

## CSC271, Morals, Law and Society in the Digital Age

### Moral Theories, Case Studies

#### Applying Moral Theories.

1. To gain a better understanding of the moral theories that we have briefly studied, we will consider two case studies. For each case, consider the relevant issues and decide

- how a utilitarian (act- or rule-) would likely diagnose the case.
- how a deontologist (e.g. categorical imperative) would likely diagnose the case.
- how a rights-based theorist would likely diagnose the case.

*We will illustrate the process with something simple and not terribly controversial...*

**Case 1.** Cheating on your income tax by not claiming unreported income.

(a) **utilitarian** analysis

- **as an act-utilitarian, we might be able to justify this action on the grounds that the rewards for me are large, while the expenses for others would be widely distributed and small. However, if there were a reasonable possibility of being detected and punished, then the prospect of punishment would likely outweigh the gains from cheating.**
- **as a rule-utilitarian, we could not justify such a widespread practice, because it would mean that all of us must compensate for the cumulative losses in revenue.**

(b) **deontological** analysis

- **failing to claim unreported income would be to lie about your finances. If this were universalized, then the income tax system would be pointless, because everyone was lying. Ironically, then, there would be no advantage to cheat a little, because there is no one playing fair.**
- **clearly, this would be wrong.**

(c) **rights-based** analysis

- **it would be unjust to allow others to disproportionately pay for the goods and services that you receive while you shirk your responsibilities.**

*Now for something completely different and controversial...*

For the next case, make your *own* analyses of the proposal according to (a) an *utilitarian* analysis—either act or rule versions, (b) a *deontological* analysis—such as Kant’s categorical imperative, and (c) a *rights-based* analysis.

**Case 2.** Enacting universal health care coverage based (in part) on an individual and/or employer mandate to provide for private health insurance.

(NOTE: the issue of healthcare has become over-politicized in recent years. It is important to note that the proposal for employer and/or individual mandates belongs to neither political party exclusively. Employer mandates have been in existence since the mid-twentieth century. Individual mandates were first championed in the 1990s by prominent Republicans such as Charles Grassely and Mitt Romney. The latter as governor of Massachusetts supported and signed a bill imposing an individual mandate for healthcare

insurance. The appeal of the mandate approach for conservatives is that it keeps healthcare within the private sector through insurance companies and the private healthcare industry and not a program managed and implemented by the federal government. The appeal for liberals is that it promised to expand the number of citizens who had healthcare coverage, while attempting to hold down the overall costs. So, try to consider the issue objectively without either conservative or liberal prejudices.)

*here are some related factors to consider:*

- This does not provide for a public option, so the government will not be required to manage a separate fund to insure any additional citizens other than government employees already insured. Programs such as Medicare and Medicaid will continue.
- Mandates would outlaw insurance companies denying coverage based on pre-existing conditions and dropping coverage for seriously ill clients.
- The Congressional Budget Office (CBO) estimated that approximately 24 million people would become eligible for health care coverage but that more than 20 million people would remain uninsured even when these mandates are enacted.
- The estimates of total costs for the change differ.
- The GAO has predicted that costs for the various federally supported programs (Medicare, Medicaid, etc.) would decrease over the next fifteen years under the mandate.
- The Robert Wood Johnson Foundation Report predicted that the costs to both the government and employers would increase by 98 billion dollars.
- However, the same report also predicted that individual health insurance costs (i.e., costs paid by consumers) without the mandate would increase by 10 to 25% depending upon the rate of participation. (In other words, depending on how many people remain in the elective pool.)
- Hospitals are required by law to treat indigent patients (called **free riding**) and typically pass the costs along to the other (paying) patients.
- Hospital costs for indigent care are as much as 300% more than charges for insured patients.
- The problem of free riding also applies to young and healthy individuals who choose not to buy insurance. If only sick people seek coverage, then payouts would likely exhaust premiums. This too would usually mean that other insured consumers would have to bear greater costs to cover these deficits.

(a) **utilitarian** analysis

(b) **deontological** analysis

(c) **rights-based** analysis

**assumption #1(libertarian):** liberty and free choice is an important *negative* right. i.e., subject to fewer limitations compared to other rights.

**assumption #2 (social justice):** health—like education—is a **positive right** that is a *sine qua non* for the privileges and enjoyments of other rights including life and liberty.