

December 13, 2022

Dear Member of Congress,

On behalf of the millions of Americans that we represent, we write to express our concern with increased funding for the Office of Women's Health in light of the current administration's [interim final rule](#) (IFR) providing funding for abortion by the Department of Veterans Affairs (VA). Women veterans deserve quality life-affirming medical care. Instead, the VA has prioritized abortion extremism by investing in an illegal scheme to [provide abortions](#) at veteran's health facilities in violation of both state and federal law. Unless the abortion IFR is withdrawn, a portion of increased funding for the Office of Women's Health will be used to underwrite the transformation of veteran's health facilities into abortion centers.

House and Senate appropriations bills released in the summer include a \$71 million increase in funding over the fiscal year 2022 level for a total allocation of \$911 million for the Office of Women's Health at the VA. It was only after these increases were secured in the introduced text of the Military Construction-Veterans Affairs Appropriations bills that the VA [released](#) their plan to use taxpayer dollars to fund abortion. While there may be many compelling reasons to warrant such an increase, the administration has made clear that it will prioritize subsidizing the abortion IFR.

[Since 1992](#), the VA has been statutorily prohibited from using taxpayer dollars for abortion, thereby prioritizing scarce resources for the life-affirming health care needs of American veterans. On September 9, 2022, the administration unilaterally ignored the longstanding statutory prohibition on taxpayer funding for abortion at the VA and [issued](#) a new rule that includes funding abortion for health reasons. The undefined reference to health is presumably as broad as defined under *Doe v. Bolton* (the companion case to *Roe v. Wade*) which included virtually any reason: "*medical judgement may be exercised in the light of all factors—physical, emotional, psychological, familial, and the woman's age—relevant to the wellbeing of the patient. All these factors may relate to health.*"

The existence of newly enacted or implemented state laws protecting unborn children is the administration's impetus for a change in policy. The IFR expressly authorizes VA health care professionals to perform abortions:

This rulemaking serves as notice that all VA employees, including health care professionals who provide care and VA employees who facilitate that care, such as VA employees in administrative positions that schedule abortion procedures and VA employees who provide transportation to the veteran or CHAMPVA beneficiary to the VA facility for reproductive health care, may not be held liable under State or local law or regulation for reasonably performing their Federal duties.

This attempt to preempt state law is based on the [legal principle](#) that federal law can override state law. However, in this case there is no such federal law allowing for abortion, but rather a federal law prohibiting funding for abortion. An illegal interpretation of federal law cannot justify preemption of legitimate state law.

This blatant disregard for the law and the will of the people is just one in a series of efforts by the current administration to appease the demands of the radical abortion lobby. The administration is flagrantly disregarding federal law in their rush to impose abortion on demand until birth at taxpayer expense throughout all fifty states. Now, Congress must consider whether to reward these actions with more hard-earned taxpayer dollars.

Sincerely,

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