



September 17, 2015

**Vote “NO” on H.R. 3134 and H.R. 3504**

Dear Representative:|

On behalf of the American Civil Liberties Union (ACLU), a non-partisan organization with more than a half million members, countless additional activists and supporters, and 53 affiliates nationwide, dedicated to protecting the principles of freedom and equality set forth in the Constitution and in our nation’s civil rights laws, we urge you to vote NO on Rep. Black’s bill, the Defund Planned Parenthood Act of 2015 (H.R. 3134), and Rep. Franks’ bill, the Born-Alive Abortion Survivors Protection Act (H.R. 3504). Both bills are expected to receive a floor vote, and we will score those votes.

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These bills are part of the ongoing attack campaign against Planned Parenthood, one of the nation’s largest and most trusted providers of reproductive health care. Planned Parenthood’s health centers provide high quality, affordable health care to 2.7 million patients per year. Women and men trust and rely on Planned Parenthood for vital preventive care, including wellness exams, cancer screenings, STI testing and treatment, and contraception, in addition to abortion. Planned Parenthood is a critical safety-net provider: one in five women will visit local Planned Parenthood centers for health care during her lifetime, and many low-income women and women of color rely on Planned Parenthood as their primary health care provider.

Bills like H.R. 3134 and H.R. 3504 are a harmful response to the aggressive smear campaign against Planned Parenthood premised on a series of highly edited videos that misrepresent the organization’s practices regarding fetal tissue donation for medical research. Numerous investigations have already cleared Planned Parenthood of wrongdoing,<sup>1</sup> and yet abortion opponents continue to use these profoundly deceptive videos as the basis for legislation that would harm women’s health. The two pieces of legislation being considered tomorrow would cut off access to health care services and unnecessarily insert politicians into medical care.

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<sup>1</sup> See, e.g. Sarah Ferrid, *GOP: Defund Planned Parenthood even if it didn’t break the law*, The Hill, Sep. 13, 2015, <http://thehill.com/policy/healthcare/253452-gop-defund-planned-parenthood-even-if-it-didnt-break-the-law>; Peter Sullivan, *Pennsylvania becomes fifth state to find no Planned Parenthood wrongdoing*, The Hill, Aug. 21, 2015, <http://thehill.com/policy/healthcare/251664-pennsylvania-becomes-fifth-state-to-find-no-planned-parenthood-wrongdoing>

H.R. 3134 would prohibit federal funding to Planned Parenthood Federation of America and its affiliates and clinics.

H.R. 3134 would defund Planned Parenthood for one year, devastating access to the urgently needed health care services its health centers provide across the country. Defunding would leave a serious void in many communities—particularly rural and medically underserved communities—that cannot be filled by other health care providers that do not share Planned Parenthood’s specialization in reproductive health.<sup>2</sup>

Additionally, H.R. 3134 is clearly aimed at cutting off access to safe, legal abortion for the millions of women who rely on Planned Parenthood. It provides that federal funding to Planned Parenthood will be suspended unless Planned Parenthood certifies that it does not provide abortions, except in very limited circumstances. In doing so, it attempts to interfere with Planned Parenthood’s ability to provide the full range of reproductive health care to its patients. It also targets the organization specifically because it provides abortion services—to which women have a constitutionally-protected right—even though it does not use federal dollars to provide those services.<sup>3</sup> It would bar Planned Parenthood from receiving *any* federal money because it uses separate, non-federal money to assist women in exercising their constitutional right to abortion. Penalizing Planned Parenthood in this way raises clear constitutional concerns.<sup>4</sup>

H.R. 3504 would unnecessarily interfere with medical practice and would have a chilling effect on providers of safe, legal abortion.

H.R. 3504 would alter the Born-Alive Infants Protection Act, a law passed in 2002 with bipartisan support. It would go much further than existing law, inappropriately inserting politicians into the practice of medicine. H.R. 3504 would dictate new requirements for doctors that are vaguely worded and extremely unclear, and then threaten doctors with serious criminal penalties for failure to comply. There is little question that this bill is intended to intimidate abortion providers and drive them out of practice, and there is no objective evidence that such congressional intrusion is necessary or appropriate. Further, the bill is a thinly veiled attempt by opponents of abortion to distort public perception of Planned Parenthood and other providers of safe, legal abortion. The real purpose of this bill is clear: to mislead the public and intimidate doctors—just another aspect of the campaign to discredit Planned Parenthood and restrict access to care.

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<sup>2</sup> States that have promised to redirect state funds withdrawn from Planned Parenthood have a track record of not doing so, and of simply eliminating health care for affected populations. *See, e.g.,* Becca Aaronson, *Claims Drop Under State-Run Women’s Health Program in Texas*, THE N.Y. TIMES, Dec. 12, 2013, available at [http://www.nytimes.com/2013/12/13/us/claims-drop-under-state-run-womens-health-program.html?\\_r=1](http://www.nytimes.com/2013/12/13/us/claims-drop-under-state-run-womens-health-program.html?_r=1); Laura Bassett, *Indiana Shut Down Its Rural Planned Parenthood Clinics And Got An HIV Outbreak*, Huffington Post, Mar. 31, 2015, [http://www.huffingtonpost.com/2015/03/31/indiana-planned-parenthood\\_n\\_6977232.html](http://www.huffingtonpost.com/2015/03/31/indiana-planned-parenthood_n_6977232.html).

<sup>3</sup> The use of Title X family planning funds for abortion is prohibited by statute. 42 USCS § 300a-6. Medicaid coverage for abortion, except in the limited cases of rape, incest and life endangerment, is prohibited by the Hyde Amendment. *See* Guttmacher Institute, *State Funding of Abortion Under Medicaid* (July 1, 2015), [http://www.guttmacher.org/statecenter/spibs/spib\\_SFAM.pdf](http://www.guttmacher.org/statecenter/spibs/spib_SFAM.pdf).

<sup>4</sup> *See Rust v. Sullivan*, 500 U.S. 173 (1991) (holding that although Congress could prohibit the use of Title X funds for abortion-related activity, it would be unconstitutional to bar a recipient of Title X funds, like Planned Parenthood, from engaging in abortion-related activity in other projects financed wholly by non-Title X funds and administered through a legally separate affiliate).

The ACLU opposes H.R. 3134 and H.R. 3504 and urges Representatives to vote “No.”  
Should you have any questions, please contact Georgeanne Usova at (202) 675-2338 or  
[gusova@aclu.org](mailto:gusova@aclu.org).

Sincerely,

A handwritten signature in black ink that reads "Karin Johanson". The signature is fluid and cursive, with a long horizontal stroke at the end.

Karin Johanson  
Director, Washington Legislative Office

A handwritten signature in black ink that reads "G. Usova". The signature is stylized and cursive, with a long horizontal stroke at the end.

Georgeanne M. Usova  
Legislative Counsel