of church employees cannot be used to subsidize the healthcare costs of other church employees and their families. Thus, if a wider church plan is not formed to bring the plan back into a solvent position, the Pension Fund will resign as Trustee for the Christian Church Health Care Benefit Trust effective December 31, 2005 and discontinue all health care programs as of that date. The deficit and run-out costs would in this circumstance become the liability of the Christian Church (Disciples of Christ).

WHEREAS, hospital and medical costs continue to rise far more rapidly than most other sectors of the North American economy and are beyond the means of many ministers and church employees; and

WHEREAS, the lack of good health, good health habits and good health care for the church's servant employees will devastate the church's ability to do Christ's mission; now,

THEREFORE, BE IT RESOLVED that the General Assembly of the Christian Church (Disciples of Christ) in the United States and Canada meeting in Portland, Oregon, July 23-27, 2005, urges congregations, regions, general units, colleges, seminaries and related organizations to commit to the redevelopment of and participation in Churchwide Health Care where available benefits are consistent with comparable coverage and premiums available locally, so as to provide a continuing resource for health care coverage for all, including "the least of these"; and

BE IT FURTHER RESOLVED that congregations, regions, general units, colleges, seminaries and related organizations commit to providing a supportive workplace for health and well being.

BE IT FURTHER RESOLVED that the General Board, in consultation with the General Ministries Allocation Team and its regional outreach distribution counterpart, explore allocating outreach resources for the purpose of offsetting increases in healthcare premiums for those current individual participants who, because of adverse demographic factors, would otherwise face increases in health care costs as compared with current Churchwide Health Care coverage; and

BE IT FURTHER RESOLVED that the Christian Church (Disciples of Christ) conduct a capital campaign directed toward individuals and congregations for the sole purpose of establishing a health care reserve fund sufficient of at least \$5 million to assure the viability of the Churchwide Health Care program and establish well-ness programs for clergy and plan participants; and

BE IT FURTHER RESOLVED that the Christian Church (Disciples of Christ) reaffirm support for the creation of a national health care system that provides for excellent care for all, first approved at the 1971 Louisville General Assembly.