

As the husband of a retired school-teacher and the grateful father of four sons and eight grandchildren, I know firsthand the benefit of school choice. We should strive for education that recognizes the individual needs of our students.

Last week, I was appreciative to visit schools to experience school choice at work. I visited a charter school, a public school, and a homeschool group. Thank you to Mark Brown, principal of Horse Creek Academy in Aiken; to Dr. Bill Coon, principal of Meadow Glen Middle School in Lexington; and Wendy Hoyle, the president of the Aiken Area Home Educators. You make a remarkable difference for students.

I believe that Education Secretary Betsy DeVos will make a very positive difference in the tradition of Education Superintendent Molly Spearman of South Carolina.

In conclusion, God bless our troops and we will never forget September the 11th in the global war on terrorism.

INFRINGING UPON WOMEN'S RIGHTS

(Ms. ADAMS asked and was given permission to address the House for 1 minute.)

Ms. ADAMS. Madam Speaker, I rise today to express my opposition to H.R. 7, the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act.

A woman's right to choose shouldn't depend on her location, income, or insurance. It is just 2 days since the 44th anniversary of *Roe v. Wade*, and Republicans are, once again, attacking women's health care.

This legislation would prevent Federal funds from being spent on health benefits that include abortion coverage, causing women and families who depend on ACA to lose their coverage.

A woman who can't afford an abortion and needs one should not be stripped of her constitutionally protected right to one because of her insurance.

We have to stand up and fight for our sister's right to choose and her right to control her own body. It is not the Federal Government's business. It is personal. It is my business.

I will continue to challenge any attempt to infringe upon women's rights and strongly encourage my colleagues to join me in protecting that right.

PROVIDING FOR CONSIDERATION OF H.R. 7, NO TAXPAYER FUNDING FOR ABORTION AND ABORTION INSURANCE FULL DISCLOSURE ACT OF 2017

Ms. CHENEY. Madam Speaker, by direction of the Committee on Rules, I call up House Resolution 55 and ask for its immediate consideration.

The Clerk read the resolution, as follows:

H. RES. 55

Resolved, That upon adoption of this resolution it shall be in order to consider in the

House the bill (H.R. 7) to prohibit taxpayer funded abortions. All points of order against consideration of the bill are waived. The bill shall be considered as read. All points of order against provisions in the bill are waived. The previous question shall be considered as ordered on the bill and on any amendment thereto to final passage without intervening motion except: (1) one hour of debate equally divided and controlled by the Majority Leader and the Minority Leader or their respective designees; and (2) one motion to recommit.

The SPEAKER pro tempore. The gentleman from Wyoming is recognized for 1 hour.

Ms. CHENEY. Madam Speaker, for the purpose of debate only, I yield the customary 30 minutes to the gentleman from Massachusetts (Mr. MCGOVERN), pending which I yield myself such time as I may consume. During consideration of this resolution, all time yielded is for the purpose of debate only.

GENERAL LEAVE

Ms. CHENEY. Madam Speaker, I ask unanimous consent that all Members have 5 legislative days to revise and extend their remarks.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Wyoming?

There was no objection.

Ms. CHENEY. Madam Speaker, I rise today in support of House Resolution 55, which provides a closed rule for consideration of H.R. 7, the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act. This bipartisan bill will codify and make permanent what is commonly referred to as the Hyde amendment and expand Hyde amendment restrictions to all Federal agencies.

First offered in 1976, the Hyde amendment prevents taxpayer dollars from being used to fund abortions through government programs like Medicaid. These restrictions have been maintained for more than 40 years through the annual appropriations process, including the most recent continuing resolution passed last December. It is time that these important protections against the use of taxpayer funding to pay for abortion be made permanent.

A GAO report in 2014 found that, under ObamaCare, over 1,000 insurance plans covered elective abortion. Those plans are purchased with taxpayer subsidies. H.R. 7 would stop this and make ObamaCare conform to the Hyde amendment. If the Hyde amendment had been applied to ObamaCare, as President Obama promised it would be, the number of federally subsidized plans with elective abortion coverage would have been zero.

As we work to repeal and replace the deeply flawed ObamaCare, we need to ensure taxpayer subsidies are not used to pay for abortion coverage.

According to a Marist Poll conducted last July, 62 percent of respondents—a majority of the women asked—and including 45 percent of those who identify as pro-choice do not support taxpayer funding for abortions. H.R. 7 sim-

ply codifies and makes permanent a protection against the use of taxpayer funding for abortion that the majority of Americans and certainly a majority of my constituents in Wyoming support.

Therefore, I urge support for the rule to allow consideration of H.R. 7.

I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume. I thank the gentlewoman from Wyoming (Ms. CHENEY) for the customary 30 minutes.

(Mr. MCGOVERN asked and was given permission to revise and extend his remarks.)

Mr. MCGOVERN. Madam Speaker, I rise in opposition to yet another closed rule. Last night in the Rules Committee, there were three thoughtful amendments that were brought forward. They were all germane and all complied with the rules of the House. Yet, once again, the Republicans in the Rules Committee denied each and every one of them.

There is no opportunity for any amendments to be heard here today and no opportunity for there to be a real debate, and I regret that very much. Again, that is the trend that we see in this Congress.

Madam Speaker, I also oppose the underlying bill. I have a fundamental belief that politicians in Washington should not have the right to interfere in the health decisions of a woman; and this deceptively titled bill will do just that. It continues this Republican majority's never-ending crusade against women, and it is an attempt to take away the constitutionally protected right to abortion services for millions of women, especially middle class and low-income women. That is wrong.

Madam Speaker, these healthcare decisions should be made between women and their doctors, not politicians in Washington.

Who the hell are we in this Chamber to make these private and oftentimes painful decisions for women?

Republicans claim that this bill is about codifying the Hyde amendment, which has been around for four decades. That is 40 years too long, in my opinion. But this bill isn't really about the Hyde amendment. Despite what Republicans claim, this extreme and sweeping bill would go even further by placing unprecedented limits on women's access to reproductive health services even if they want to pay for abortion coverage out of their own pockets.

Placing restrictions on how women with private insurance can spend private dollars when purchasing health insurance would radically change our Nation's longstanding policy. It is deeply troubling and must not become law.

Madam Speaker, just days ago during the nationwide Women's March, millions of people gathered all across the country and around the globe to defend women's rights. These marches were likely the single largest day of protest in American history. More than half a

million people took to the streets right here in our Nation's Capital; and I was proud to march with these dedicated men and women, along with my wife and my daughter. My son, I am also proud to say, joined the march in Boston.

The marches were peaceful. Not a single arrest was reported in Washington, D.C. And they were also clear, sending a message to each of us that women's rights are human rights.

But far from respecting those rights, the majority is here today attacking a woman's constitutional right to make her own decisions about her health, her family, and her future.

Despite this dangerous bill passing the Republican-controlled House in previous Congresses, it has traditionally died in the Senate; and I hope the Senate keeps with that tradition.

The ultimate goal of congressional Republicans and of Donald Trump is to overturn *Roe v. Wade*. Make no mistake about it. They want to take us back to the days of back-alley abortions where women lost their lives. That would be an awful thing to do.

I hope people who believe in upholding a woman's right to choose are watching this debate, and I hope that they are just as outraged as I am by this attempt to roll back women's healthcare rights. I hope they call their Representatives in Congress today to speak out. This is a time for action, and we need all of you to make your voices heard.

I reserve the balance of my time.

Ms. CHENEY. Madam Speaker, I yield 2 minutes to the gentlewoman from North Carolina (Ms. FOXX).

Ms. FOXX. Madam Speaker, our colleague on the other side of the aisle asked: Who the hell are we to be here speaking on this legislation and passing this legislation?

Well, Madam Speaker, we are the Representatives of the people of this country.

Madam Speaker, the most conservative estimates show that we have lost 54 million children to abortion since 1973. In a nation founded upon principles that recognize the dignity of every human life, we should not tolerate this extermination of innocent lives.

□ 1245

The majority of Americans recognize this tragedy for what it is, and there is consensus among them that they do not want their tax dollars paying for a practice they sincerely oppose, and we are their representatives.

Since 1976, the Hyde amendment has been included in relevant appropriations bills to prohibit Federal funding of abortions. Each year it has been consistently renewed and supported by congressional majorities and Presidents of both parties.

Estimates from the Congressional Budget Office indicate that the Hyde amendment has prevented hundreds of thousands of abortions each year. That

means millions of Americans are alive today because of the Hyde amendment. After 40 years, it is time for this life-saving amendment to become permanent law.

H.R. 7, the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act, makes the Hyde amendment and other current abortion funding prohibitions permanent and government-wide. This commonsense measure restores a longstanding agreement that protects the unborn and prevents taxpayers from being forced to finance thousands of elective abortions.

For these reasons, I urge my colleagues to vote to respect our Nation's consensus on abortion funding and affirm life by voting in favor of this rule and H.R. 7.

Mr. McGOVERN. Madam Speaker, I yield 1½ minutes to the gentleman from Massachusetts (Mr. KENNEDY).

Mr. KENNEDY. Madam Speaker, a few days ago, I stood immersed in a sea of women, of men, and of children of all colors, creeds, and backgrounds; citizens who fiercely believe that the diversity of their opinions anchor, that they do not undermine, the values that we share, and that their personal activism and unique advocacy could be traced back to one collective, guiding principle—equality.

As hundreds of thousands of people swarmed this Capital, Boston Common, town greens from Wilton, New Hampshire, to Newport, Oregon, they sent a clear message to their government that when you treat any of us as less, you threaten all of us.

And that is what this bill does. It tells women across this country that their health can be compromised; that constitutionally guaranteed means something different to them than it does to men.

If this was a simple attempt to limit a woman's legal right to abortion or reproductive health care, that would be bad enough. But it is more than that.

Combined with yesterday's reinstatement of the global gag rule, this bill crystallizes the fact that our new GOP-led government sees women's health care as expendable, both within and far beyond our borders.

Make no mistake, if my colleagues continue down this path, I know that there will be a few million men, women, and children willing to keep marching.

Ms. CHENEY. Madam Speaker, I yield myself such time as I may consume.

I would just note that our colleagues on the other side of the aisle have referred several times now to the massive turnout for the women's march here, and we, ourselves, will be having, I am sure, a very large turnout this week; as well as I would like to point out that that women's march excluded groups that were pro-life women's groups. And so the notion that somehow it was reflective of all women in this Nation is fundamentally misleading.

Madam Speaker, I yield 5 minutes of my time to the gentleman from New

Jersey (Mr. SMITH), the cosponsor of this bill who has done tremendous work.

Mr. SMITH of New Jersey. Madam Speaker, I thank the distinguished gentlewoman for yielding, and I want to thank her for her leadership, for being one of the prime cosponsors of the bill, H.R. 7, along with Mrs. BLACK, Ms. FOXX, Mrs. WAGNER, Mrs. BLACKBURN, Mrs. NOEM, Mrs. HARTZLER, and all the others who have joined in as sponsors of this lifesaving legislation.

I would also like to thank Speaker RYAN, Majority Leader MCCARTHY, Whip SCALISE, and Conference Chair CATHY MCMORRIS RODGERS for their extraordinary leadership in defending the most innocent and the most vulnerable among us, unborn children, as well as providing protections for their mothers, and for bringing this legislation, H.R. 7, to the floor.

Forty years ago, Madam Speaker, Congress enacted the Hyde amendment, a law that continues to this day to proscribe Federal Medicaid funds from being used to subsidize abortion in most circumstances.

More than 20 peer-reviewed studies show that more than 2 million people are alive today, 2 million, because of the Hyde amendment. Two million people who would have been aborted, instead, survived because public funds were unavailable to effectuate their violent demise, while their mothers benefited from prenatal health care and support; 2 million survivors who have had the opportunity to live and to enjoy the most basic and the most elemental of all human rights, the right to life.

Madam Speaker, we are experiencing a megatrend in America, consistently reflected in polling data, including the most recent polling data from the Marist Poll yesterday, that showed that 61 percent of Americans are against public funding for abortion, and most want, even those who identify as pro-choice, more restrictions to protect the innocent unborn.

People are seeing the truth of who abortion actually destroys, as today's proudly shared, first baby pictures are most often of ultrasound imaging photos depicting the amazing miracle of the developing child in the womb.

Growing numbers of Americans are often shocked to learn that the methods of abortion include dismemberment of a child's fragile body, including decapitation, and the severing of arms and legs, or the use of drugs like RU-486 that literally starve the child to death before forcibly expelling her or him from the safety of the womb.

Yet, the billion-dollar abortion industry continues to cleverly market the chief sophistry of choice, while going to extraordinary lengths to cover up, ignore, and trivialize the battered victim child in the womb.

Madam Speaker, pro-life Americans struggle for the day when abortion violence will be replaced by compassion and empathy for women and respect for

the weak and most vulnerable among us, the child in the womb. They believe, as do my pro-life colleagues, that we ought to love them both, mother and child, and not fund the destruction of children through abortion.

Lawmakers also need to hear the courageous voices of women who are silent no more, a rapidly expanding number of women who share the agony and heartbreak that they have endured after procuring an abortion.

As I mentioned, yesterday there was a poll that came out, and, again, it found that 61 percent of Americans oppose taxpayer funding for abortion, and only 35 percent support it, which is precisely what we seek to accomplish with enactment of H.R. 7. It would make the Hyde amendment and other current abortion funding restrictions permanent and government-wide.

I would note, parenthetically, that soon after the Hyde amendment was enacted in 1976, other abortion funding riders were enacted into law, and Hyde itself was upheld by the Supreme Court in 1980.

In 1983, I authored the ban on funding abortion in the Federal Employees Health Benefits program. Most must be renewed legislatively each and every year. This legislation would make it permanent.

The legislation ensures that the Affordable Care Act, until repeal, conforms with the Hyde amendment.

I would remind my colleagues that just a few feet from where I stand, on September 9, 2009—and I have his speech right in front of me—the President of the United States said: “And one more misunderstanding I want to clear up—under our plan, no Federal dollars will be used to fund abortions, and Federal conscience laws will remain in place.”

Well, on the latter, the conscience laws remained in place, but they were just simply not enforced.

And of course we know now, as my good friend, Ms. CHENEY, mentioned, we know that, according to the GAO—because people kept saying in the early years, oh, there is no funding, public funding for abortion, so we asked GAO to look into it. They came back and said there is much—over 1,000 plans pay for abortion on demand.

Mr. MCGOVERN. Madam Speaker, I include in the RECORD an article that appeared in *The Washington Post*: “Does Obamacare provide federal subsidies for elective abortions?” It talks about the GAO report, and it basically says that those who claim that it does, they earn three Pinocchios.

[Jan. 26, 2017]

DOES OBAMACARE PROVIDE FEDERAL SUBSIDIES FOR ELECTIVE ABORTIONS?

(By Michelle Ye Hee Lee)

“The president’s health-care law authorized massive subsidies to assist millions of Americans to purchase private health plans that will cover abortion on demand. In other words, hard-earned taxpayer dollars are now being used to pay for elective abortions. This is simply unacceptable.”—Rep. Virginia Foxx (R-N.C.), House debate, Jan. 22, 2015

The argument that the Affordable Care Act, a.k.a. Obamacare, provides federal subsidies for abortions came up several times during the House debate on an antiabortion bill.

The bill would prohibit using federal funds for any abortions or for any health plans that cover abortions. Under Obamacare, federal funds can be used to cover abortions for pregnancies caused by rape or incest, or that endanger the mother’s life. But no federal subsidies for premiums can be used for elective abortions. The House debate centered on whether this restriction is being enforced, and whether additional protection for taxpayers are needed.

There often is overheated rhetoric in the abortion debate that cannot be fact-checked. (The Fact Checker previously examined Democrats’ claims following the Hobby Lobby ruling.)

The bill’s opponents, who support abortion rights, say the system works and that the measure would unnecessarily restrict women’s private insurance choices. Lawmakers who oppose abortion rights don’t buy it; they say the system is just an accounting gimmick. The goal of this fact check is not to relitigate the debate but to examine evidence to support the above statement, which was repeated throughout the debate.

Foxx, one of the lawmakers arguing for the bill, was among several Republicans who claimed federal subsidies are paying for elective abortions. Does this accurately portray how abortions are covered under Obamacare?

THE FACTS

The House passed H.R. 7, No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act of 2015, on the anniversary of the Supreme Court’s *Roe v. Wade* decision. The bill was a watered-down measure that the House took up at the last minute after GOP leaders pulled an initial, more restrictive bill.

Public funding for abortions is intricately structured. Under the Hyde Amendment, federal funds can’t be used for elective abortions under Medicaid-funded plans. Some states do pay 100 percent of the cost of elective abortions without passing on any cost to the federal government.

Under Obamacare, health insurance plans could cover some or all elective abortions, but they can’t use federal tax credits and subsidies to offset the cost. Insurance providers that cover elective abortions must charge consumers separately and deposit the money into a separate account that contains no federal money. Providers need to bill enrollees separately for elective abortions by itemizing them separately in monthly bills or sending separate bills.

States can pass laws to ban or restrict health plans from providing coverage for elective abortions. In 2014, 23 states restricted coverage for these procedures. There were 1,036 plans in 28 states that provided some or all coverage for elective abortions.

In a speech to Congress and a subsequent executive order, President Obama gave assurances that federal subsidies would not be used to cover elective abortion services. He ordered Health and Human Services and the Office of Management and Budget to issue a guideline for states so they can comply with billing and funding segregation requirements.

Obama’s not keeping his promise, say supporters of H.R. 7. Staffers for Foxx and two of the other lawmakers who made similar claims—H.R. 7 sponsor Rep. Chris Smith (R-N.J.) and Rep. Ana Wagner (R-MO.)—pointed to a September 2014 Government Accountability Office report. At the request of GOP leaders, the GAO examined whether health plans were following the elective abortion billing requirements.

GAO picked 18 plans in 10 states with no laws restricting abortion coverage as a non-probability sample representing a quarter of all health plans that cover elective abortions. GAO found 17 of 18 issuers were not separately billing consumers. The one remaining issuer said its bills show there is a charge “for coverage of services for which member subsidies may not be used.”

These issuers did not give blanket coverage for all abortions. One covered abortions that a health-care provider determines necessary, and two limited coverage to no more than one elective abortion a year. All 18 issuers had payment requirements such as co-pays, deductions and out-of-pocket costs.

The report did not examine whether the providers were illegally using federal subsidies to pay for elective abortion services. In response to the report, HHS released a new set of regulations to clarify billing and funding segregation requirements.

Experts say the GAO’s findings do not necessarily mean insurance providers are inappropriately using federal subsidies to cover abortion services. There is no government or industry agency tracking insurers’ compliance, making it impossible to know whether providers are following the law, they said.

“It’s really not clear how these different plans are being operationalized,” said Alina Salganicoff, Kaiser Family Foundation’s director of women’s health policy.

The GAO report found premium amounts collected from elective abortion services ranged from 51 cents to \$1.46 per enrollee per month. To put this in context, the national average premium for a 40-year-old person purchasing coverage through the marketplace was between \$224 to \$270 per month, according to the Kaiser Family Foundation. (An earlier, non-age-specific average monthly estimate was \$241.) Even if the maximum charge (\$1.46) was added to the cheapest health plan (\$224), the elective abortion surcharge is less than 1 percent of the monthly bill.

The key point made by lawmakers and advocacy groups who oppose abortion rights is that money is fungible, and that it doesn’t matter exactly how the money is being collected. A dollar is a dollar, they say, and every dollar paid to an insurance provider in the marketplace ultimately goes into collective risk pools that are used to rim government-subsidized health insurance, so taxpayers are effectively paying for elective abortions.

“The point is the federal subsidies provided for those 1,036 plans are funding abortion just as much as the private funds contributed by the individual. That is consistent with the commonly held understanding that money is fungible and the funds received by the insurance company are used to pay all benefits,” Sheridan Watson, Foxx’s communications director, wrote to *The Fact Checker*.

THE PINOCCHIO TEST

The GAO’s report found that the insurers it studied were not following billing requirements. But experts say that does not necessarily mean the providers were illegally using federal subsidies for abortions. Even if they were, Foxx’s statement that Obamacare authorized “massive” subsidies is an exaggeration. Based on the estimates above, abortion charges would range from 0.2 percent to 0.65 percent of an enrollee’s monthly bill.

The claim that “hard-earned taxpayer dollars” are paying for abortions “on demand” implies that taxpayers foot the abortion bill for any woman who requests one. But in reality, some providers still imposed their own restrictions on which abortions to cover, and all 18 issuers had payment requirements, such as out-of-pocket costs and co-pays.

Lawmakers like Foxx who oppose abortion rights discredit the billing and funding separation requirement for elective abortion services. Billing doesn't matter, they say, because federal tax dollars used for subsidies pay for everything in a health plan. This is an opinion, and something that can't be fact-checked. But to say that massive federal subsidies are paying for abortions on demand is not an accurate portrayal of this complex issue, and the facts in the GAO report do not support this argument.

Mr. MCGOVERN. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. MATSUI).

Ms. MATSUI. Madam Speaker, I rise today in strong opposition to H.R. 7.

On Saturday, I joined millions of women, men, and children who took to the streets and raised their voices in defense of equality. We marched because women's rights are truly human rights. We marched because women should be able to make their own choices about their own bodies. We marched because everyone deserves health care, not just the privileged few.

And yet, here we find ourselves voting on another Republican attempt to cut off reproductive health care from the people who need it the most. H.R. 7 would be devastating for all women, but would disproportionately impact low-income families, women of color, immigrants, and young people.

But we were reminded this weekend that, as women, our destinies are tied together, and we will not be silent as Republicans attempt to interfere with a woman's constitutional right to choose. Women are watching.

Ms. CHENEY. Madam Speaker, I yield 2 minutes to the gentlewoman from Tennessee (Mrs. BLACK).

Mrs. BLACK. Madam Speaker, I rise today in strong support of the rule to provide consideration of H.R. 7, the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act. This bill is, quite literally, the least we can do for American taxpayers and our voiceless unborn.

Frankly, the fact that we are even here discussing this, and that there is opposition to this bill at all, really does break my heart, and it speaks to the depths of the entanglement with the big abortion industry that exist in some corners of this Chamber. Because, at the end of the day, you know what this bill really is about? The right to choose.

We hear our friends across the aisle use the phrase a lot. But what about the other right to choose, the right of the taxpayer to choose not to pay for the practice that violates everything that they believe? That is what we are here to protect.

The American people support this policy, with 6 in 10 surveyed saying that taxpayer dollars should not be used to fund abortions. And these are both pro-life and pro-choice.

So today, Madam Speaker, I am asking my colleagues across the aisle to honor the will of their constituents. I am asking them to remember the good old Democratic rallying cry of safe,

legal, and rare abortion. Obviously, abortion is not rare today when over 330,000 abortions are performed in 1 year.

If my colleagues still believe these words, they will join us in supporting this modest solution to keep unsuspecting taxpayers off of the hook for this practice. And if they can't vote for this bill then there is truly not a single limit on abortion that they will accept, and that is a sad commentary on the state of politics.

I urge a "yes" vote on the rule.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume.

Let me just clarify for the RECORD that there is no Federal funding for abortion. All you have to do is read the Hyde amendment, which has been in effect for 40 years. I don't support it, but that is the law of the land.

The majority of Americans believe abortion should be legal. So if you want to talk about polls, the overwhelming number of Americans believe that abortions should be safe and legal.

I also would like to say that while my colleagues are working overtime to try to defund organizations like Planned Parenthood, it is because of Planned Parenthood, the counseling that is provided, and the reproductive services that are provided at their clinics, and contraception, that the number of abortions have decreased in this country.

Madam Speaker, I am going to ask my colleagues to defeat the previous question. And if we do, I am going to offer an amendment to the rule to bring up legislation, which I am happy to be a cosponsor of, along with Ms. ESHOO, that would require sitting Presidents and Presidential nominees to disclose their last 3 years of tax returns.

□ 1300

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore. The Chair will remind all persons in the gallery that they are here as guests of the House and that any manifestation of approval or disapproval of proceedings is in violation of the rules of the House.

The gentleman may continue.

Mr. MCGOVERN. Despite the long tradition of Presidents and Presidential nominees of disclosing their tax returns, Donald Trump has refused to release his, and his spokesperson recently said that he has no intention of doing so. The American people expect and deserve transparency, which this legislation would ensure.

Madam Speaker, I ask unanimous consent to insert the text of the amendment in the RECORD, along with extraneous material, immediately prior to the vote on the previous question.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Massachusetts?

There was no objection.

Mr. MCGOVERN. Madam Speaker, between his refusal to release his tax returns and all these business conflicts of interest, this Presidency is on a collision course with corruption.

Madam Speaker, I urge all my colleagues to support our effort here.

To discuss our proposal, I yield 2 minutes to the distinguished gentlewoman from California (Ms. ESHOO).

Ms. ESHOO. Madam Speaker, I thank our wonderful colleague from Massachusetts (Mr. MCGOVERN) for yielding to me.

Madam Speaker, I rise in opposition to the rule and the underlying legislation, and I urge my colleagues to defeat the previous question so that this bill that I have authored, the Presidential Tax Transparency Act, can be made in order for immediate floor debate and a vote.

Now, the Presidential Tax Transparency Act would require the President and future Presidential nominees of both parties to disclose their tax returns. Many Americans took for granted that this was covered by law, but what we have had is a decades-long tradition of voluntary disclosure by both Republican and Democratic nominees for the Presidency.

For the first time since the immediate post-Watergate era, candidate Trump and now President Trump has refused to release his tax returns to the public. Those who seek or hold the most powerful office in the world should be held to the highest standard of transparency to ensure the best interests of the American people are met.

Tax returns provide an important baseline disclosure because they contain highly instructive information, including whether the candidate paid any taxes, what they own, what they have borrowed and from whom, whether they have made charitable donations, and whether they have taken advantage of tax loopholes or offshore tax shelters.

The President and his spokesperson have both recently said that he will not release his tax returns because the American people "don't care." I beg to differ. The top petition on the Web site of the White House calls for the release of the President's tax returns with over 300,000 signatures already on it. A Washington Post-ABC News poll released last week found that 74 percent of the American people, including 53 percent of whom are Republicans, believe the President should release his tax returns. We want a President free of conflicts of interest.

For all of these reasons, I urge my colleagues to reject the previous question and to vote for the Presidential Tax Transparency Act.

Ms. CHENEY. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, it is no surprise that our colleagues on the other side of the aisle would rather talk about just about anything besides the text and the substance of the rule and the bill that we are about to consider.

The transparency that is important to this debate and that is relevant for this discussion today is transparency that is in the rule and in this bill that would require that insurance companies make sure that people understand what they are purchasing and whether or not they are purchasing a plan that will, in fact, provide abortion coverage.

I also just want to note that although there may be some in this Chamber who view The Washington Post Fact Checker as the oracle and font of all wisdom, he got this one wrong, as he has in many cases, and, in fact, failed to understand that there are, as we meet here today, monthly advanced payments of U.S. taxpayer funding going to insurance companies or to exchanges to pay for health insurance plans that subsidize abortion on demand.

Madam Speaker, I yield 2 minutes to the gentleman from Georgia (Mr. JODY B. HICE).

Mr. JODY B. HICE of Georgia. Madam Speaker, I thank my friend from Wyoming.

Madam Speaker, regardless of attempts from the other side to distract and derail what we are discussing, the vote today is on the permanent application of the Hyde amendment, which would ban taxpayer dollars from being used for abortion.

The truth is that taxpayers get up and go to work every day. They work by the sweat of their brow. The majority of them find the practice of abortion to be a serious violation of their personal beliefs. Under that situation and scenario, it is unconscionable that this body would even consider taking the money of those hardworking taxpayers and using their money to fund abortion.

The Hyde amendment has traditionally maintained bipartisan support. It has been signed into law by both Democratic and Republican Presidents since 1976. In addition to that, the Supreme Court has upheld the law, doing so in 1980, ruling that, regardless of the freedom recognized in *Roe v. Wade* to terminate a pregnancy, there is not a constitutional entitlement to use taxpayer money to finance such an act.

The Hyde amendment has saved the lives of roughly 300,000 unborn children annually. It is bipartisan, it has been upheld by the Supreme Court, and it protects taxpayers who have a conscientious objection. So I strongly encourage my colleagues on both sides of the aisle to support H.R. 7 when it comes before the full House for a vote today.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I just would like to assure my colleague from Wyoming that we are not trying to distract when we bring up the issue of the President's tax returns, but we have no opportunity here to be heard. The bill before us, as I mentioned in my opening statement, is a closed rule. It is a Putin

rule, if you will, where it is their way or the highway and where no debate is allowed on alternative ideas. We had three thoughtful amendments brought before the Rules Committee last night, all germane, all in compliance with the House rules. They rejected all three of them.

On the issue of the Presidential tax returns, yes, we are bringing it up because the American people want to know whether there are conflicts of interest. They don't want the White House to be known for being a place of corruption. They want our Presidents to follow the rules and the laws of the land. So people want to know, but we have been given no opportunity to do that.

So forgive me if we take procedural motions to try to make our point, but my colleagues on the Republican side lock us out of any opportunity to be heard. The Rules Committee has become a place where democracy goes to die, I am sad to say, and I hope that changes.

Madam Speaker, I yield 1 minute to the gentleman from Michigan (Mr. KILDEE).

Mr. KILDEE. Madam Speaker, I thank my friend for yielding.

Madam Speaker, like many of us this past Saturday, I marched in Washington with millions of women across the country claiming their human rights and claiming their basic individuals rights. Madam Speaker, the previous speaker on the other side made mention of the fact that the Hyde amendment is the law of the land and that it has been upheld by the United States Supreme Court. We know. We get it. That is not what this is about.

This is about going well beyond that and actually limiting what women can do and what individuals can do with their own money when acquiring health care that includes the reproductive health services that are the subject of this debate.

How many times do we have to come to the floor to make the point that choices about women's health care should be made between a woman and her doctor, not somebody in Washington dictating to women what they can do with their own money and with their own bodies?

Do you know what else is the law of the land? Do you know what else has been upheld by the Supreme Court almost a half a century ago?

That fundamental right that women have over the determinations they make for themselves about their own bodies. That has been upheld by the United States Supreme Court as well.

Ms. CHENEY. Madam Speaker, I yield 2 minutes to the gentleman from Texas (Mr. BABIN).

Mr. BABIN. Madam Speaker, I thank the gentlewoman from Wyoming.

Madam Speaker, for the past 30 years, through the Hyde amendment, the U.S. Congress has acted to prevent taxpayer money from being used to pay for abortions. The bipartisan Hyde

amendment has been an annual rider on appropriations bills, but ObamaCare bypassed this abortion funding prohibition leading to the largest expansion of taxpayer funding of abortion in American history since *Roe v. Wade*.

That is why we desperately need to pass H.R. 7, the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act to permanently codify the Hyde amendment and apply it across the entire Federal Government. This bill will also ensure that the prohibition is not subject to annual threats and it will close the massive loophole that was created by ObamaCare.

Since 1976, the Hyde amendment has saved the lives of over 2 million babies—roughly the same number of people who live in the city of Houston, Texas, where I serve as a U.S. Representative. For the sake of these 2 million people and the millions more that will be saved, we must permanently codify the Hyde amendment's pro-life protections.

Furthermore, as ObamaCare presented the largest expansion of abortions since the *Roe v. Wade* Supreme Court case, we must ensure that the Hyde amendment covers all areas of the Federal Government. This will ensure that taxpayer dollars are no longer used to subsidize abortions.

H.R. 7 is a critical piece of legislation that is supported by nearly two-thirds of the American people who do not want the government to be in the business of killing unborn babies. Congress must act to preserve the Hyde amendment for posterity and to put an immediate end to the ongoing harm being done with taxpayers' money.

I strongly encourage my colleagues to vote for the passage of this much-needed bill to end taxpayer funding of abortion once and for all.

Mr. MCGOVERN. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. SANCHEZ), who is the vice chairwoman of the Democratic Caucus.

Ms. SANCHEZ. Madam Speaker, I rise today in opposition to H.R. 7, the misnamed No Taxpayer Funding for Abortion Act.

Just 2 days ago, our Nation celebrated the 44th anniversary of *Roe v. Wade*, affirming that a woman has a constitutional right to make the decision of what is best for herself and her family. However, Republicans have been relentless in their pursuit to deny women this constitutional right, and H.R. 7 is just another reckless example.

H.R. 7 will have devastating consequences on every single woman in America. The bill would deny women, families, and small businesses tax credits if they elect an insurance plan that covers abortions. The IRS would be inserted into one of the most important and private decisions a woman can make and one that should be solely between her and her doctor. That is the most egregious and offensive example of government overreach that I can think of.

Madam Speaker, women are responsible. Women are smart. Women know what is best for them, and women can make their own choices. Allow them to do that and vote against H.R. 7.

Ms. CHENEY. Madam Speaker, I yield 2 minutes to the gentleman from Illinois (Mr. HULTGREN).

Mr. HULTGREN. Madam Speaker, I thank the gentlewoman from Wyoming. I am so grateful to be here to talk on this important subject.

Madam Speaker, Thomas Jefferson once said: "The care of human life and happiness, and not their destruction, is the first and only object of good government."

It is with Jefferson's words in mind that I rise today as an original cosponsor in support of the No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act.

This legislation sustains Mr. Jefferson's vision of good government. It makes permanent the Hyde amendment restricting Federal funding for abortions and thereby ensuring the care of human life and not its destruction. Most Americans oppose the use of their tax dollars to pay for abortions.

Since 1976, the Hyde amendment has saved nearly 2 million unborn children and continues to save more than 60,000 lives in the United States every year. Americans also deserve to know—before they purchase it—if their healthcare plans cover elective abortion.

H.R. 7 addresses the abortion secrecy clause in the Affordable Care Act. It requires qualified plans to disclose to enrollees at the time of enrollment whether a plan covers abortion. Americans should never be forced to pay for someone's abortion. This legislation will restore the status quo on government funding for elective abortions and make this policy permanent and consistent across the Federal Government.

I commend Congressman SMITH and Congressman LIPINSKI for their bipartisan cooperation in introducing this bill, and I am pleased to support it.

Mr. MCGOVERN. Madam Speaker, I yield 1 minute to the gentlewoman from California (Mrs. DAVIS).

Mrs. DAVIS of California. Madam Speaker, let me tell you about Chelsea, a mother of two young children, who was on Medicaid when she was diagnosed with cervical cancer. She never missed her birth control pills, but when she went to the clinic for treatment, she was told that she was pregnant and could not get the surgery she needed because of the pregnancy.

□ 1315

Why is that? Because of the Hyde rule, Medicaid would not cover the abortion care that she needed, and her cancer treatment was delayed, obviously compromising her health.

Instead of discussing ways to make Chelsea's situation better, we are considering a bill that would make the ban on abortion care services under Medicaid permanent.

This is not about women asking for free, federally funded abortions. This is about women like Chelsea being able to receive the medical care they desperately need.

We saw this weekend millions of women took to the streets throughout our country in a historic movement. So let's show them that we are listening by rejecting this bill that makes bad policy permanent.

Madam Speaker, let's leave a woman's medical decision between her and her doctor and reject this far-reaching bill.

Ms. CHENEY. Madam Speaker, I yield 2 minutes to the gentlewoman from Missouri (Mrs. HARTZLER).

Mrs. HARTZLER. Madam Speaker, I am just heart sick today to hear some of my colleagues talking about how they were celebrating the 44th anniversary of Roe v. Wade. That is 60 million babies—little girls, little boys—who have been aborted and no longer have a chance to live. We could have had perhaps a cure for cancer or Alzheimer's. Who knows what the potential of those 60 million lives could have been.

So it is hard to hear my colleagues talk about a celebration of that and using the terminology that this bill deals with abortion care. Abortion isn't care and abortion isn't services. It is taking a life.

This bill does nothing to change Roe v. Wade, although I wish it could, but it simply says that taxpayers do not have to participate in it. The taxpayers all across this country who believe that every life is precious work hard and send in their money every April 15. They entrust it to us, their elected officials. We have national security issues, we have roads, we have education. They don't want to see it go to something like taking a life through abortion.

So this is what we are doing today, simply making permanent a policy that we have had to put in as an amendment to appropriations every year and fight for. This is just making sure that, here in Washington, in America, the taxpayers invest in women's health care and are not investing in abortion.

We should be about saving lives, not taking them. That is what this bill does. I urge my colleagues to support it.

Mr. MCGOVERN. Madam Speaker, I yield 1 minute to the gentlewoman from Oregon (Ms. BONAMICI).

Ms. BONAMICI. Madam Speaker, I rise in opposition to the rule and the underlying bill, H.R. 7, a dangerous attack on the right of women to make their own decisions about their health and their bodies.

On Saturday, I, too, joined the peaceful march in our Nation's Capital with hundreds of thousands of women and men. Millions more marched in Oregon, across the country, and around the world to demand that our voices be heard.

This legislation, one of the majority's first priorities under the Trump

administration, won't create jobs. It will create barriers to reproductive health care for countless women. It will disproportionately affect low-income women, young women, women of color, women in rural communities, and immigrant women. This bill turns back the clock. It puts women's lives at risk.

Restricting abortion does not make it go away. It makes it unsafe. This bill will drive women back to back alleys.

I urge a "no" vote on the rule and on H.R. 7.

Ms. CHENEY. Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield 1 minute to the gentlewoman from California (Ms. LOFGREN).

Ms. LOFGREN. Madam Speaker, 44 years ago, the Supreme Court made an important decision. It said that women have a constitutional right to make decisions about their own health care and their own bodies, not the government.

It was just a few days ago that millions of American women marched all across the United States, reaffirming their opposition to efforts to take away their rights. That is what this bill would do.

There has been a lot of discussion about taxpayers funding abortion. That is not currently the law, not only in the Hyde amendment, but the Affordable Care Act requires women who wish to have this coverage to pay for it themselves.

We have heard a lot about alternative facts recently, but the fact is there is no taxpayer money for abortion in the United States—there hasn't ever been for many years—and that was also the accommodation that the Supreme Court made.

Let's make sure that the constitutional rights of women to control their own bodies is not attacked.

Ms. CHENEY. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I just want to make a point in terms of my colleagues on the other side of the aisle and the constant reference to women, women, women, as though all women believe what they believe.

They have very strongly held views on the other side of the aisle, but the notion that somehow all women can be categorized as being pro-abortion is just simply wrong and, frankly, offensive to those of us who have different views.

Madam Speaker, I would like to say, at this point in time, that we are not making any kind of a dangerous attack on women's rights.

My colleagues have accused us of being relentless. We are relentless. We are relentless, Madam Speaker. We are relentless in defense of the unborn, the most vulnerable among us.

Madam Speaker, I yield 2 minutes to the gentleman from Pennsylvania (Mr. ROTHFUS).

Mr. ROTHFUS. Madam Speaker, I rise to support this rule and the underlying bill, H.R. 7.

For decades, Congress has annually passed the Hyde amendment, which has prevented any government program from funding or subsidizing elective abortion. The Hyde amendment has saved over 2 million unborn children since 1976, including 100,000 lives in Pennsylvania.

For decades, this annual restriction on taxpayer funding of abortion has been referred to as the Hyde amendment because it was the late Congressman Henry Hyde from Illinois who sought to protect as many unborn children as he could during his service in Congress. Recollecting his own work, Congressman Hyde offered this poignant reflection:

“When the time comes as it surely will, when we face that awesome moment, the final judgment, I’ve often thought, as Fulton Sheen wrote, that it is a terrible moment of loneliness. You have no advocates, you are there alone standing before God—and a terror will rip through your soul like nothing you can imagine. But I really think that those in the pro-life movement will not be alone. I think there will be a chorus of voices that have never been heard in this world but are heard beautifully and clearly in the next world—and they will plead for everyone who has been in this movement. They will say to God, ‘Spare him because he loved us’”

Henry Hyde is not forgotten, and this work goes on.

Despite former-President Obama’s promise that no abortion would be covered by his healthcare law, the Affordable Care Act authorized and appropriated funds for healthcare plans with abortion coverage. This must stop.

We must remember, abortion is not health care, and in no way should the government fund or subsidize the violent destruction of unborn children.

It is the overwhelming opinion of Americans, including those who identify as pro-choice, that taxpayer dollars should not be used for abortion. This legislation is absolutely essential to apply the principles of the Hyde amendment consistently across the Federal Government.

As hundreds of thousands march this Friday on the 44th anniversary of *Roe v. Wade*, a decision Justice White referred to as an exercise in raw judicial power, I urge my colleagues to support this rule and the underlying bill.

Mr. MCGOVERN. Madam Speaker, I yield 1½ minutes to the gentlewoman from New York (Mrs. CAROLYN B. MALONEY).

Mrs. CAROLYN B. MALONEY of New York. Madam Speaker, I thank my good friend from the great State of Massachusetts for his extraordinary leadership on this issue and so many others and for standing up for women. The right to speak is a very special one.

Madam Speaker, the right to choose is meaningless without the access to choose. That is what this bill is about. It is cutting off access to choice. That is why the anti-choice movement is so strongly behind this bill.

H.R. 7 is a cynical attempt to use the Federal Government’s power of the purse to restrict a woman’s access to her constitutionally protected right to an abortion.

I oppose the Hyde amendment and believe that we should be increasing access to comprehensive health care, not reducing it. But this bill makes the Hyde amendment permanent. It goes further. It prohibits the Affordable Care Act tax credits for individuals and employers who choose plans that cover abortion.

H.R. 7 would restrict abortion coverage or make such coverage too burdensome or expensive for many Americans to afford. It is a step back towards a dark and ugly time when anti-abortion laws took a substantial toll on women’s health and, in many cases, cost them their very lives.

I urge my colleagues to join me in voting “no” on this rule and the underlying bill.

Ms. CHENEY. Madam Speaker, I yield 1 minute to the gentleman from New Jersey (Mr. SMITH).

Mr. SMITH of New Jersey. Madam Speaker, I will just remind Members that, in order to gain votes of several pro-life Democrats needed for passage of the Affordable Care Act, President Obama issued an executive order on March 24, 2010, and it said:

The Affordable Care Act maintains current Hyde restrictions governing abortion policy and extends those restrictions to newly created health insurance exchanges.

The problem is, it never happened.

There were people who are saying even today that there is no taxpayer funding for abortion. Yes, there is. We finally went to the GAO. We asked them to do a study, an audit. They spent a full year on it and confirmed that the plans that we were subsidizing with taxpayer dollars covered abortion.

I remind my colleagues that, under the Hyde amendment, plans that pay for abortion are precluded from receiving government funding. 1,036 Affordable Care Act exchange plans were found to have abortion on demand being paid for by the taxpayers.

So if the Hyde amendment had been applied as former President Obama had said it would, there would have been zero coverage for abortion, except in cases of rape, incest, and life of the mother.

Mr. MCGOVERN. Madam Speaker I yield 1½ minutes to the gentlewoman from the District of Columbia (Ms. NORTON).

Ms. NORTON. Madam Speaker, I thank my good friend for yielding.

I stand here in a unique position; first, to oppose this sweeping attack on women’s reproductive health in its entirety, but I also am compelled to discuss the unique provision that singles out the District of Columbia, permanently barring the District of Columbia from spending its own local funds—not a cent of it raised in this Congress—on abortion services for low-income women, thus uniquely denying the Dis-

trict of Columbia government the right that local and State governments exercise throughout the United States using their own local funds.

Madam Speaker, H.R. 7 goes further. It insults the District of Columbia.

Just to make sure everybody understands that the bill means to include the District of Columbia, it tortuously defines or redefines the term “Federal Government” to include a local jurisdiction, the “District of Columbia government.”

The District of Columbia government is thrown in with the Federal Government. We are talking about U.S. citizens, the people I represent, who are number one per capita in taxes raised to support the government of the United States of America.

The SPEAKER pro tempore. The time of the gentlewoman has expired.

Mr. MCGOVERN. Madam Speaker, I yield the gentlewoman an additional 1 minute.

Ms. NORTON. This bill, of course, is annual, and it is less inclined to become law than to be part of the annual upcoming march.

We do not intend, Madam Speaker, to let our colleagues get away with not supporting democracy, including the right of local governments to spend their own local funds on choice. Everywhere on Earth you can support such a right, except for the 700,000 people who live in your own Nation’s Capital.

□ 1330

Ms. CHENEY. Madam Speaker, under the Constitution, all funds for the District of Columbia are appropriated by the United States Congress, so we in the Congress bear a particular and additional responsibility for funds in the District of Columbia.

I would also note, Madam Speaker, that there are no limitations in the District of Columbia on when an abortion can be performed; and therefore, if we were to lift this amendment, if we were not to have this rule in place, you could potentially have the U.S. taxpayers in a situation where they were being forced to fund even late-term abortions in the District of Columbia, which is fundamentally against the Hyde amendment, fundamentally against everything that we have supported and against the majority of the people in this Nation.

Madam Speaker, I yield 2 minutes to the gentleman from Texas (Mr. SESSIONS), the chairman of the Committee on Rules.

Mr. SESSIONS. Madam Speaker, I want to thank the gentlewoman from Wyoming not only for being on the Committee on Rules, but also today for handling her first rule. Welcome to Congress and welcome to the Committee on Rules.

Madam Speaker, the bill that we have before us today is an extension of, really, a bipartisan agreement that we have had for 30-plus years: that we should not have abortions that are paid for by the taxpayer. The bottom line is

that this is a very difficult issue, no matter which side you might be on; but I believe that the right thing to do is to say that, based upon the morality and, really, the right thing, that the Federal Government, the taxpayers, should not be engaged in paying for abortions, killing of babies in this country.

We believe it is morally wrong, and all we are simply doing today is standing up and saying we are going to extend the same privileges that we have had on a bipartisan basis for 30-plus years not only with the Hyde amendment, but placing that across all pieces, parts of appropriations and bills and things that we do here in Congress. This has absolutely nothing to do with taking away a woman's right to choose. It has nothing to do with dealing with the Supreme Court. It has everything to do with using taxpayer dollars.

Yesterday we had a very appropriate and a very timely conversation at the Committee on Rules, and I think both sides handled their arguments and their agreements and disagreements well. It is my hope that we do this here today.

But let me say this, that the gentleman from New Jersey (Mr. SMITH) came up as an advocate for women, as an advocate for women who are engaged in the scurrilous trading of women and misconduct with women. I think he was seen for what he is. He is a strong advocate for life and for women who need to feel safe in this country. He stood up yesterday as an advocate for saying we should not use taxpayer money to pay for abortions, and that is really what this bill is.

I thank the gentlewoman from Wyoming for allowing me to be here.

Mr. MCGOVERN. Madam Speaker, the distinguished gentleman from Texas, the chairman of the Committee on Rules, says this bill has nothing to do with taking away a woman's right to choose. I would beg to differ. I think it has everything to do with taking away a woman's right to choose.

But this is the rule. I was hoping that maybe he would address the fact that, again, three thoughtful amendments were brought before the Committee on Rules yesterday by Democrats. They were all germane. They all comply with the House rules. I was hoping he would explain why they were all denied, especially since the bill before us didn't go through regular order; it didn't go through a committee process to be brought to the floor. This was just kind of plopped into the Committee on Rules, and no amendments were made in order. That is not the way a deliberative body should be run. There are disagreements on this issue, but don't be afraid of allowing opposing viewpoints to be heard on this House floor. But apparently he didn't want to talk about that.

Madam Speaker, I yield 1½ minutes to the gentleman from California (Mr. PANETTA).

Mr. PANETTA. Madam Speaker, I rise today in opposition to H.R. 7, a bill which brings permanency to the Hyde amendment, a bill which attempts to take away low-income women's reproductive rights. Therefore, I submit to you that it is a bill more about divisive politics than decent policy.

This past Saturday, I joined hundreds of my constituents on The National Mall. We demonstrated our support for reproductive rights and for women's health care across our Nation.

In my district, on the central coast of California, we have an organization that administers those types of essential services. Mar Monte Planned Parenthood provides over 60,000 preventive, reproductive, and wellness healthcare visits each year, and for some that is the only health care they can get or they can afford.

Madam Speaker, the Hyde amendment isn't going anywhere, whether we like it or not. So I submit to you that it is these types of bills that do nothing to bring Congress together and everything to drive us apart because it is bills like H.R. 7 that can harm the most vulnerable in my community and across our Nation. That is why I respectfully ask my colleagues to oppose H.R. 7.

Ms. CHENEY. Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, I yield 1½ minutes to the gentleman from New Jersey (Mr. GOTTHEIMER).

Mr. GOTTHEIMER. Madam Speaker, I rise today in opposition to the rule and the underlying bill, H.R. 7. Forty-four years ago this week, before I was even born, the Supreme Court recognized that the government has no business coming between a woman and her doctor when it comes to making personal medical decisions. Yet now, decades later, many in Washington seem determined to turn back the clock on progress on women's health and women's rights.

The new administration recently instituted a rule that would limit the ability of women around the world to access accurate information about their bodies and make their own medical decisions. And now the House is considering a radical bill that would not only undermine a woman's right to make her own healthcare decisions, but also her ability to even choose her own health insurance plan. On top of that, the bill would actually raise taxes on small businesses who provide their employees with access to comprehensive health coverage and impose unfair burdens on the women of the United States military. These are the facts.

I will always fight back against efforts to limit choice in women's health, and that is why I strongly oppose this bill. This past weekend we saw millions of women around the country and around the world, including hundreds in my own hometown of Wyckoff, New Jersey, where I was, rally against these backward and dangerous policies.

I urge my colleagues to turn their focus from rolling back women's rights

to actually focusing on getting things done for the people of this country—creating jobs and lowering taxes.

Ms. CHENEY. Madam Speaker, I reserve the balance of my time.

Mr. MCGOVERN. Madam Speaker, may I ask the gentlewoman from Wyoming if she has additional speakers.

Ms. CHENEY. Madam Speaker, I am prepared to close.

Mr. MCGOVERN. Madam Speaker, I yield myself such time as I may consume.

Madam Speaker, I include in the RECORD a letter from 23 faith-based organizations and communities urging Members to reject H.R. 7; a letter from the American Civil Liberties Union urging Members to vote "no" on H.R. 7; a letter from 44 women's health, religious, and other advocacy organizations strongly opposed to H.R. 7; and a letter from the American Association of University Women urging Members to oppose H.R. 7.

HOUSE OF REPRESENTATIVES,

Washington, DC, January 28, 2014

DEAR REPRESENTATIVE: As leaders of faith-based organizations and communities, we urge you to reject H.R. 7, a bill introduced as the so-called "No Taxpayer Funding for Abortion Act," which would harm a woman's health, economic security, and religious liberty by making coverage of abortion inaccessible in both public and private health plans. Enclosed is a statement of shared principles that compel us, together with 20 of our partner organizations from the faith community, to speak out against legislation like H.R. 7, which seeks to impose a narrowly-defined view of one religious viewpoint on every citizen, threatening the freedom of religion afforded to every individual by the U.S. Constitution.

H.R. 7 is sponsored in the House by Rep. Chris Smith (NJ-4). This bill would raise taxes on women and families, as well as small businesses, who access or offer abortion coverage as part of a comprehensive insurance plan. It would do so by denying women and families a premium assistance tax credit if they choose a plan in the health insurance marketplace that includes abortion, a proposal soundly rejected by Congress in the 2010 health reform debate. This bill would also deny small employers a Small Business Tax Credit for offering their workers comprehensive coverage that includes abortion. Further, as amended in committee, this bill would withhold abortion coverage from women enrolled in a multistate, private insurance plan. Taken together, these provisions would jeopardize coverage of abortion in the full private insurance market, risking coverage that many women and families have today; more than 80 percent of private health plans currently cover abortion care.

Also among its provisions, H.R. 7 would make permanent dangerous restrictions that withhold abortion coverage from women who access coverage or care through federal programs, such as women enrolled in Medicaid, federal employees, Native American women, and others. It would also permanently withhold abortion coverage from low-income women living in the District of Columbia, a federal ban that goes against the wishes of DC elected officials and voters. These provisions would disproportionately harm women struggling to make ends meet, risking their economic security, health and well-being, and ability to make personal decisions in accordance with their own conscience and religious or moral beliefs.

Please see the enclosed statement outlining shared principles of faith that compel us and our partners to speak out against this harmful proposal. As communities and organizations that represent diverse constituencies of faith, we stand united in opposition to H.R. 7 given the danger it poses to women and their families by jeopardizing affordable and accessible insurance coverage of abortion.

We urge you to reject H.R. 7 when it reaches the House floor for a vote.

Sincerely,

NANCY KAUFMAN,
CEO, *National Council
of Jewish Women.*

REV. HARRY KNOX,
President and CEO,
*Religious Coalition
for Reproductive
Choice.*

JON O'BRIEN,
President, *Catholics
for Choice.*

INTERFAITH STATEMENT OPPOSING RESTRICTIONS ON WOMEN'S HEALTH CARE OPTIONS

The undersigned religious, religiously affiliated, and faith-centered organizations and communities represent millions of people of faith committed to women's health and reproductive choices. We are deeply troubled by legislative efforts designed to restrict women's access to comprehensive reproductive health care options, including abortion, contraception, HIV/STD testing, cancer screenings, and other essential health services.

We recognize that issues surrounding women's reproductive choices—and those regarding abortion in particular—are complex. Although we come from diverse faith traditions, we all agree that proposals aimed at restricting access to reproductive healthcare would have devastating consequences for women and their families, particularly low-income women. We call on Congress and the President to reject these intolerable measures.

As people of faith, the following common principles compel us to speak out together against these proposals:

Striving for social justice and equal rights to health care: All too often, legislation is proposed that would create significant barriers to women's access to reproductive health options and make it harder for women to make their own reproductive choices based on their individual beliefs and consciences. We are especially concerned about efforts to de-fund the Title X Family Planning program and those organizations, such as Planned Parenthood, that serve as a key part of our social safety net. Title X health centers and clinics are on the public health front lines, serving low-income individuals and other vulnerable populations. These centers help men and women of limited means prevent unintended pregnancies; they promote prevention of, and treatment for HIV and other STDs; they offer life-saving cancer screenings; and they provide crucial medically-accurate information about sexual health. Title X providers ensure that women who want to have children get the information and care they need to promote a healthy pregnancy. As faith-centered organizations, we are committed to the most marginalized and the most vulnerable of our society, especially those with limited financial means or those who live in areas with limited access to services. Reducing health care options for some, based on their economic strata or geographic location, is profoundly unjust.

Respecting women's moral agency: We affirm women as moral agents who have the capacity, right, and responsibility to make their own decisions about sexuality, repro-

duction, and their families. Legislation that eliminates health coverage for and limits the availability of reproductive health care services through funding restrictions would severely limit a woman's ability to make decisions about her own health care and about how best to care for her family, guided by her own conscience, her personal circumstances, and her own moral or faith tradition.

Valuing compassion and the obligation to protect every woman's health and life: Restrictions on women's health care options endanger women's lives. In particular, we oppose proposals that would allow hospitals and individual health workers to refuse to provide abortion services to a woman, even when such care is necessary to save her life. As people of faith, we strongly believe that a health worker's right to refuse to provide certain services must not infringe on a woman's right to access the health care she needs. Above all, that refusal must not endanger her life. Health professionals and the organizations that support them have an obligation to ensure access to necessary services, whether directly or by referral to an accessible alternative health care provider.

Safeguarding religious liberty: We believe that one person's religious viewpoint must not be imposed on others. Different faiths, and even groups within a single faith community, hold varying views and opinions. Time and again, our nation has answered this diversity of opinions by upholding the founding principle of religious freedom. Reproductive freedoms are integrally bound with religious freedoms—a connection recognized by the Supreme Court's 1973 decision in *Roe v. Wade*. Women have a right to make reproductive health choices based on their own faith tradition, free from constraints imposed by those seeking to legislate one religious viewpoint or another. We oppose legislation that would erode Americans' constitutionally protected right to religious freedom.

As people of faith, we believe in compassion, justice, and the dignity of all women. We understand that those who would restrict women's access to comprehensive reproductive health care are often motivated by their religious beliefs and seek to impose their views on others. However, freedom of choice means that every person is valued as a moral decision-maker, free to make personal decisions about their reproductive lives based on their own religious beliefs and consciences. We cannot presume to tell others how best to inform and listen to their own consciences as they make decisions about whether and when to have children or how best to care for their families. Today, and every day, we stand up as people of faith for women's health and reproductive choices—and we urge our government to do the same.

Signed:

Anti-Defamation League; B'nai B'rith International; Catholics for Choice; Disciples Justice Action Network; Episcopal Women's Caucus; Global Faith and Justice Project, Horizons Foundation; Hadassah, The Women's Zionist Organization of America, Inc.; Jewish Council for Public Affairs; Jewish Council on Urban Affairs; Jewish Women International; Metropolitan Community Churches; Muslims for Progressive Values.

National Council of Jewish Women; Reconstructionist Rabbinical College and Jewish Reconstructionist Communities; Religious Coalition for Reproductive Choice; Religious Institute; Souforce; The Fellowship of Affirming Ministries; Unitarian Universalist Association of Congregations; Unitarian Universalist Ministers Association; Unitarian Universalist Women's Federation; United Church of Christ, Justice and Witness Ministries; Women's Alliance for Theology, Ethics and Ritual.

AMERICAN CIVIL LIBERTIES UNION,

Washington, DC, January 23, 2017.

VOTE "NO" ON H.R. 7, THE "NO TAXPAYER FUNDING FOR ABORTION AND ABORTION INSURANCE FULL DISCLOSURE ACT OF 2017"

DEAR REPRESENTATIVE: On behalf of the American Civil Liberties Union (ACLU) and our nearly two million members and supporters, we urge Members of the House of Representatives to vote no on H.R. 7, the so-called "No Taxpayer Funding for Abortion and Abortion Insurance Full Disclosure Act of 2017." The ACLU opposes this legislation, which would make harmful, discriminatory abortion coverage restrictions permanent and interfere with private health insurance coverage for abortion.

H.R. 7 would make permanent the Hyde Amendment and its progeny, discriminatory abortion coverage restrictions that single out and exclude abortion from a host of programs that fulfill the government's obligation to provide health care. These restrictions disproportionately impact those who already face significant barriers to care—low-income families, women of color, immigrants, young people, LGBTQ people, and those in rural areas. They discriminate against these women, who rely on the government for health care, by severely restricting their access to a health care service that is readily available to women of means and women with private insurance.

A woman in need of abortion care who does not have independent financial resources must scramble to raise the necessary funds, delay receiving care, and is often left with no choice but to carry to term in circumstances where she is physically, emotionally, or financially unprepared to care for a child. In fact, restricting Medicaid coverage of abortion forces one in four poor women seeking abortion to carry an unwanted pregnancy to term. When a woman seeking an abortion is denied one, she is three times more likely to fall into poverty than a woman who can obtain the care she needs. If a woman chooses to carry to term, Medicaid (and other federal insurance programs) offers her assistance for the necessary medical care. But if she needs to end her pregnancy, the same programs will deny her coverage for her abortion. The government should not interfere with a woman's personal medical decisions by selectively withholding benefits in this way.

H.R. 7 also takes particular aim at low-income women in the District of Columbia. Although the use of federal funds is currently restricted from covering most abortions, states are free to use their own funds to include abortion coverage in their medical assistance programs. The only exception is the District of Columbia. H.R. 7 would make permanent a provision that forbids the District from using its own locally raised non-federal dollars to provide coverage for abortion for its low-income residents. The D.C. abortion ban disenfranchises the District's residents, and allows non-resident Members of Congress who are not accountable to the people of the District to impose their own ideology upon the District's residents with impunity.

H.R. 7 would also impact women's ability to purchase private insurance that includes abortion coverage. It would revive the so-called Stupak Amendment, rejected by the 111th Congress, which would bar anyone receiving a federal premium assistance credit from buying a private insurance policy that includes abortion coverage on the Affordable Care Act's (ACA) insurance exchanges. This is not only an attempt to effectively ban abortion coverage in the exchanges by encouraging insurers to exclude it, but it would have a ripple effect on plans outside the exchanges that jeopardizes abortion coverage for millions of women. Further, the inaccurate disclosure requirements in H.R. 7

would push insurance companies to drop abortion coverage and deter women from purchasing plans that include such coverage by misleading them about the cost of purchasing these plans. These provisions are direct attacks on a woman's ability to make personal medical decisions with complete and accurate information.

Additionally, H.R. 7 rewrites tax law to penalize a single, legal, medical procedure: abortion. It would deny small businesses tax credits if the insurance they provide to their employees includes abortion coverage, effectively coercing employers to offer plans that exclude abortion. The bill would also deny millions of women and families premium tax credits if they purchase a health insurance plan that covers abortion, forcing them to forgo comprehensive health insurance plans in order to get the premium assistance they need. This manipulation of the tax code is simply government interference in taxpayers' private medical decisions and should be rejected.

Abortion is basic, constitutionally-protected health care for women. Yet H.R. 7 attacks women's fundamental right and access to abortion. It first targets women—particularly poor women and women of color who rely on the government for their health care—and seeks to permanently deny them coverage for a benefit to which they are entitled. Then, under the guise of “safeguarding” taxpayer dollars, H.R. 7 advances an aggressive campaign to destabilize the insurance market for abortion coverage. Congress should be eliminating barriers to women's ability to exercise their constitutionally protected right to safe, legal abortion. Instead, H.R. 7 would interfere with women's personal medical decisions by putting even more bathers in the way.

For these reasons, the ACLU opposes H.R. 7 and urges members of the House of Representatives to vote no.

Sincerely,

FAIZ SHAKIR,
*Director, Washington
Legislative Office.*
GEORGEANNE M. USOVA,
Legislative Counsel.

DEAR REPRESENTATIVE: The undersigned organizations strongly urge you to oppose the deceptive “No Taxpayer Funding for Abortion Act” (H.R. 7), a bill designed to fundamentally alter the health insurance market—from a market where abortion coverage is the industry standard to one where abortion coverage is eliminated. H.R. 7 does this by changing the laws that govern both private and public insurance and by twisting the tax code into a tool to take away abortion coverage from women who have it. Ultimately, this bill is designed to deny women the decision whether or not to have an abortion by taking away their insurance coverage.

H.R. 7 twists the tax code into a tool to take away health insurance coverage that women have today. For example, the bill would deny millions of women and families premium tax credits if they purchase a health insurance plan that covers abortion. The bill would force these women—particularly low and moderate income women—to forego a health insurance plan that includes abortion in order to get the premium assistance they need. H.R. 7 would also raise taxes on small businesses by denying the Small Business Health Tax Credit to businesses that offer health insurance that covers abortion. This credit was created to encourage small businesses to offer health insurance to their employees by making it more affordable. This bill would penalize employers for choosing comprehensive coverage for their employees and their families.

H.R. 7 would cause the entire insurance market to drop abortion coverage. The impact of H.R. 7's changes could be that women across the country lose comprehensive health insurance that includes abortion coverage. The elimination of abortion coverage in the Marketplaces is expected to set the industry standard, meaning that all plans, inside and outside the Marketplace, could drop such coverage.

H.R. 7 introduces a new ban on private insurance by forcing all multi-state insurance plans to drop abortion coverage. Currently, the law requires that at least one multi-state health insurance plan in a Marketplace must not provide abortion coverage (except for narrow exceptions). H.R. 7 would replace this requirement with a dramatic restriction banning abortion coverage in all multi-state health insurance plans.

The Rules Committee Print of H.R. 7 includes new provisions that would impose inaccurate and misleading disclosure requirements regarding abortion coverage in plans offered in the Marketplace. This bill overrides existing provisions of the Affordable Care Act that provide consumers with information about their health plans, and instead adds new requirements intended to push insurance companies to drop abortion coverage and deter women from purchasing plans that include such coverage. Moreover, H.R. 7 wrongly asserts that there is a “surcharge” in plans that cover abortion, and would require women to be misled with this falsehood. These new provisions are not about disclosure, but about eliminating abortion coverage, in line with the rest of the bill's dangerous provisions.

H.R. 7 would permanently ban federal health insurance programs such as Medicaid from including abortion coverage. H.R. 7 would codify harmful legislative riders that deny abortion coverage to women who receive health insurance through the federal government. Moreover, H.R. 7 makes permanent a rider that denies the District of Columbia the ability to decide whether to use its own local funds to provide abortion coverage. These bans disproportionately affect women of color and low-income women, denying these women the ability to make their own important health care decisions.

H.R. 7 would endanger women's health by eliminating coverage of abortion even in circumstances where a woman needs an abortion to prevent severe, permanent damage to her health. Because H.R. 7 only makes exceptions in the cases where the woman's life is endangered, or where she is the survivor of rape or incest, it would leave women whose health is seriously threatened by their pregnancies without access to the care their doctors recommend to protect their health. The impact can be especially harmful to women underserved by the health care system and women with serious health problems.

In summary, H.R. 7 would deny millions of women the ability to make their own decision about whether to have an abortion. H.R. 7 is a dangerous bill that jeopardizes women's health by directly banning abortion coverage, by raising taxes on families and small businesses that purchase comprehensive insurance coverage, and by imposing “disclosure” requirements that encourage the elimination of abortion coverage. The intent and impact of H.R. 7 is to forever eliminate coverage of abortion in all insurance markets. We strongly urge you to reject this bill.

Sincerely,

Advocates for Youth; American Association of University Women (AAUW); American Civil Liberties Union, American Nurses Association, American Public Health Association; American Society for Reproductive Medicine; Association of Reproductive Health Professionals (ARHP); Asian & Pa-

cific Islander American Health Forum; Black Women's Health Imperative; Catholics for Choice.

Center for Reproductive Rights; Choice USA; Feminist Majority; Hadassah, The Women's Zionist Organization of America, Inc.; Jewish Women International; Joint Action Committee for Political Affairs; Medical Students for Choice; Methodist Federation for Social Action; NARAL Pro-Choice America; National Abortion Federation.

National Asian Pacific American Women's Forum; National Center for Lesbian Rights; National Council of Jewish Women; National Family Planning & Reproductive Health Association; National Health Law Program; National Latina Institute for Reproductive Health; National Organization for Women; National Partnership for Women & Families; National Women's Health Network; National Women's Law Center; People For the American Way.

Physicians for Reproductive Health; Planned Parenthood Federation of America; Population Connection Action Fund; Population Institute; Raising Women's Voices for the Health Care We Need; Religious Coalition for Reproductive Choice; Religious Institute; Reproductive Health Technologies Project; Sexuality Information and Education Council of the United States (SIECUS); Unitarian Universalist Association; Unitarian Universalist Women's Federation; United Church of Christ, Justice and Witness Ministries; WV Citizen Action Group.

AAUW EMPOWERING WOMEN SINCE 1881,

Washington, DC, January 24, 2017.

DEAR REPRESENTATIVE: On behalf of the more than 170,000 bipartisan members and supporters of the American Association of University Women (AAUW), I urge you to oppose H.R. 7, a dangerous limitation on abortion that puts women's health and rights at risk. H.R. 7 would withhold abortion coverage from virtually all women in the U.S. and potentially push insurers into ceasing coverage of abortion care. This bill is a part of a political strategy that seeks to interfere with women's personal decision-making around their reproductive health care.

AAUW supports the right of every woman to access safe, accessible, affordable, and comprehensive family planning and reproductive health services. We believe that all women should be able to make their own decisions with advice and support from those they trust the most. We know that women look to doctors, family members, and other trusted individuals, not politicians, to make important medical decisions about their health.

H.R. 7 would make abortion restrictions that are often built into annual appropriations bills permanent. Such an action would withhold abortion coverage from almost all women—those who rely on Medicaid, federal insurance plans and health programs, as well as those who are Peace Corps Volunteers, Native American women, Washington, D.C. residents, and many others. In addition, by creating burdensome regulations for insurers to cover abortion services, many more women would lose access to the care they need. When policymakers deny women insurance coverage for abortion, women are forced to either carry the pregnancy to term or pay for care out of their own pockets. Consequently, cutting off access to or placing strict limitations on abortion can have profoundly harmful effects on public health, particularly for those who already face significant barriers to receiving care, such as low-income women, immigrant women, LGBTQ people, and women of color.

Again, I urge you to oppose H.R. 7, a dangerous limitation on abortion that puts

women's health and rights at risk. Votes associated with this legislation may be scored in the AAUW Action Fund Congressional Voting Record for the 115th Congress. Please do not hesitate to contact me at 202/785-7720, or Anne Hedgepeth, Senior Government Relations Manager, if you have any questions. Sincerely,

LISA M. MAATZ,
Vice President of Government
Relations and Advocacy.

Mr. MCGOVERN. Madam Speaker, let me begin my closing by reminding people that we are about to vote on the rule. The rule defines how we are going to consider this legislation. This is a closed rule. This is a Putin rule. This is a rule that allows no opposing viewpoints to be brought before this Chamber to be debated and voted on. It is completely closed. On top of that, it didn't go through regular order.

Now, I know my colleagues will say, well, it went through regular order in the previous Congress. But there are 55 new Members of the House in this Congress, and I think they have a right to expect regular order from the leadership of this House when legislation is brought to the floor. The rule should be rejected because it is closed.

I would urge my colleagues, even those who may be sympathetic to the underlying legislation to, at some point, stand up to your leadership and say, "Enough of this closed process." Open this place up a little bit. This is supposed to be the greatest deliberative body in the world, and yet we do everything but deliberate. At some point, I hope some of my Republican colleagues will be brave enough to stand with us who are calling for a more open process.

I also urge my colleagues to vote "no" on the underlying bill.

I also include in the RECORD an article from Politico entitled, "Study: Abortion Rate Falls to Record Low."

[From Politico, Jan. 17, 2017]

STUDY: ABORTION RATE FALLS TO RECORD
LOW

(By Brianna Ehley)

The U.S. abortion rate dipped to its lowest level on record in 2014, according to a new study by the Guttmacher Institute.

The abortion rate dropped 14 percent between 2011 and 2014 to 14.6 abortions per 1,000 women, researchers said. During the same time period, the number of abortions dropped 12 percent to 926,200 in 2014.

Researchers suggested two main reasons for the decline: a combination of greater access to contraception and less access to abortion services in states that have enacted new restrictions.

The number of clinics providing abortions dipped 6 percent between 2011 and 2014, with the largest declines in access in the Midwest and the South.

"Abortion restrictions and clinic closures mean that patients may need to travel greater distances to access services," Rachel Jones, the study's lead author, said in a statement. "Some of the abortion rate decline is likely attributable to women who were prevented from accessing needed services."

Mr. MCGOVERN. Madam Speaker, part of the reason for that is because women are having more access to good

health care. Part of the reason why that number is getting lower is because of organizations like Planned Parenthood, which provide clinics and counseling and contraception to young women so that we can actually avoid more people being in the situation where they have to confront the issue of abortion. And yet my colleagues' next salvo is going to be going after Planned Parenthood. The abortion rate in this country is going down.

The underlying bill is not about making sure that taxpayer money doesn't go to fund abortion. That is what the Hyde amendment does.

The Affordable Care Act, by the way, makes it clear that no portion of the premium tax credits may be used to pay for the portion of comprehensive health coverage that is purchased in the marketplace that relates to abortion services. That is not what this is about.

This is basically the first attempt to really go after the basic constitutional right for a woman to be able to choose when it comes to abortion services. That is what this is about. The leadership of this House—indeed, the President of the United States—has made it clear they want to repeal Roe v. Wade. They want to put Justices on the Supreme Court who will repeal that decision. They want to pass legislation that will do everything to be able to deny women that basic right. That is what is going on here.

Finally, Madam Speaker, I am asking people to vote "no" on the previous question so that we can actually debate and vote on this issue of requiring Presidential candidates and Presidents to release their tax returns. I say to my colleagues in all sincerity, this President's refusal to release his tax returns, all these conflicts of interest that he has, this is a White House on a collision course with corruption. Donald Trump said he wanted to come to Washington to drain the swamp, but by not releasing his tax returns, by allowing all these conflicts of interest to remain, he is bringing the swamp to the White House. Enough.

Let us vote for transparency here. Let us vote in a way that the majority of Americans think we ought to do, and that is to require this President to come clean, to show us what his tax returns are, to show us what he is hiding, to show us where his investments are, to show us if there are any dealings with Russia or Putin or whatever.

I urge my colleagues to vote "no" on the previous question so we can have that opportunity to be able to debate that issue, because if you don't vote "no," I can guarantee you that the Committee on Rules will never make it in order. The Committee on Rules never makes anything in order that the leadership of this House doesn't put its rubber stamp on. I think that that is unfortunate. As I said before, the Committee on Rules is becoming a place where democracy goes to die. It is about time that my colleagues on both

sides of the aisle stand up and say, "Enough. Let's open this place up."

Madam Speaker, I yield back the balance of my time.

The SPEAKER pro tempore. Members are reminded to refrain from engaging in personalities toward the President.

Ms. CHENEY. Madam Speaker, I yield myself such time as I may consume.

I am really heartened today, Madam Speaker, to hear so much concern from my colleagues on the other side of the aisle about making sure that patients and individuals have the right to make decisions about their own health care. I would expect, then, to see support from the other side of the aisle when we are in a position where we are putting in place our replacement for ObamaCare. That is one of the main reasons we are repealing ObamaCare, getting the government out of the business of telling people what they can and can't have with respect to their own health care. That is not the issue that we are debating here today, however, Madam Speaker.

I want to thank the gentleman from New Jersey for his tireless work on this issue and for introducing this bipartisan bill. A majority of Americans across the country share the view that we must continue to work to protect the lives of mothers and their unborn children. As you have already heard, Madam Speaker, the Hyde amendment is responsible for saving the lives of at least 2 million babies, the most vulnerable among us.

Codifying a permanent restriction on the use of taxpayer funding for abortions is long overdue. I urge adoption of both the rule and H.R. 7 so we can continue to protect and save lives.

Ms. JACKSON LEE. Madam Speaker, I rise again in strong opposition to the rule for H.R. 7, the so-called "No Taxpayer Funding for Abortion Act," and the underlying bill.

I oppose this bill because it is unnecessary, puts the lives of women at risk, interferes with women's constitutionally guaranteed right of privacy, and diverts our attention from the real problems facing the American people.

A more accurate short title for this bill would be the "Violating the Rights of Women Act of 2017!"

Instead of resuming their annual War on Women, our colleagues across the aisle should be working with Democrats to build upon the "Middle-Class Economics" championed by the Obama Administration that have succeeded in ending the economic meltdown it inherited in 2009 and revived the economy to the point where today we have the highest rate of growth and lowest rate of unemployment since the boom years of the Clinton Administration.

We could and should instead be voting to raise the minimum wage to \$15.00 per hour so that people who work hard and play by the rules do not have raise their families in poverty.

A far better use of our time would be to provide help to unemployed job-hunters by making access to community college affordable to every person looking to make a new start in life.

Instead of voting to abridge the constitutional rights of women for the umpteenth time, we should bring to the floor for a first vote comprehensive immigration reform legislation or legislations repairing the harm to the Voting Rights Act of 1965 by the Supreme Court's decision in *Shelby County v. Holder*.

Madam Speaker, the one thing we should not be doing is debating irresponsible "messaging bills" that abridge the rights of women and have absolutely no chance of overriding a presidential veto.

The version of H.R. 7 before us now is as bad today as it was when the House Republican leadership insisted on bringing it to a vote a year ago. The other draconian provisions of that terrible bill are retained in H.R. 7, which would:

1. Prohibit federal funds from being used for any health benefits coverage that includes coverage of abortion. (Thus making permanent existing federal policies.)

2. Prohibit the inclusion of abortion in any health care service furnished by a federal or District of Columbia health care facility or by any physician or other individual employed by the federal government or the District.

3. Apply such prohibitions to District of Columbia funds.

4. Prohibit individuals from receiving a refundable federal tax credit, or any cost-sharing reductions, for purchasing a qualified health plan that includes coverage for abortions.

5. Prohibit small employers from receiving the small-employer health insurance credit provided by the health care law if the health plans or benefits that are purchased provide abortion coverage.

If H.R. 7 were enacted, millions of families and small businesses with private health insurance plans that offer abortion coverage would be faced with tax increases, making the cost of health care insurance even more expensive.

Under the Affordable Care Act, insurers are able to offer abortion coverage and receive federal offsets for premiums as long as enrollees pay for the abortion coverage from separate, private funds.

If enacted, H.R. 7 would deny federal subsidies or credits to private health insurance plans that offer abortion coverage even if that coverage is paid for from private funds.

This would inevitably lead to private health insurance companies dropping abortion coverage leaving millions of women without access to affordable, comprehensive health care.

Currently, 87% of private insurance health care plans offered through employers cover abortion.

If H.R. 7 were to become law, consumer Options for private health insurance plans would be unnecessarily restricted and the tax burden on these policy holders would increase significantly.

H.R. 7 would also deny tax credits to small businesses that offer their employees insurance plans that cover abortion, which would have a significant impact on millions of families across the nation who would no longer be able to take advantage of existing tax credits and deductions for the cost of their health care.

For example, small businesses that offer health plans that cover abortions would no longer be eligible for the Small Business Health Tax Credit—potentially worth 35%-50% of the cost of their premiums—threatening 4 million small businesses.

Self-employed Americans who are able to deduct the cost of their comprehensive health insurance from their taxable income will also be denied similar tax credits and face higher taxes.

H.R. 7 would also undermine the District of Columbia's home rule by restricting its use of funds for abortion care to low-income women.

The Hyde Amendment stipulates that no taxpayer dollars are to be used for abortion care, and has narrow exceptions for rape, incest, and health complications that arise from pregnancy which put the mother's life in danger.

H.R. 7 would restrict women's access to reproductive health care even further by narrowing the already stringent requirements set forth in the Hyde Amendment.

When the Affordable Care Act was signed into law, the President issued an Executive Order to "ensure that Federal funds are not used for abortion services."

This version of H.R. 7 goes far beyond the safeguards established under the Affordable Care Act, and sets a dangerous precedent for the future of women's reproductive health in this country because it includes two new provisions that were added at the nth hour but have never received a hearing or a mark-up.

These new provisions would (1) ban abortion coverage in multi-state health plans available under the ACA; and (2) mandate that health plans mislead consumers about abortion coverage by requiring all plans in the health-insurance exchanges that include abortion coverage to display that fact prominently in all advertising, marketing materials, or information from the insurer but interestingly, does not require the same disclosure from plans that do not cover abortion.

Madam Speaker, H.R. 7 would also force health plans to mislead consumers about the law's treatment of abortion.

As a concession to anti-choice lawmakers, the ACA requires insurance plans participating in the new health system to segregate monies used for abortion services from all other funds.

In order to aid in identifying these funds and simplify the process of segregating general premium dollars from those used to cover abortion services, the ACA requires that health plans estimate the cost of abortion coverage at no less than \$1 per enrollee per month.

H.R. 7 would require plans covering abortion to misrepresent this practice as an "abortion surcharge," which is to be disclosed and identified as a portion of the consumer's premium.

By describing abortion coverage in this way, H.R.7 makes it look as if 7 though it is an added, extra cost, available only at an additional fee, when in fact it is not.

Taken together, the provisions in H.R. 7 have the effect, and possibly the intent, of arbitrarily infringing women's reproductive freedoms and pose a nationwide threat to the health and wellbeing of American women and a direct challenge to the Supreme Court's ruling in *Roe V. Wade*.

Madam Speaker, one of the most detestable aspects of this bill is that it would curb access to care for women in the most desperate of circumstances.

Women like Danielle Deaver, who was 22 weeks pregnant when her water broke. Tests showed that Danielle had suffered anhydramnios, a premature rupture of the membranes before the fetus has achieved viability.

This condition meant that the fetus likely would be born with a shortening of muscle tissue that results in the inability to move limbs. In addition, Danielle's fetus likely would suffer deformities to the face and head, and the lungs were unlikely to develop beyond the 22-week point.

There was less than a 10% chance that, if born, Danielle's baby would be able to breathe on its own and only a 2% chance the baby would be able to eat on its own.

H.R. 7 hurts women like Vikki Stella, a diabetic, who discovered months into her pregnancy that the fetus she was carrying suffered from several major anomalies and had no chance of survival. Because of Vikki's diabetes, her doctor determined that induced labor and Caesarian section were both riskier procedures for Vikki than an abortion.

Every pregnancy is different. No politician knows, or has the right to assume he knows, what is best for a woman and her family.

These are decisions that properly must be left to women to make, in consultation with their partners, doctors, and their God.

H.R. 7 lacks the necessary exceptions to protect the health and life of the mother.

H.R. 7 is an unconstitutional infringement on the right to privacy, as interpreted by the Supreme Court in a long line of cases going back to *Griswold v. Connecticut* in 1965 and *Roe v. Wade* decided in 1973.

In *Roe v. Wade*, the Court held that a state could not prohibit a woman from exercising her right to terminate a pregnancy in order to protect her health prior to viability.

While many factors go into determining fetal viability, the consensus of the medical community is that viability is acknowledged as not occurring prior to 24 weeks gestation.

Supreme Court precedents make it clear that neither Congress nor a state legislature can declare any one element—"be it weeks of gestation or fetal weight or any other single factor—as the determinant" of viability. *Coloyal v. Franklin*, 439 U.S. 379,388-89 (1979).

The constitutionally protected right to privacy encompasses the right of women to choose to terminate a pregnancy before viability, and even later where continuing to term poses a threat to her health and safety.

This right of privacy was hard won and must be preserved inviolate.

The bill before us threatens this hard won right for women and must be defeated.

I urge all members to join me in opposing the rule and the underlying bill.

The material previously referred to by Mr. MCGOVERN is as follows:

AN AMENDMENT TO H. RES. 55 OFFERED BY
MR. MCGOVERN

At the end of the resolution, add the following new sections:

SEC. 2. Immediately upon adoption of this resolution the Speaker shall, pursuant to clause 2(b) of rule XVIII, declare the House resolved into the Committee of the Whole House on the state of the Union for consideration of the bill (H.R. 305) to amend the Ethics in Government Act of 1978 to require the disclosure of certain tax returns by Presidents and certain candidates for the office of the President, and for other purposes. The first reading of the bill shall be dispensed with. All points of order against consideration of the bill are waived. General debate shall be confined to the bill and shall not exceed one hour equally divided among and controlled by the respective chairs and ranking minority members of the Committees on

Ways and Means and Oversight and Government Reform. After general debate the bill shall be considered for amendment under the five-minute rule. All points of order against provisions in the bill are waived. At the conclusion of consideration of the bill for amendment the Committee shall rise and report the bill to the House with such amendments as may have been adopted. The previous question shall be considered as ordered on the bill and amendments thereto to final passage without intervening motion except one motion to recommit with or without instructions. If the Committee of the Whole rises and reports that it has come to no resolution on the bill, then on the next legislative day the House shall, immediately after the third daily order of business under clause 1 of rule XIV, resolve into the Committee of the Whole for further consideration of the bill.

SEC. 3. Clause 1(c) of rule XIX shall not apply to the consideration of H.R. 305.

THE VOTE ON THE PREVIOUS QUESTION: WHAT IT REALLY MEANS

This vote, the vote on whether to order the previous question on a special rule, is not merely a procedural vote. A vote against ordering the previous question is a vote against the Republican majority agenda and a vote to allow the Democratic minority to offer an alternative plan. It is a vote about what the House should be debating.

Mr. Clarence Cannon's Precedents of the House of Representatives (VI, 308-311), describes the vote on the previous question on the rule as "a motion to direct or control the consideration of the subject before the House being made by the Member in charge." To defeat the previous question is to give the opposition a chance to decide the subject before the House. Cannon cites the Speaker's ruling of January 13, 1920, to the effect that "the refusal of the House to sustain the demand for the previous question passes the control of the resolution to the opposition" in order to offer an amendment. On March 15, 1909, a member of the majority party offered a rule resolution. The House defeated the previous question and a member of the opposition rose to a parliamentary inquiry, asking who was entitled to recognition. Speaker Joseph G. Cannon (R-Illinois) said: "The previous question having been refused, the gentleman from New York, Mr. Fitzgerald, who had asked the gentleman to yield to him for an amendment, is entitled to the first recognition."

The Republican majority may say "the vote on the previous question is simply a vote on whether to proceed to an immediate vote on adopting the resolution . . . [and] has no substantive legislative or policy implications whatsoever." But that is not what they have always said. Listen to the Republican Leadership Manual on the Legislative Process in the United States House of Representatives, (6th edition, page 135). Here's how the Republicans describe the previous question vote in their own manual: "Although it is generally not possible to amend the rule because the majority Member controlling the time will not yield for the purpose of offering an amendment, the same result may be achieved by voting down the previous question on the rule . . . When the motion for the previous question is defeated, control of the time passes to the Member who led the opposition to ordering the previous question. That Member, because he then controls the time, may offer an amendment to the rule, or yield for the purpose of amendment."

In Deschler's Procedure in the U.S. House of Representatives, the subchapter titled "Amending Special Rules" states: "a refusal

to order the previous question on such a rule [a special rule reported from the Committee on Rules] opens the resolution to amendment and further debate." (Chapter 21, section 21.2) Section 21.3 continues: "Upon rejection of the motion for the previous question on a resolution reported from the Committee on Rules, control shifts to the Member leading the opposition to the previous question, who may offer a proper amendment or motion and who controls the time for debate thereon."

Clearly, the vote on the previous question on a rule does have substantive policy implications. It is one of the only available tools for those who oppose the Republican majority's agenda and allows those with alternative views the opportunity to offer an alternative plan.

Ms. CHENEY. Madam Speaker, I yield back the balance of my time, and I move the previous question on the resolution.

The SPEAKER pro tempore. The question is on ordering the previous question.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

Mr. MCGOVERN. Madam Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 9 of rule XX, the Chair will reduce to 5 minutes the minimum time for any electronic vote on the question of adoption of the resolution.

The vote was taken by electronic device, and there were—yeas 233, nays 187, not voting 12, as follows:

[Roll No. 62]

YEAS—233

Abraham	Crawford	Higgins (LA)
Aderholt	Culberson	Hill
Allen	Curbelo (FL)	Holding
Amash	Davidson	Hollingsworth
Amodei	Davis, Rodney	Hudson
Arrington	Denham	Huizenga
Babin	Dent	Hultgren
Bacon	DeSantis	Hunter
Banks (IN)	DesJarlais	Hurd
Barletta	Diaz-Balart	Issa
Barr	Donovan	Jenkins (KS)
Barton	Duffy	Jenkins (WV)
Bergman	Duncan (SC)	Johnson (LA)
Biggs	Duncan (TN)	Johnson (OH)
Bilirakis	Dunn	Johnson, Sam
Bishop (MI)	Emmer	Jordan
Bishop (UT)	Farenthold	Katko
Black	Faso	Kelly (MS)
Blackburn	Ferguson	Kelly (PA)
Blum	Fitzpatrick	King (IA)
Bost	Fleischmann	King (NY)
Brady (TX)	Flores	Kinzinger
Brat	Fortenberry	Knight
Bridenstine	Foxx	Kustoff (TN)
Brooks (AL)	Franks (AZ)	Labrador
Brooks (IN)	Frelinghuysen	LaHood
Buchanan	Gaetz	LaMalfa
Buck	Gallagher	Lamborn
Bucshon	Garrett	Lance
Budd	Gibbs	Latta
Burgess	Gohmert	Lewis (MN)
Byrne	Goodlatte	LoBiondo
Calvert	Gosar	Long
Carter (GA)	Gowdy	Loudermilk
Carter (TX)	Granger	Love
Chabot	Graves (GA)	Lucas
Chaffetz	Graves (LA)	Luetkemeyer
Cheney	Graves (MO)	MacArthur
Cole	Griffith	Marchant
Collins (GA)	Grothman	Marino
Collins (NY)	Guthrie	Marshall
Comer	Harper	Massie
Comstock	Harris	Mast
Conaway	Hartzler	McCarthy
Cook	Hensarling	McCaull
Costello (PA)	Herrera Beutler	McClintock
Cramer	Hice, Jody B.	McHenry

McKinley	Rogers (AL)	Taylor
McMorris	Rogers (KY)	Tenney
Rodgers	Rohrabacher	Thompson (PA)
McSally	Rokita	Thornberry
Meadows	Rooney, Francis	Tiberi
Meehan	Rooney, Thomas	Tipton
Messer	J.	Trott
Mitchell	Ros-Lehtinen	Turner
Moolenaar	Roskam	Upton
Mooney (WV)	Ross	Valadao
Mullin	Rothfus	Wagner
Murphy (PA)	Rouzer	Walberg
Newhouse	Royce (CA)	Walden
Noem	Russell	Walker
Nunes	Rutherford	Walorski
Olson	Sanford	Walters, Mimi
Palazzo	Scalise	Weber (FL)
Palmer	Schweikert	Webster (TX)
Paulsen	Scott, Austin	Wenstrup
Pearce	Sensenbrenner	Westerman
Perry	Sessions	Williams
Pittenger	Shimkus	Wilson (SC)
Poe (TX)	Shuster	Wittman
Poliquin	Simpson	Womack
Posey	Smith (MO)	Woodall
Ratcliffe	Smith (NE)	Yoder
Reed	Smith (NJ)	Yoho
Reichert	Smith (TX)	Young (AK)
Renacci	Smucker	Young (IA)
Rice (SC)	Stefanik	Zeldin
Roby	Stewart	
Roe (TN)	Stivers	

NAYS—187

Adams	Fudge	Napolitano
Aguilar	Gabbard	Neal
Barragan	Gallego	Nolan
Bass	Garamendi	Norcross
Beatty	Gonzalez (TX)	O'Halleran
Bera	Gottheimer	O'Rourke
Beyer	Green, Al	Pallone
Bishop (GA)	Green, Gene	Panetta
Blunt Rochester	Grijalva	Pascarell
Bonamici	Gutiérrez	Pelosi
Boyle, Brendan	Hanabusa	Perlmutter
F.	Hastings	Peters
Brady (PA)	Heck	Peterson
Brown (MD)	Higgins (NY)	Pingree
Brownley (CA)	Himes	Pocan
Bustos	Hoyer	Polis
Butterfield	Huffman	Price (NC)
Capuano	Jackson Lee	Quigley
Carbajal	Jayapal	Raskin
Cárdenas	Jeffries	Rice (NY)
Carson (IN)	Johnson (GA)	Richmond
Cartwright	Kaptur	Rosen
Castor (FL)	Keating	Royal-Allard
Castro (TX)	Kelly (IL)	Ruiz
Chu, Judy	Kennedy	Ruppersberger
Ciциlline	Khanna	Ryan (OH)
Clark (MA)	Kihuen	Sánchez
Clarke (NY)	Kildee	Sarbanes
Clay	Kilmer	Schakowsky
Cleaver	Kind	Schiff
Clyburn	Krishnamoorthi	Schneider
Cohen	Kuster (NH)	Schrader
Connolly	Langevin	Scott (VA)
Conyers	Larsen (WA)	Scott, David
Cooper	Larson (CT)	Serrano
Correa	Lawrence	Sewell (AL)
Costa	Lawson (FL)	Shea-Porter
Courtney	Lee	Sherman
Crist	Levin	Sinema
Crowley	Lewis (GA)	Sires
Cuellar	Lieu, Ted	Smith (WA)
Cummings	Lipinski	Soto
Davis (CA)	Loeb sack	Speier
Davis, Danny	Lofgren	Suozi
DeFazio	Lowenthal	Swalwell (CA)
DeGette	Lowey	Takano
Delaney	Lujan Grisham,	Thompson (CA)
DeLauro	M.	Thompson (MS)
DelBene	Lujan, Ben Ray	Titus
Demings	Lynch	Tonko
DeSaulnier	Maloney,	Torres
Deuth	Carolyn B.	Tsongas
Dingell	Maloney, Sean	Vargas
Doggett	Matsui	Veasey
Doyle, Michael	McCullum	Vela
F.	McEachin	Visclosky
Ellison	McGovern	Walz
Engel	McNerney	Wasserman
Eshoo	Meeks	Schultz
Espallat	Meng	Walters, Maxine
Esty	Moore	Watson Coleman
Evans	Moulton	Welch
Foster	Murphy (FL)	Wilson (FL)
Frankel (FL)	Nadler	Yarmuth

NOT VOTING—12

Blumenauer Joyce (OH) Rush
Coffman Mulvaney Slaughter
Johnson, E. B. Payne Velázquez
Jones Price, Tom (GA) Zinke

□ 1404

Mr. VEASEY changed his vote from “yea” to “nay.”

Mr. COSTELLO of Pennsylvania changed his vote from “nay” to “yea.” So the previous question was ordered.

The result of the vote was announced as above recorded.

The SPEAKER pro tempore (Ms. FOXX). The question is on the resolution.

The question was taken; and the Speaker pro tempore announced that the ayes appeared to have it.

RECORDED VOTE

Mr. MCGOVERN. Madam Speaker, I demand a recorded vote.

A recorded vote was ordered.

The SPEAKER pro tempore. This is a 5-minute vote.

The vote was taken by electronic device, and there were—ayes 236, noes 183, not voting 13, as follows:

[Roll No. 63]

AYES—236

Abraham Duncan (SC) Kustoff (TN)
Aderholt Labrador
Allen Dunn LaHood
Amash Emmer LaMalfa
Amodei Farenthold Lamborn
Arrington Faso Lance
Babin Ferguson Latta
Bacon Fitzpatrick Lewis (MN)
Banks (IN) Fleischmann Lipinski
Barletta Flores LoBiondo
Barr Fortenberry Long
Barton Foxx Loudermill
Bergman Franks (AZ) Love
Biggs Frelinghuysen Lucas
Bilirakis Gaetz Luetkemeyer
Bishop (MI) Gallagher MacArthur
Bishop (UT) Garrett Marchant
Black Gibbs Marino
Blackburn Gohmert Marshall
Blum Goodlatte Massie
Bost Gosar Mast
Brady (TX) Gowdy McCarthy
Brat Granger McCaul
Bridenstine Graves (GA) McClintock
Brooks (AL) Graves (LA) McHenry
Brooks (IN) McKinley
Buchanan Griffith McMorris
Buck Grothman Rodgers
Bucshon Guthrie McSally
Budd Harper Meadows
Burgess Harris Meehan
Byrne Hartzler Messer
Calvert Hensarling Mitchell
Carter (GA) Herrera Beutler Moolenaar
Carter (TX) Hice, Jody B. Mooney (WV)
Chabot Higgins (LA) Mullin
Chaffetz Hill Murphy (PA)
Cheney Holding Newhouse
Cole Hollingsworth Noem
Collins (GA) Hudson Nunes
Collins (NY) Huizenga Olson
Comer Hultgren Palazzo
Comstock Hunter Palmer
Conaway Hurd Paulsen
Cook Issa Pearce
Costello (PA) Jenkins (KS) Perry
Cramer Jenkins (WV) Peterson
Crawford Johnson (LA) Pittenger
Culberson Johnson (OH) Poe (TX)
Curbelo (FL) Johnson, Sam Poliquin
Davidson Jordan Posey
Davis, Rodney Joyce (OH) Ratcliffe
Denham Katko Reed
Dent Kelly (MS) Reichert
DeSantis Kelly (PA) Renacci
DesJarlais King (IA) Rice (SC)
Diaz-Balart King (NY) Roby
Donovan Kinzinger Roe (TN)
Duffy Knight Rogers (AL)

Rogers (KY)
Rohrabacher
Rokita
Rooney, Francis
Rooney, Thomas J.
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce (CA)
Russell
Rutherford
Sanford
Scalise
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus

Shuster
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Smucker
Stefanik
Stewart
Stivers
Taylor
Tenney
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner

Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Zeldin

NOES—183

Adams
Aguilar
Barragan
Bass
Beatty
Bera
Beyer
Bishop (GA)
Blunt Rochester
Bonamici
Boyle, Brendan F.
Brady (PA)
Brown (MD)
Brownley (CA)
Bustos
Butterfield
Capuano
Carbajal
Cárdenas
Carson (IN)
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Cohen
Connolly
Conyers
Cooper
Correa
Costa
Courtney
Crist
Crowley
Cuellar
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Demings
DeSaulnier
Deutch
Dingell
Doggett
Doyle, Michael F.
Ellison
Engel
Eshoo
Española
Esty
Evans
Foster

Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Gonzalez (TX)
Gottheimer
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hanabusa
Hastings
Heck
Higgins (NY)
Himes
Hoyer
Jackson Lee
Jayapal
Jeffries
Johnson (GA)
Kaptur
Keating
Kelly (IL)
Kennedy
Khanna
Kihuen
Kildee
Kilmer
Kind
Krishnamoorthi
Kuster (NH)
Langevin
Larsen (WA)
Larson (CT)
Lawrence
Lawson (FL)
Lee
Levin
Lewis (GA)
Lieu, Ted
Loebbeck
Lofgren
Lowenthal
Lowe
Lujan Grisham, M.
Luján, Ben Ray
Lynch
Maloney, Carolyn B.
Maloney, Sean
Matsui
McCollum
McEachin
McGovern
McNerney
Meeke
Meng
Moore
Moulton
Murphy (FL)
Nadler

Napolitano
Neal
Nolan
Norcross
O'Halleran
O'Rourke
Pallone
Panetta
Pascrell
Pelosi
Perlmutter
Peters
Pingree
Pocan
Polis
Price (NC)
Quigley
Raskin
Rice (NY)
Richmond
Rosen
Roybal-Allard
Ruiz
Ruppersberger
Ryan (OH)
Sánchez
Sarbanes
Schakowsky
Schiff
Schneider
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Shea-Porter
Sherman
Sinema
Sires
Smith (WA)
Soto
Speier
Suozi
Swalwell (CA)
Takano
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Tsongas
Vargas
Vela
Velázquez
Visclosky
Walz
Wasserman
Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

□ 1411

So the resolution was agreed to. The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

PERSONAL EXPLANATION

Mr. COFFMAN. Madam Speaker, I was unavoidably detained. Had I been present, I would have voted “Yea” on roll call No. 62, and “Yea” on roll call No. 63.

RESIGNATION AS MEMBER OF COMMITTEE ON ETHICS

The SPEAKER pro tempore laid before the House the following resignation as a member of the Committee on Ethics:

CONGRESS OF THE UNITED STATES,
Washington, DC, January 24, 2017.

Hon. PAUL D. RYAN,
Speaker of the House of Representatives, Washington, DC.

DEAR SPEAKER RYAN: This letter is to inform you that effective today I am resigning as the Ranking Member of the Committee on Ethics, as I have reached the applicable term limit under rules of the Democratic Caucus. It has been a privilege and a high honor to serve on the committee, which serves an essential function for the House and the public.

Sincerely,

LINDA T. SÁNCHEZ.

The SPEAKER pro tempore. Without objection, the resignation is accepted. There was no objection.

ELECTING MEMBERS TO A CERTAIN STANDING COMMITTEE OF THE HOUSE OF REPRESENTATIVES

Mr. CROWLEY. Madam Speaker, by direction of the Democratic Caucus, I offer a privileged resolution and ask for its immediate consideration in the House.

The Clerk read the resolution, as follows:

H. RES. 56

Resolved, That the following named Members be and are hereby elected to the following standing committee of the House of Representatives:

(1) COMMITTEE ON ETHICS.—Mr. Deutch, Ms. Clarke of New York, Mr. Polis, and Mr. Brown of Maryland.

The resolution was agreed to.

A motion to reconsider was laid on the table.

□ 1415

NO TAXPAYER FUNDING FOR ABORTION AND ABORTION INSURANCE FULL DISCLOSURE ACT OF 2017

Mrs. BLACK. Madam Speaker, pursuant to House Resolution 55, I call up the bill (H.R. 7) to prohibit taxpayer funded abortions, and ask for its immediate consideration.

The Clerk read the title of the bill.

The text of the bill is as follows:

H. R. 7

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

NOT VOTING—13

Blumenauer
Coffman
Huffman
Johnson, E. B.
Jones

Mulvaney
Payne
Price, Tom (GA)
Rush
Schrader

Slaughter
Veasey
Zinke

ANNOUNCEMENT BY THE SPEAKER PRO TEMPORE

The SPEAKER pro tempore (during the vote). There are 2 minutes remaining.