

117TH CONGRESS
2D SESSION

H. RES. 1155

Expressing support for contraceptive rights and access in the United States and expressing the sense of the House of Representatives regarding comprehensive reproductive health care.

IN THE HOUSE OF REPRESENTATIVES

JUNE 7, 2022

Ms. MANNING (for herself, Mr. NADLER, Ms. DEGETTE, Ms. STEVENS, Ms. ESCOBAR, Ms. LOIS FRANKEL of Florida, Ms. LEE of California, Ms. TITUS, Mr. GRIJALVA, Ms. SCHAKOWSKY, Ms. SPEIER, Ms. CASTOR of Florida, Mr. CONNOLLY, Ms. STANSBURY, Ms. NORTON, Mr. SMITH of Washington, Mr. LEVIN of Michigan, Mr. EVANS, Mrs. NAPOLITANO, Ms. WASSERMAN SCHULTZ, Mr. BROWN of Maryland, Ms. CHU, Mr. KHANNA, Mrs. LEE of Nevada, Mr. CÁRDENAS, Ms. BARRAGÁN, Mr. MCGOVERN, Mr. MALINOWSKI, Mr. BLUMENAUER, Ms. ADAMS, Mr. DANNY K. DAVIS of Illinois, Mr. TAKANO, Ms. JACOBS of California, Ms. WILLIAMS of Georgia, Mr. SOTO, and Ms. KUSTER) submitted the following resolution; which was referred to the Committee on Energy and Commerce, and in addition to the Committee on the Judiciary, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

RESOLUTION

Expressing support for contraceptive rights and access in the United States and expressing the sense of the House of Representatives regarding comprehensive reproductive health care.

Whereas the Supreme Court has repeatedly recognized that any concept of liberty must include the right to make

personal decisions about bodily integrity, autonomy, family, and relationships;

Whereas June 7, 2022, marks the 57th anniversary of the landmark *Griswold v. Connecticut* (381 U.S. 479 (1965)) decision in which the Supreme Court first held that the Constitution protects the right to use contraception;

Whereas *Eisenstadt v. Baird* (405 U.S. 438 (1972)) confirmed the constitutional right of all people to legally access contraception regardless of marital status;

Whereas *Roe v. Wade* (410 U.S. 113 (1973)) established that the constitutional right to privacy includes the right to abortion;

Whereas the Supreme Court is now (as of the date of adoption of this resolution) considering *Dobbs v. Jackson Women’s Health Organization* (141 S.Ct. 2619 (2021)), a case that the Justices could use to overturn or severely undermine *Roe v. Wade*;

Whereas a leaked draft opinion of the majority opinion in *Dobbs v. Jackson Women’s Health Organization* signals the intent of the Supreme Court to overturn *Roe v. Wade*;

Whereas the gutting or overturning of *Roe v. Wade* threatens precedent protecting marital, familial, and sexual privacy, including the right to contraception, that has been repeatedly affirmed by the Supreme Court, including in *Obergefell v. Hodges* (576 U.S. 644 (2015)), and relied upon in this country for almost 60 years;

Whereas the overturning of *Roe v. Wade* will activate “trigger laws” in various States that would create a near-total ban on abortion and, in some States, make performing an abortion a felony under State law, and as of this writing,

13 States have already passed trigger laws, while other States have introduced trigger laws in their State legislatures;

Whereas the Office of Women’s Health within the Department of Health and Human Services defines contraception as “any method, medicine, or device used to prevent pregnancy”, and the Centers for Disease Control and Prevention and the Food and Drug Administration identify a wide variety of drugs and devices as meeting this definition, including emergency contraceptives and intra-uterine devices;

Whereas States have attempted to define abortion expansively so as to include contraception in State bans on abortion and have also restricted access to emergency contraception;

Whereas access to contraception is crucial to people’s ability to decide if and when to have children and control their own bodies and well-being;

Whereas the United States has a long history of reproductive coercion, including the childbearing forced upon enslaved women, as well as the forced sterilization of Black women, Puerto Rican women, indigenous women, immigrant women, and disabled women, and that these abuses continue to occur;

Whereas contraception is key to sexual and reproductive health, as it prevents unintended pregnancy, is highly effective in preventing and treating a wide array of often severe medical conditions, and decreases the risk of certain cancers;

Whereas family planning improves health outcomes for women, their families, and their communities and reduces rates of maternal and infant mortality and morbidity;

Whereas the ability to prevent, plan, and space pregnancies is critical to people's educational attainment and economic advancement, and has been vital to advancing equal opportunity and economic security for women;

Whereas fully one-third of the wage gains women have made since the 1960s are the result of access to oral contraceptives;

Whereas access to comprehensive reproductive health care, including contraception and abortion, is essential to women's equality under the law;

Whereas the Patient Protection and Affordable Care Act (commonly referred to as the "ACA") requires that most insurance plans cover evidence-based preventive services for women, including contraception without cost sharing, and the Department of Health and Human Services estimates that 62,000,000 women have this coverage;

Whereas the ACA's contraceptive coverage requirement has been under attack from and undermined by those who would allow employers to dictate contraceptive decision-making for employees;

Whereas restrictions on contraceptive access deny people the ability to determine when and if to become pregnant, make essential health care cost prohibitive, and infringe on people's constitutional rights;

Whereas contraceptive care and coverage restrictions disproportionately impact people of color, working class and low-income people, LGBTQ people, immigrants, young people, and people with disabilities;

Whereas title X is the only Federal program dedicated to providing family planning services for people with low incomes, but has come under increasing attack in the past 10 years;

Whereas providers' refusals to offer contraception based on their own personal beliefs impede patients from obtaining their preferred method, with laws in 12 States specifically allowing health care providers to refuse to provide services related to contraception;

Whereas violations of the Medicaid free choice of provider requirement, thus far in Arkansas, Mississippi, Missouri, and Texas, infringe on people's ability to access their contraceptive care;

Whereas insurance plans and pharmacy benefit managers fail to comply with the contraception coverage requirement, with insurance plans routinely refusing to cover certain contraceptive products, imposing administrative hurdles like prior authorizations and step therapy, and requiring unallowable patient cost sharing; and

Whereas any policy that restricts contraception, including long-acting reversible contraceptive methods and emergency contraception, erodes existing legal protections thereof, or limits coverage thereof, imperils people's receipt of essential health services and the associated gains in social equality: Now, therefore, be it

1 *Resolved*, That the House of Representatives—

2 (1) affirms that people deserve access to the
3 contraception and related services that they want or
4 need, when they want or need them, without any ob-
5 stacles;

1 (2) affirms that contraception is essential to
2 people's equality under the law, health outcomes,
3 economic security and empowerment, and capacity to
4 effectuate essential and time-sensitive decisions
5 about their bodies, lives, and futures;

6 (3) affirms that substantive due process rights
7 protecting marital, familial, and sexual privacy in-
8 clude access to contraception and abortion; and

9 (4) condemns restrictions on access to and cov-
10 erage of contraception.

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