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## U.S. Supreme Court Issues Decision Involving EMTALA

**June 27, 2024**

On May 15<sup>th</sup> the Catholic Conference of Illinois (CCI) issued a statement in opposition to HB 581 regarding legislation that impacted the Illinois Health Care Right of Conscience Act as well as changes to provisions in the Hospital Services Emergency Act. Proponents for this bill stated these changes were being put forth due to concerns emanating from the US Supreme Court case *Moyle v. United States* involving the Emergency Medical Treatment and Labor Act (EMTALA) that was decided today, June 27, 2024.

CCI reiterates the United States Conference of Catholic Bishops statement on *Moyle v. United States* from June 27, 2024 saying this decision “leaves in place a lower court ruling that EMTALA can in certain circumstances override state laws that protect preborn lives.... EMTALA was enacted to ensure access to emergency medical care for low-income persons, especially pregnant mothers, and the law expressly protects both the mother and her preborn child.”

*Below is a portion of the CCI Statement on HB 581:*

Regardless of whether a woman experiences an ectopic pregnancy, a miscarriage, or another complication related to pregnancy, Catholic physicians and hospitals will continue to do what they have always done: respect the dignity of both mother and child. They will evaluate and treat both the mother and child as the clinical situation requires while upholding the highest medical and ethical standards. Those who respect life at all stages will continue to provide exemplary care for all those they encounter.

We are concerned that HB 581 requires a physician to provide an abortion if the abortion could be the stabilizing treatment to resolve an emergency medical condition. This is unnecessary because since the 1980s, federal law - Emergency Medical Treatment and Labor Act (EMTALA) - has guided the policies that health care personnel are to follow in an emergency in which a pregnant woman or her unborn child is in distress. The condition of both mother and child are to be stabilized. In addition, for decades the Illinois Health Care Right of Conscience and EMTALA have existed side by side. We disagree with the interpretation in HB 581 that the deliberate killing of the unborn child is a stabilizing treatment when other medical options are available.

HB 581 raises concerns, particularly its inference that direct abortion is the medically indicated intervention in cases of pregnancy complication. Physicians and hospitals opposed to abortion provide high quality care to mothers and babies before and after the Roe decision in 1973 and in the post-Roe world their practices and high standards will not change. They will continue to focus on two lives: mother and child. We are concerned that HB 581 misleadingly seeks to equate management of both ectopic pregnancy and miscarriage with abortion.