years—in order to pass our appropriations bills. I and other Democratic colleagues took to the floor again and again to decry these unacceptable budget numbers that simply set us up for failure. Our leaders have been offering to negotiate for months, knowing full well that President Obama would be forced to veto any appropriations bills passed under the Republican budget. Will it take a government shutdown, we asked, to make us do our job?

Apparently the answer is "yes". The Senate couldn't pass a single appropriations bill. The House passed a few with Republican votes alone, and then the process collapsed under the weight of the Confederate battle flag debate. That was a particularly disgraceful episode, but the process was already on life support. It was never going to work, and Republican leaders have known that all year.

Despite the failure of the appropriations process, as represented by this short-term CR, all hope is not lost. We can still salvage the hard bipartisan work of my and other appropriations subcommittees, if, when this CR expires, we can stitch together an omnibus appropriations bill for the balance of the year.

The Appropriations Committee still avoids some of the ideological battles that divide this body, and I have been able to work closely with Chairman DIAZ-BALART to negotiate a framework for transportation and housing funding. I know that many of the other subcommittee Chairs and Ranking Members have made similar progress. Given realistic funding levels, these bills can relatively quickly be converted into acceptable appropriations legislation.

So I once again join my colleagues in urging Speaker BOEHNER to resume bipartisan budget negotiations and produce reasonable, responsible funding levels that can allow the appropriations process to move forward. Today, we're buying ourselves a couple of months. Instead of lurching toward another crisis in December, let's actually come to a consensus on the kind of investments in our future that a great country must make.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 448, the previous question is ordered on the motion to concur.

The question is on the motion to concur by the gentleman from Kentucky (Mr. ROGERS).

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

Mr. ROGERS of Kentucky. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to the order of the House of today, further proceedings on this question will be postponed.

DIRECTING THE CLERK OF THE HOUSE OF REPRESENTATIVES TO MAKE CORRECTIONS IN THE ENROLLMENT OF H.R. 719

Mrs. ROBY. Mr. Speaker, pursuant to House Resolution 448, I call up the concurrent resolution (H. Con. Res. 79) directing the Clerk of the House of Representatives to make corrections in the enrollment of H.R. 719, and ask for its immediate consideration in the House.

The Clerk read the title of the concurrent resolution.

The SPEAKER pro tempore. Pursuant to House Resolution 448, the concurrent resolution is considered read.

The text of the concurrent resolution is as follows:

H. CON. RES. 79

Resolved by the House of Representatives (the Senate concurring), That in the enrollment of the bill H.R. 719, the Clerk of the House of Representatives shall make the following corrections:

(1) Insert after the enacting clause (before section 1) the following:

"DIVISION A—TSA OFFICE OF INSPECTION ACCOUNTABILITY ACT OF 2015".

(2) Insert after section 8 (before the statement of appropriations) the following:

"DIVISION B—CONTINUING APPROPRIATIONS RESOLUTION, 2015".

(3) Insert after section 150 (before the short title) the following new section:

''SEC. 151. Except as expressly provided otherwise, any reference in this division to 'this Act' shall be treated as referring only to the provisions of this division.''.

(4) Add at the end the following new division:

"DIVISION C—DEFUND PLANNED PARENTHOOD ACT OF 2015

"SEC. 1. SHORT TITLE.

''This division may be cited as the 'Defund Planned Parenthood Act of 2015'.

"SEC. 2. FINDINGS.

''Congress finds the following:

''(1) State and county health departments, community health centers, hospitals, physicians offices, and other entities currently provide, and will continue to provide, health services to women. Such health services include relevant diagnostic laboratory and radiology services, well-child care, prenatal and postpartum care, immunization, family planning services (including contraception), cervical and breast cancer screenings and referrals, and sexually transmitted disease testing.

''(2) Many such entities provide services to all persons, regardless of the person's ability to pay, and provide services in medically underserved areas and to medically underserved populations.

''(3) All funds that are no longer available to Planned Parenthood Federation of America, Inc., and its affiliates and clinics pursuant to this division will continue to be made available to other eligible entities to provide women's health care services.

''(4) Funds authorized to be appropriated, and appropriated, by section 4 are offset by the funding limitation under section 3(a).

"SEC. 3. MORATORIUM ON FEDERAL FUNDING TO PLANNED PARENTHOOD FEDERATION OF AMERICA, INC.

''(a) IN GENERAL.—For the one-year period beginning on the date of the enactment of this division, subject to subsection (b), no funds authorized or appropriated by Federal law may be made available for any purpose to Planned Parenthood Federation of America, Inc., or any affiliate or clinic of Planned Parenthood Federation of America, Inc., unless such entities certify that Planned Parenthood Federation of America affiliates and clinics will not perform, and will not provide any funds to any other entity that performs, an abortion during such period.

''(b) EXCEPTION.—Subsection (a) shall not apply to an abortion—

''(1) if the pregnancy is the result of an act of rape or incest; or

''(2) in the case where a woman suffers from a physical disorder, physical injury, or physical illness that would, as certified by a physician, place the woman in danger of death unless an abortion is performed, including a life-endangering physical condition caused by or arising from the pregnancy itself.

''(c) REPAYMENT.—The Secretary of Health and Human Services and the Secretary of Agriculture shall seek repayment of any Federal assistance received by Planned Parenthood Federation of America, Inc., or any affiliate or clinic of Planned Parenthood Federation of America, Inc., if it violates the terms of the certification required by subsection (a) during the period specified in subsection (a).

"SEC. 4. FUNDING FOR COMMUNITY HEALTH CENTER PROGRAM.

''(a) IN GENERAL.—There is authorized to be appropriated, and appropriated, $235,000,000 for the community health center program under section 330 of the Public Health Service Act (42 U.S.C. 254b), in addition to any other funds made available to such program, for the period for which the funding limitation under section 3(a) applies.

''(b) LIMITATION.—None of the funds authorized or appropriated pursuant to subsection (a) may be expended for an abortion other than as described in section 3(b).

"SEC. 5. RULE OF CONSTRUCTION.

''Nothing in this division shall be construed to reduce overall Federal funding available in support of women's health.''.

The SPEAKER pro tempore. The concurrent resolution shall be debatable for 20 minutes equally divided and controlled by the majority leader and minority leader or their designees.

The gentlewoman from Alabama (Mrs. ROBY) and the gentlewoman from Connecticut (Ms. DELAURO) each will control 10 minutes.

The Chair recognizes the gentlewoman from Alabama.

GENERAL LEAVE

Mrs. ROBY. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks, and to include extraneous material on H. Con. Res. 79.

The SPEAKER pro tempore. Is there objection to the request of the gentlewoman from Alabama?

There was no objection.

Mrs. ROBY. Mr. Speaker, I yield myself such time as I may consume.

I rise today in strong support of H. Con. Res. 79, a concurrent resolution directing the Clerk of the House of Representatives to make corrections in the enrollment of H.R. 719. This resolution directs the Clerk of the House of Representatives to make several corrections in the enrollment of H.R. 719, the Continuing Appropriations Act 2016, including by adding at the end of the text of the House-passed version, H.R. 3134, the Defund Planned Parenthood Act of 2015.

The House passed H.R. 3134 by a vote of 241–187 on September 18. The bill precludes any Federal funds from being authorized or appropriated for 1 year for any purpose to Planned Parenthood Federation of America or any affiliate or clinic of that organization unless entities certify that affiliates and clinics will not perform and will not provide any funds to any other entity that performs elective abortions during such period. The bill also redirected funding from Planned Parenthood facilities to federally qualified health centers to provide women's health services.

This resolution and the related enrollment process sends a signal about

this House's commitment to bar funding for Planned Parenthood and gives the Senate the opportunity to limit funding in the continuing resolution.

Mr. Speaker, this is actually the exact same language in the Defund Planned Parenthood Act sponsored by my friend, the gentlewoman from Tennessee (Mrs. BLACK), which the House passed earlier this month. Mrs. BLACK is a tireless defender of the unborn, and I have been privileged to work with her on several pro-life measures, including a very similar defund correction to the spending bill back in 2011.

So why this correction? My colleagues might be wondering if I just saw what happened in the Senate. Why take up this bill when the votes just aren't there in the Senate? The answer is simple. Because I believe, as long as there is an opportunity before us to defund Planned Parenthood, we should take it because, when it comes to this fight, I want to leave it all on the field.

I understand that, so far, we have lacked the votes in the Senate to include defund language in the continuing resolution, and I realize this is a last-ditch effort to do this and that the chances of this correction maneuver succeeding in the Senate are low. But I believe, Mr. Speaker, I believe that we have to fight until the very end.

□ 1600

I have always been up front with those I represent about the low likelihood of defunding Planned Parenthood, especially in a stopgap spending bill. Pro-life advocates in my State and around this country understand the math; and while they hope that Senate Democrats will change their hearts, they don't really expect them to. What they do expect is for us to try, to fight to the very end, and to exhaust every possible option in our effort to stop tax dollars from flowing to this organization.

That is why, Mr. Speaker, I urge my colleagues in the House and in the Senate to support this defund correction and to join me to fight until the very end to defund Planned Parenthood.

I reserve the balance of my time.

Ms. DELAURO. Mr. Speaker, I yield myself 2 minutes.

This ''enrollment correction'' is yet another procedural maneuver. It is designed to destroy health care for millions of American women. It is unacceptable, and we will not stand for it.

The disgraceful rightwing assault on reproductive freedom has become an all-out war on the health and the well-being of millions of low-income American women. Each year, Planned Parenthood provides 2.7 million people, men and women, with lifesaving services.

I would hope that my colleagues on the other side of the aisle would open their hearts—open their hearts—to healthcare services for women who don't have the wherewithal to go to the same kinds of private doctors that the men and women of the United States House of Representatives have the opportunity to do. Open your hearts, because for many, Planned Parenthood is their only way of receiving these healthcare services.

The president of the American Congress of OB–GYNs has warned that, without Planned Parenthood, many patients will be left without a doctor; and that is what these attacks are designed to achieve. The rightwing does not want poor women to have health care, period. It is spiteful, it is cruel, and it is wrong.

We know what happens when funding is taken away from Planned Parenthood. In Scott County, Indiana, a full-scale HIV epidemic was triggered that has been declared a public healthcare emergency. Do we want more people to die? Are we really prepared to see that picture repeated across the country?

The American people have made it clear that they will not accept any bill that cuts funding for women's health care or compromises reproductive freedoms. Let us in this body respect and trust the healthcare decisions that women make.

The SPEAKER pro tempore (Mr. POE of Texas). The time of the gentlewoman has expired.

Ms. DELAURO. I yield myself an additional 10 seconds.

Let's respect and trust the healthcare decisions that women make. We must respect their wishes. I urge my colleagues to vote against this disgraceful bill.

I reserve the balance of my time.

Mrs. ROBY. I reserve the balance of my time.

Ms. DELAURO. I yield 2 minutes to the gentlewoman from New York (Mrs. LOWEY), someone who has spent her entire career working at issues that help working families with their health care, and particularly women.

Mrs. LOWEY. Mr. Speaker, this resolution is more political theater: all sound and fury, signifying nothing and going nowhere. We are proceeding to debate this resolution even though there is no money—zero money—in the CR for Planned Parenthood and even though we all understand that if the Senate also adopts this resolution, it will effectively shut down the government, slowing economic growth and job creation.

Planned Parenthood provides essential preventive health services, including birth control, lifesaving cancer screenings, well-women exams, and advice on family planning to nearly 3 million women each year.

Community health centers are not an alternative to Planned Parenthood. The California Primary Care Association noted: ''Eliminating Planned Parenthood from our State's comprehensive network of care would put untenable stress on remaining providers. We do not have the capacity for such an increase in care.''

I urge a ''no'' vote on the resolution.

Mrs. ROBY. I reserve the balance of my time.

Ms. DELAURO. Mr. Speaker, I yield 2 minutes to the gentlewoman from North Carolina (Ms. ADAMS)

Ms. ADAMS. Mr. Speaker, I rise today as a woman who is angry. These attacks on Planned Parenthood aren't about some deceptive videos. It is about a woman's right to make decisions about her own body. Women's reproductive rights are decisions she should make. It should be between a woman, her doctor, and her family, not a male-dominated Congress.

So let's be clear. Attacking Planned Parenthood is part of a ploy to roll back women's rights. What hypocrisy. I wish my colleagues on the other side of the aisle cared this much about the millions of women and children who go hungry every day or the educational inequities that exist in our most vulnerable communities.

I stand with Planned Parenthood for the services they provide. Last year, they served more than 2.7 million across our Nation, and more than 31,000 in North Carolina just through nine centers. More than 21,000 patients received safe contraception; more than 18,000 STI tests were conducted, and more than 3,500 Pap tests and more than 2,500 breast exams. Real women getting real preventive care.

I will continue to advocate for women's comprehensive health care and their right to control their own body. The war on women must stop.

Ms. DELAURO. I would inquire as to how much time is remaining.

The SPEAKER pro tempore. The gentlewoman from Connecticut has 5 minutes remaining.

Ms. DELAURO. Mr. Speaker, I yield 1 minute to the gentlewoman from California (Ms. LEE).

Ms. LEE. First, I want to thank Congresswoman DELAURO for yielding and for her tremendous leadership on so many issues important to women and the entire country.

Mr. Speaker, I rise in strong opposition to H. Con. Res. 79, which once again attempts to defund Planned Parenthood for 1 year. This callous action would leave millions of women across the country without access to critical healthcare services. This shameful resolution is the 15th anti women's health vote this year.

We know that Planned Parenthood centers are essential to the health and well-being of women and their families. They serve as primary care facilities for women seeking birth control, comprehensive family planning services, and cancer and STI screenings.

According to the Guttmacher Institute, in 21 percent of counties where Planned Parenthood operates health centers, it is the county's only family planning provider. Mr. Speaker, for these communities, there are no other options. Defunding Planned Parenthood would hurt the communities that need help the most: low-income women and women of color.

Politicians have no business interfering with a woman's personal health

decisions that are best for her and her family, and she needs family planning centers to exercise all of her options as it relates to her health care.

This resolution is deceitful and it is wrong. It is past time to end this war on women, and it is past time for Republicans to listen to the American people, develop a responsible budget, and stop their attacks on women's health.

Vote ''no'' on this very backward, egregious resolution. It is going to harm women. It is going to hurt women. It does not protect the health and safety of women.

Ms. DELAURO. I yield 2 minutes to the distinguished gentlewoman from the District of Columbia (Ms. NORTON).

Ms. NORTON. I thank my good friend for her incredibly excellent work on this bill.

A threat to shut down the government over funding Planned Parenthood's contraceptive and preventative care measures looms again in 3 months, although 73 percent of the public is against forcing a shutdown over Planned Parenthood.

I am grateful for the high-quality coverage Planned Parenthood gives women's health across the board, including abortion services, not funded by the Federal Government. The District of Columbia is the only jurisdiction Congress denies the full reach of Roe v. Wade to low-income women, by denying the local government the right to spend its own local funds on abortion services for poor women.

For the Nation, to cut government funds for Medicaid, family planning, and preventative care would cut off our collective noses to spite our faces. Every public dollar spent on family planning services alone saves $7 in undesired births and other preventative care.

For all the heat generated by Republicans, Planned Parenthood is regarded more favorably now than it was before the current fight began. The reason is, for nearly a century, Planned Parenthood's incredibly effective work for women's health has won it a strong following across our country from both parties.

Ms. DELAURO. I yield 1 minute to the gentlewoman from Texas (Ms. JACKSON LEE).

Ms. JACKSON LEE. Let me thank the gentlewoman from Connecticut for her kindness. As well, let me thank the chair and ranking member of the Appropriations Committee, because we know the work that they have done.

Mr. Speaker, let me just simply say that I am very disappointed that we are now settling for a CR that continues to have a sequester that cuts across and denies Border Patrol agents, Customs and Border Protection, Secret Service, and leaves the American people vulnerable.

So, the first order of business is that we are not doing what we are supposed to do in providing for the American people. Now we move to another unseemly legislative initiative that is attacking women's health. And what does that mean? We use it under the guise of Planned Parenthood.

Planned Parenthood has any number of clinics in almost 50 States that deal with women's health, contraception, sexually transmitted disease; places where women who are impoverished can go when they cannot go anywhere else.

In a hearing yesterday, someone was debating why they don't do mammograms. Women know that when we go to any doctor, the doctor refers mammograms.

So this is a bad bill. It is against women's health. The sequester is bad. Vote down both bills.

Mr. Speaker, I rise in strong opposition to H. Con. Res. 79.

We are here again wasting valuable time on measures we know are having no real chance of survival beyond these debates.

I strongly oppose this continued effort to drag women's health issues and women's rights through this political circus.

At what point will the Majority step back and get regal about substantive and genuine legislation.

The amount of legislative time we have wasted on these offensive messaging bills is ridiculous and must end.

Our constituents deserve better.

Our legislative and public service roles demand more.

And as we approach yet another deadline for piecemeal fiscal fixes, we should be focused on passing a comprehensive and cost-savings budget.

Yet, we are here today debating another measure that threatens millions of Americans' access to preventative care and could end up costing taxpayers hundreds of millions of dollars.

However, we know H. Con. Res. 79 is not a serious attempt at passing real legislation.

As such, it is simply being offered here today as a shameless political decoy to attack the legal rights of women.

Politicians are continuing to try to sneak around the Constitution and four decades of Supreme Court precedent with sham laws that do nothing to improve women's health care and only make it more difficult, if not impossible, to obtain safe and legal abortion.

Restricting all access to reproductive and women's health services only exacerbates a woman's risk of an unintended pregnancy and fails to accomplish any meaningful overthrow of Roe v. Wade.

In recent years, state policymakers have passed hundreds of restrictions on abortion care under the guise of protecting women's health and safety.

Fights here in Congress have been no different.

In my state of Texas a law that would have cut off access to 75 percent of reproductive healthcare clinics in the state was challenged before the U.S. Supreme Court in 2014 and 2015.

On October 2, 2014, the Supreme Court struck down as unconstitutional a Texas law that required that all reproductive healthcare clinics that provided the full range of services would be required to have a hospital-style surgery center building and staffing requirements.

This requirement meant that only 7 clinics would be allowed to continue to provide a full spectrum of reproductive healthcare to women.

Any woman facing an unintended pregnancy needs to be able to make her own decisions and weigh all her options—and these laws take those options away.

Texas has 268,580 square miles only second in size to the state of Alaska.

The impact of the law in implementation would have ended access to reproductive services for millions of women in my state.

In 2015, the State of Texas once again threatened women's access to reproductive health care when it attempted to shutter all but 10 healthcare providers in the state of Texas.

The Supreme Court once again intervened on the behalf of Texas women to block the move to close clinics in my state.

It seems every month we are faced with a new attack on women's access to reproductive health care, often couched in deceptive terms and concern for women's health and safety.

And in fact we are here today supposedly to talk about the safety of women—but we know that's not really the case.

If my colleagues were so concerned about women's health and safety, they would be promoting any one of the number of evidence-based proactive policies that improve women's health and well-being.

Instead, they are proposing yet another attempt to ban abortion.

That is their number one priority. This is certainly not about protecting women's health, it's about politics.

We must separate the personal views of abortion from the legal issues and fundamental constitutional rights.

Undisputable, every woman has the constitutional right to make personal health care decisions so basic that it must be equally protected for all.

Restricting access to women's reproductive health care providers makes it increasingly difficult—and sometimes impossible—for women who have decided to end a pregnancy to get the safe, legal, high-quality care they need.

The result is not the elimination of abortions, but higher costs, longer delays, and extra steps for women seeking abortion care, and in the process punish women for their decision to exercise their constitutional right to end a pregnancy.

History tells us that unsafe and late-term abortions did not cease to exist without adequate access to clinical service. Rather, the exact opposite—as we know limited and restricted access only leads to unsafe and dangerous practices.

Today, countless women in states like Texas and Mississippi, Wisconsin, Alabama, Tennessee, and Louisiana—where state laws are already gravely impacting women's access to health care providers—women are being forced to travel upwards of hundreds of miles or cross state lines to access their constitutional right to an abortion.

These restrictions create sharp disparities in access to care that are troublingly reminiscent of the time before Roe v. Wade, when access depended on a woman's social status, where she lived or her ability to travel to another state.

In an effort to undermine what they could not otherwise overturn, politicians are attempting to ''turn back the clock'' to the pre-Roe era

by shuttering reproductive health care clinics and cutting off women's access to safe and legal abortion care.

Yet, far too many women who cannot afford to travel elsewhere will face an impossible choice between carrying an unintended pregnancy to term or seeking drastic options outside the law.

A right that only exists on paper is no right at all.

Simply, restricting a women's right and access to legal abortion services discriminately endangers the lives of women.

Congress should be doing everything it can to ensure that women have access to preventive care, not eliminating it.

This is a legislative assault on all progressive health care, service, and advocacy organizations who aim to provide vital care and services to women and men across this country.

Hundreds of thousands have already spoken up, including leading groups and communities such as the growing voice of our millennial generation.

For instance, the nearly 60,000 OB-GYN physicians and partners in women's health warn that this bill would scare providers away from providing comprehensive, compassionate care to women, in a time where America desperately needs more ob-gyns participating in Medicaid programs.

Physicians and experts in the field have long argued that these damaging measures serve no medical purpose, interfere in the doctor/patient relationship, and do nothing to promote women's health.

My colleagues should not be closing the door to health care services.

Rather, my colleagues should be doing more to connect our youth and women to services that help them reduce their risk of unintended pregnancies and STD's, and improve their overall health through preventative screenings, education and planning, and not restricting their access to lawfully entitled family planning and private health services.

I urge all Members to vote against the continued attack on women's health and rights.

Ms. DELAURO. I yield to the gentleman from Florida (Mr. HASTINGS) for the purpose of a unanimous consent request.

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

Mr. HASTINGS. Mr. Speaker, I rise in strong opposition to this measure.

Mr. DELAURO. May I inquire as to how much time is remaining.

The SPEAKER pro tempore. The gentlewoman from Connecticut has 1½ minutes remaining.

Ms. DELAURO. Mr. Speaker, I yield myself the balance of my time.

What we are facing here today and what this is about, this so-called enrollment correction, is a procedural maneuver because the United States Senate sent over a continuing resolution that continues to fund Planned Parenthood. Because the majority is interested in defunding the opportunity for healthcare services for women, they have asked for this procedural maneuver to defund Planned Parenthood.

It is simply about taking funds away from American women. Think about it. Think about shutting the government down because of women's health. The lack of care and concern, first and foremost, about the 2.7 million men and women that Planned Parenthood serves every year is a grave consequence. But in addition, shutting down the Federal Government the last time cost $24 billion to American taxpayers, held up disability checks for veterans, and, in fact, held back people's IRS rebates.

Their preoccupation with denying women's health is cruel, it is spiteful, it is wrong, and it does great harm to this great Nation. Vote against this bad piece of legislation.

I yield back the balance of my time.

□ 1615

Mrs. ROBY. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, not everyone, I recognize, in this country is pro-life, like I am. But those who are should not be forced to have their tax dollars fund an organization that aborts more than 350,000 unborn babies every year.

Federal law has long prohibited public funds from being used to actually perform abortions. However, Planned Parenthood gets millions in grants and reimbursements for other services that they provide, like pregnancy tests, birth control, Pap smears, STD tests, and other various treatments.

Of course, low-income women should have access to these critical services. But why is it necessary—why is it necessary—for those services to be funded at the Nation's largest abortion provider?

It isn't actually, but the abortion industry and its supporters—it is what they want you to think it is. And they talk about women's health because they don't want to talk about abortion.

They don't want to talk about how ugly it is and how painful it is not just to the mother having to make the decision, but to the unborn baby who doesn't have a voice, who doesn't have a say.

When it comes to funding, they like to pretend, Mr. Speaker, that abortion doesn't exist and that Planned Parenthood is the only place where low-income women can get health care.

Taking away Federal funding from Planned Parenthood means attacking women's health, they say. That is not true.

The truth is that there are more than 13,000 federally qualified and rural health centers throughout this country that offer low-cost health care to women. In fact, these centers outnumber Planned Parenthood clinics 20–1.

If those who defend Federal funding of Planned Parenthood truly just wanted to make sure that low-income women have access to health care and not abortion, then why not simply support these noncontroversial community health centers instead?

If this argument is really about making sure women have access to health care, then we would all agree right here, right now, to support these community health centers.

But you see, Mr. Speaker, that is not what this is about. You see, while federally qualified and rural health centers provide a wide range of medical services, they don't perform abortions. That is what they really want. They want to preserve the pipeline of funding to the Nation's largest abortion provider.

This talk of women's health is nothing but a charade, a false pretense, that I believe more and more Americans are realizing is phony.

Mr. Speaker, I urge my colleagues to support this concurrent resolution.

I yield back the balance of my time.

The SPEAKER pro tempore. All time for debate has expired.

Pursuant to House Resolution 448, the previous question is ordered.

The question is on the concurrent resolution.

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

Mrs. ROBY. Mr. Speaker, on that I demand the yeas and nays.

The yeas and nays were ordered.

The SPEAKER pro tempore. Pursuant to clause 8 of rule XX and the order of the House of today, this 15-minute vote on adoption of the concurrent resolution will be followed by 5-minute votes on adoption of the motion to concur in the Senate amendment to the House amendment to the Senate amendment to H.R. 719, and agreeing to the Speaker's approval of the Journal, if ordered.

The vote was taken by electronic device, and there were—yeas 241, nays 185, answered ''present'' 1, not voting 7, as follows:

[Roll No. 527]

YEAS—241

Abraham	Conaway	Graves (GA)
Aderholt	Cook	Graves (LA)
Allen	Costello (PA)	Graves (MO)
Amash	Cramer	Griffith
Amodei	Crawford	Grothman
Babin	Crenshaw	Guinta
Barletta	Cuellar	Guthrie
Barr	Curbelo (FL)	Hardy
Barton	Davis, Rodney	Harper
Benishek	Denham	Harris
Bilirakis	DeSantis	Hartzler
Bishop (MI)	DesJarlais	Heck (NV)
Bishop (UT)	Diaz-Balart	Hensarling
Black	Donovan	Herrera Beutler
Blackburn	Duffy	Hice, Jody B.
Blum	Duncan (SC)	Hill
Bost	Duncan (TN)	Holding
Boustany	Ellmers (NC)	Huelskamp
Brat	Emmer (MN)	Huizenga (MI)
Bridenstine	Farenthold	Hultgren
Brooks (AL)	Fincher	Hunter
Brooks (IN)	Fitzpatrick	Hurd (TX)
Buchanan	Fleischmann	Hurt (VA)
Buck	Fleming	Issa
Bucshon	Flores	Jenkins (KS)
Burgess	Forbes	Jenkins (WV)
Byrne	Fortenberry	Johnson (OH)
Calvert	Foxx	Johnson, Sam
Carter (GA)	Franks (AZ)	Jolly
Carter (TX)	Frelinghuysen	Jones
Chabot	Garrett	Jordan
Chaffetz	Gibbs	Joyce
Clawson (FL)	Gibson	Katko
Coffman	Gohmert	Kelly (MS)
Cole	Goodlatte	Kelly (PA)
Collins (GA)	Gosar	King (NY)
Collins (NY)	Gowdy	Kinzinger (IL)
Comstock	Granger	Kline

Knight
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Lamborn
Lance
Latta
Lipinski
LoBiondo
Long
Loudermilk
Love
Lucas
Luetkemeyer
Lummis
MacArthur
Marchant
Marino
Massie
McCarthy
McCaul
McClintock
McHenry
McKinley
McMorris Rodgers
McSally
Meadows
Meehan
Messer
Mica
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Miller (MI)
Moolenaar
Mooney (WV)
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Poliquin
Pompeo
Posey
Price, Tom
Ratcliffe
Reed
Renacci
Ribble
Rice (SC)
Rigell
Roby
Roe (TN)
Rogers (AL)
Rogers (KY)
Rohrabacher
Rokita
Rooney (FL)
Ros-Lehtinen
Roskam
Ross
Rothfus
Rouzer
Royce
Russell
Ryan (WI)
Salmon
Sanford
Scalise
Schweikert
Scott, Austin
Sensenbrenner
Sessions
Shimkus
Shuster
Simpson
Smith (MO)
Smith (NE)
Smith (NJ)
Smith (TX)
Stefanik
Stewart
Stivers
Stutzman
Thompson (PA)
Thornberry
Tiberi
Tipton
Trott
Turner
Upton
Valadao
Wagner
Walberg
Walden
Walker
Walorski
Walters, Mimi
Weber (TX)
Webster (FL)
Wenstrup
Westerman
Westmoreland
Whitfield
Williams
Wilson (SC)
Wittman
Womack
Woodall
Yoder
Yoho
Young (AK)
Young (IA)
Young (IN)
Zeldin
Zinke

NAYS—185

Adams
Aguilar
Ashford
Bass
Beatty
Becerra
Bera
Beyer
Bishop (GA)
Blumenauer
Bonamici
Boyle, Brendan F.
Brady (PA)
Brown (FL)
Brownley (CA)
Bustos
Butterfield
Capps
Capuano
Cárdenas
Carney
Carson (IN)
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Cohen
Connolly
Conyers
Cooper
Costa
Courtney
Crowley
Cummings
Davis (CA)
Davis, Danny
DeFazio
DeGette
Delaney
DeLauro
DelBene
Dent
DeSaulnier
Deutch
Dingell
Doggett
Dold
Doyle, Michael F.
Duckworth
Edwards
Ellison
Engel
Eshoo
Esty
Farr
Fattah
Foster
Frankel (FL)
Fudge
Gabbard
Gallego
Garamendi
Graham
Grayson
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hahn
Hanna
Hastings
Heck (WA)
Higgins
Himes
Hinojosa
Honda
Hoyer
Huffman
Israel
Jackson Lee
Jeffries
Johnson (GA)
Johnson, E. B.
Kaptur
Keating
Kennedy
Kildee
Kilmer
Kind
Kirkpatrick
Kuster
Langevin
Larsen (WA)
Larson (CT)
Lawrence
Lee
Levin
Lewis
Lieu, Ted
Loebsack
Lofgren
Lowenthal
Lowey
Lujan Grisham (NM)
Luján, Ben Ray (NM)
Lynch
Maloney, Carolyn
Maloney, Sean
Matsui
McCollum
McDermott
McGovern
McNerney
Meng
Moore
Moulton
Murphy (FL)
Nadler
Napolitano
Neal
Nolan
Norcross
O'Rourke
Pallone
Pascrell
Payne
Pelosi
Perlmutter
Peters
Pocan
Polis
Price (NC)
Quigley
Rangel
Rice (NY)
Richmond
Roybal-Allard
Ruiz
Ruppersberger
Rush
Ryan (OH)
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Schakowsky
Schiff
Schrader
Scott (VA)
Scott, David
Serrano
Sewell (AL)
Sherman
Sinema
Sires
Slaughter
Smith (WA)
Speier
Swalwell (CA)
Takai
Takano
Thompson (CA)
Thompson (MS)
Titus
Tonko
Torres
Tsongas
Van Hollen
Vargas
Veasey
Vela
Velázquez
Visclosky
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Wilson (FL)
Yarmuth

ANSWERED ''PRESENT''—1

King (IA)

NOT VOTING—7

Brady (TX)
Culberson
Hudson
Kelly (IL)
Meeks
Pingree
Reichert

□ 1647

Mr. LOEBSACK changed his vote from ''yea'' to ''nay.''

Messrs. DUNCAN of South Carolina and PERRY changed their vote from ''nay'' to ''yea.''

So the concurrent resolution was agreed to.

The result of the vote was announced as above recorded.

A motion to reconsider was laid on the table.

TSA OFFICE OF INSPECTION ACCOUNTABILITY ACT OF 2015

The SPEAKER pro tempore. The unfinished business is the vote on the motion to concur on the bill (H.R. 719) to require the Transportation Security Administration to conform to existing Federal law and regulations regarding criminal investigator positions, and for other purposes, offered by the gentleman from Kentucky (Mr. ROGERS), on which the yeas and nays were ordered.

The Clerk will redesignate the motion.

The Clerk redesignated the motion.

The SPEAKER pro tempore. The question is on the motion to concur.

This is a 5-minute vote.

The vote was taken by electronic device, and there were—yeas 277, nays 151, not voting 6, as follows:

[Roll No. 528]

YEAS—277

Adams
Aguilar
Amodei
Ashford
Barletta
Bass
Beatty
Becerra
Benishek
Bera
Beyer
Bishop (GA)
Bishop (MI)
Blumenauer
Bonamici
Bost
Boyle, Brendan F.
Brady (PA)
Brooks (IN)
Brown (FL)
Brownley (CA)
Buchanan
Bustos
Butterfield
Calvert
Capps
Capuano
Cárdenas
Carney
Carson (IN)
Cartwright
Castor (FL)
Castro (TX)
Chu, Judy
Cicilline
Clark (MA)
Clarke (NY)
Clay
Cleaver
Clyburn
Coffman
Cohen
Cole
Collins (NY)
Comstock
Connolly
Conyers
Cook
Cooper
Costa
Costello (PA)
Courtney
Cramer
Crenshaw
Crowley
Cuellar
Cummings
Curbelo (FL)
Davis (CA)
Davis, Danny
Davis, Rodney
DeFazio
DeGette
Delaney
DeLauro
DelBene
Denham
Dent
DeSaulnier
Deutch
Diaz-Balart
Dingell
Doggett
Dold
Donovan
Doyle, Michael F.
Duckworth
Edwards
Ellison
Engel
Eshoo
Esty
Farr
Fattah
Fitzpatrick
Foster
Frankel (FL)
Frelinghuysen
Fudge
Gabbard
Gallego
Garamendi
Gibson
Graham
Grayson
Green, Al
Green, Gene
Grijalva
Gutiérrez
Hahn
Hanna
Hardy
Hastings
Heck (NV)
Heck (WA)
Herrera Beutler
Higgins
Himes
Hinojosa
Honda
Hoyer
Huffman
Hurd (TX)
Israel
Issa
Jackson Lee
Jeffries
Jenkins (WV)
Johnson (GA)
Johnson (OH)
Johnson, E. B.
Jolly
Joyce
Kaptur
Katko
Keating
Kennedy
Kildee
Kilmer
Kind
King (NY)
Kinzinger (IL)
Kirkpatrick
Kline
Knight
Kuster
LaMalfa
Lance
Langevin
Larsen (WA)
Larson (CT)
Lawrence
Lee
Levin
Lewis
Lieu, Ted
Lipinski
LoBiondo
Loebsack
Lofgren
Lowenthal
Lowey
Lucas
Lujan Grisham (NM)
Luján, Ben Ray (NM)
Lynch
MacArthur
Maloney, Carolyn
Maloney, Sean
Matsui
McCarthy
McCollum
McDermott
McGovern
McHenry
McKinley
McMorris Rodgers
McNerney
McSally
Meehan
Meng
Miller (MI)
Moore
Moulton
Mullin
Murphy (FL)
Nadler
Napolitano
Neal
Newhouse
Noem
Nolan
Norcross
Nunes
O'Rourke
Pallone
Pascrell
Paulsen
Payne
Pelosi
Perlmutter
Peters
Peterson
Pingree
Pitts
Pocan
Poliquin
Polis
Price (NC)
Quigley
Rangel
Reed
Rice (NY)
Richmond
Rigell
Rogers (KY)
Rohrabacher
Ros-Lehtinen
Roybal-Allard
Royce
Ruiz
Ruppersberger
Rush
Ryan (OH)
Ryan (WI)
Sánchez, Linda T.
Sanchez, Loretta
Sarbanes
Scalise
Schakowsky
Schiff
Schrader
Scott (VA)
Scott, Austin
Scott, David
Serrano
Sewell (AL)
Sherman
Shimkus
Simpson
Sinema
Sires
Slaughter
Smith (NE)
Smith (WA)
Speier
Stefanik
Stivers
Swalwell (CA)
Takai
Takano
Thompson (CA)
Thompson (MS)
Thompson (PA)
Thornberry
Tiberi
Tipton
Titus
Tonko
Torres
Trott
Tsongas
Turner
Upton
Valadao
Van Hollen
Vargas
Veasey
Vela
Velázquez
Visclosky
Walden
Walters, Mimi
Walz
Wasserman Schultz
Waters, Maxine
Watson Coleman
Welch
Whitfield
Wilson (FL)
Womack
Woodall
Yarmuth
Young (AK)
Young (IA)
Zeldin
Zinke

NAYS—151

Abraham
Aderholt
Allen
Amash
Babin
Barr
Barton
Bilirakis
Bishop (UT)
Black
Blackburn
Blum
Boustany
Brat
Bridenstine
Brooks (AL)
Buck
Bucshon
Burgess
Byrne
Carter (GA)
Carter (TX)
Chabot
Chaffetz
Clawson (FL)
Collins (GA)
Conaway
Crawford
DeSantis
DesJarlais
Duffy
Duncan (SC)
Duncan (TN)
Ellmers (NC)
Emmer (MN)
Farenthold
Fincher
Fleischmann
Fleming
Flores
Forbes
Fortenberry
Foxx
Franks (AZ)
Garrett
Gibbs
Gohmert
Goodlatte
Gosar
Gowdy
Granger
Graves (GA)
Graves (LA)
Graves (MO)
Griffith
Grothman
Guinta
Guthrie
Harper
Harris
Hartzler
Hensarling
Hice, Jody B.
Hill
Holding
Huelskamp
Huizenga (MI)
Hultgren
Hunter
Hurt (VA)
Jenkins (KS)
Johnson, Sam
Jones
Jordan
Kelly (MS)
Kelly (PA)
King (IA)
Labrador
LaHood
Lamborn
Latta
Long
Loudermilk
Love
Luetkemeyer
Lummis
Marchant
Marino
Massie
McCaul
McClintock
Meadows
Messer
Mica
Miller (FL)
Moolenaar