

If we want to encourage investment in safe, responsible, and cutting-edge mining practices that provide billions to the public's coffers and essential materials to the American people, we need to support H.R. 1366.

Mr. Speaker, I also want to call attention to a letter we received, signed by 28 organizations from A to Z. It is literally from A to Z. Starting with A, the Alaska Miners Association, American Exploration and Mining Association, Bipartisan Policy Center Action, Battery Materials and Technology Coalition, Colorado Mining Association, National Mining Association, U.S. Chamber of Commerce, Women's Mining Coalition, Wyoming Mining Association, and I will round it out with Z, the Zero Emission Transportation Association.

These organizations stress the importance of Congress enacting this bipartisan legislation. They stated: This legislation will ensure the U.S. can utilize its vast domestic resources to build essential mineral supply chains. Your efforts to enhance mineral supply chain security, while upholding our leading safety and environmental standards, are crucial. The passage of H.R. 1366 will support the trajectory of innovation in the U.S. and maintain the Nation's economic leadership.

Mr. Speaker, this bill is common sense, supporting American industries that are working to bolster our domestic mineral supplies.

I also want to draw attention to a letter we received from Nevada democratic Governor Joe Lombardo in support of the Mining Regulatory Clarity Act. His letter states: Advancement of this bipartisan, bicameral legislation is indispensable to the long-term economic resilience of our rural communities and Nevada's ability to help achieve domestic mineral security.

Again, this bill is common sense. It is bipartisan, and it bicameral. It supports a key industry for States like Nevada. It should be strongly bipartisan.

Mr. Speaker, when we look at the abundant minerals that we are blessed with across the United States, I think of the claim that our colleague from Alaska (Mr. BEGICH) also says. He talked about the Ambler Road district. Of 50 things listed on the U.S. List of Critical Minerals, he says in the Ambler Mining District, 49 of those exist in abundant capacity to develop, process, and mine. Yet, we are yet to be able to get a road into this area to process these materials.

When I look at my home State of Arkansas, we have the largest deposit of lithium possibly in the world. At least 15 percent of the world's lithium is in brine water on public land in the great State of Arkansas.

We have all these minerals available all across the country. According to the "2025 Mineral Commodity Summary" from the U.S. Geological Survey, the U.S. is 100 percent dependent on imports for 14 critical minerals, many from China and Russia.

Mr. Speaker, I have met with the Navaho Nation. They have abundant deposits of uranium they could recover from former mining operations. We are so dependent on uranium imports. The last number I saw, we produced only one-half of 1 percent of the uranium we use for fuel in U.S. reactors. Do my colleagues know where most of that comes from? It comes from Russia and Kazakhstan. These are the kinds of minerals we are dependent on foreign actors for.

If my colleagues support growing our domestic supplies of critical minerals, this bill provides the regulatory certainty necessary to strengthen domestic mineral supply chains. If my colleagues support weakening China's global control over minerals, join us in voting for the Mining Regulatory Clarity Act.

Let's talk a little bit more about China. We need not only more mining here in America, but we need to do more processing and refining in the U.S. to meet our energy infrastructure and national security and defense needs. The Mining Regulatory Clarity Act will help strengthen domestic mineral supply chains.

I have a chart here that shows where we are at with China on rare earth and their monopoly. They control 70 percent of the mining in the world. It is not in China. It is all over the world.

My colleague mentioned child slave labor being used to extract cobalt in Africa. It is atrocious where they go and mine these materials and the lack of standards that they have. The environmental, human health, human safety, and human rights that are violated in the mining is also appalling.

They take that back to China, and they process 90 percent of it in China. This is all of the world's critical minerals. Then they manufacture 93 percent of the things that are manufactured with critical minerals.

If my colleagues want to help China maintain their stranglehold over our critical mineral supply chains, we should oppose this bill. Look no further than the chart behind me. We will see we can't continue to allow China to have the monopoly and the stranglehold on our economy and on our defense that they currently have through the critical mineral supply chain.

Mr. Speaker, I encourage my colleagues to support this bill. I appreciate my colleague from Nevada (Mr. AMODEI) for bringing it to the floor.

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

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

Pursuant to House Resolution 951, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT

Ms. LEGER FERNANDEZ. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Ms. Leger Fernandez moves to recommit the bill H.R. 1366 to the Committee on Natural Resources.

The material previously referred to by Ms. LEGER FERNANDEZ is as follows:

Ms. Leger Fernandez moves to recommit the bill H.R. 1366 to the Committee on Natural Resources with instructions to report the same back to the House forthwith, with the following amendment:

Add at the end the following:

SEC. 3. EXCEPTION.

(a) IN GENERAL.—This Act and the amendments made by this Act do not apply with respect to a project that is owned or operated by—

- (1) a foreign entity of concern; or
- (2) an entity that is a subsidiary of a foreign entity of concern.

(b) DEFINITIONS.—In this section:

(1) COVERED NATION.—The term "covered nation" has the meaning given the term in section 4872(f) of title 10, United States Code.

(2) FOREIGN ENTITY OF CONCERN.—

(A) IN GENERAL.—The term "foreign entity of concern" has the meaning given the term in section 40207(a)(5) of the Infrastructure Investment and Jobs Act (42 U.S.C. 18741(a)(5)).

(B) CLARIFICATION.—For purposes of this section, a foreign entity of concern is subject to the jurisdiction or direction of a government of a foreign country that is a covered nation within the meaning of section 40207(a)(5)(C) of the Infrastructure Investment and Jobs Act (42 U.S.C. 18741(a)(5)(C)) if the foreign entity of concern is more than 10 percent owned, directed, controlled, or financed, directly or indirectly, individually or in aggregate, by any individual that is the citizen, national, or permanent resident, or is an entity subject to the jurisdiction, of the government of a covered nation.

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

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

Ms. LEGER FERNANDEZ. 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, further proceedings on this question are postponed.

□ 1140

PET AND LIVESTOCK PROTECTION ACT

Mr. WESTERMAN. Mr. Speaker, pursuant to House Resolution 951, I call up the bill (H.R. 845) to require the Secretary of the Interior to reissue regulations removing the gray wolf from the list of endangered and threatened wildlife under the Endangered Species Act of 1973, and ask for its immediate consideration in the House.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 951, the amendment in the nature of a substitute recommended by the Committee on Natural Resources, printed

in the bill, is adopted and the bill, as amended, is considered read.

The text of the bill, as amended, is as follows:

H.R. 845

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

SECTION 1. SHORT TITLE.

This Act may be cited as the “Pet and Livestock Protection Act”.

SEC. 2. REMOVING THE GRAY WOLF FROM THE LIST OF ENDANGERED AND THREATENED WILDLIFE.

Not later than 60 days after the date of enactment of this section, the Secretary of the Interior shall reissue the final rule entitled “Endangered and Threatened Wildlife and Plants; Removing the Gray Wolf (Canis lupus) From the List of Endangered and Threatened Wildlife” and published on November 3, 2020 (85 Fed. Reg. 69778).

SEC. 3. NO JUDICIAL REVIEW.

Reissuance of the final rule under section 2 shall not be subject to judicial review.

The SPEAKER pro tempore. The bill, as amended, shall be debatable for 1 hour equally divided and controlled by the chair and ranking minority member of the Committee on Natural Resources or their respective designees.

The gentleman from Arkansas (Mr. WESTERMAN) and the gentlewoman from Oregon (Ms. HOYLE) each will control 30 minutes.

The Chair recognizes the gentleman from Arkansas.

GENERAL LEAVE

Mr. WESTERMAN. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on H.R. 845.

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

There was no objection.

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

Mr. Speaker, as we are getting close to breaking for the Christmas holiday, I am glad that this last bill that the Natural Resources Committee will offer is one that we will have a debate on that will resolve an issue that has united the Bush, Obama, Biden, and Trump administrations alike.

I am not sure there is another issue like that out there, but this is one of them because each of those administrations has agreed that the gray wolf is a recovered species and should be removed from the Endangered Species Act, or ESA, protection.

H.R. 845, the Pet and Livestock Protection Act, sponsored by Representatives BOEBERT and TIFFANY, instructs the U.S. Fish and Wildlife Service to re-issue its 2020 final rule that delisted the gray wolf from the list of threatened and endangered species in the entire lower 48 States.

Recovery of the gray wolf is a true ESA success story, and there aren't a lot of them. In the 1970s, the species was at risk in the lower 48 States. Today, the gray wolf numbers in the thousands across the Great Lakes and

Rocky Mountains, with each of these populations being connected to tens of thousands of wolves in Canada.

The first Trump administration recognized this successful recovery and issued a delisting rule for gray wolves in the lower 48 States. Unfortunately, this rule was vacated by a Federal judge in California in a blatant instance of judicial activism.

Mr. Speaker, don't just take my word for it. The Biden administration appealed the California judge's vacatur of the 2020 Trump rule, arguing: “The district court misunderstood the ESA's clear mandate and compounded that error by imposing its own review of the science.”

By every sensible definition, the gray wolf is a recovered species, and that recovery should be celebrated as a success of the ESA. Gray wolf populations are healthy and thriving in every region in which they are found.

The Great Lakes region has the largest concentration of gray wolves in the lower 48 States, with approximately 4,200 wolves inhabiting Michigan, Minnesota, and Wisconsin. Moreover, this population is connected to at least 12,000 to 14,000 wolves in central Canada. The Western United States is also home to roughly 2,500 wolves, including already delisted populations in Montana, Idaho, Washington, Oregon, and Wyoming. This population is connected to over 15,000 wolves in western Canada.

The Biden administration's own science determined that wolves in the Western United States had a healthy abundance, retained genetic diversity, could respond to high-mortality events, and maintained adaptive capacity. Most of these wolves reside in States where they have already been delisted.

The science is clear. Gray wolves have recovered in the lower 48 States, and it is time to return their management to the States, which have managed and will continue to manage wolf populations responsibly.

Mr. Speaker, I encourage my colleagues to support the bill, and I reserve the balance of my time.

Ms. HOYLE of Oregon. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, we are here in D.C. during the final week before the holidays. Families back home are struggling with the increasing costs of groceries, housing affordability, natural disaster recovery, and healthcare. That is what we should be working on.

Instead, what has Republican leadership scheduled this week: a bill that is routinely used in Congress to kill time on the floor and that will go nowhere in the Senate.

H.R. 845, the Pet and Livestock Protection Act, would strip Federal Endangered Species Act protection from gray wolves and block courts from reviewing that decision. This bill would force the Department of the Interior to re-issue a 2020 Trump rule to delist the

gray wolves that was struck down by a Federal court in 2022.

Why was it struck down? A Republican-appointed judge found that it failed to use the best available science, didn't consider threats to wolves outside core populations, and ignored the needs across their entire range—findings all in violation of the Endangered Species Act.

Instead of accepting that decision, this bill doubles down on bad science and even prevents courts from weighing in.

If you are sure wolves have recovered, then there is no need to block judicial review. However, that is not the case here. Instead, my colleagues want to remove Endangered Species Act protections because of politics instead of science. That is not how the Endangered Species Act works.

Wolves are an Endangered Species Act success story. Their population has increased from fewer than 1,000 animals to over 6,000 today, but recovery remains fragile and incomplete. Wildlife management should be based on science and collaboration. Our natural heritage and the health of our ecosystems are worth protecting for future generations.

Mr. Speaker, I urge my colleagues to vote “no” on this bill, and I am looking forward to hearing further discussions from my colleagues.

Mr. Speaker, I reserve the balance of my time.

Mr. WESTERMAN. Mr. Speaker, I yield 5 minutes to the gentlewoman from Colorado (Ms. BOEBERT), the lead sponsor of this legislation.

Ms. BOEBERT. Mr. Speaker, I thank the chairman for helping to lead on this issue. I thank my colleague, Representative TOM TIFFANY, who has also been instrumental in this piece of legislation.

Mr. Speaker, Colorado is at the center of our Nation for wolf battles. That is why Congressman TOM TIFFANY and I introduced H.R. 845, the Pet and Livestock Protection Act.

My bill delists the gray wolf from the Federal Endangered Species List and returns the issue of wolf management to the States and Tribal wildlife agencies.

This doesn't mean that wolves will not be managed. It just means that the Federal Government will step aside, and we will have proper State management. I think we believe in federalism here and the Tenth Amendment and trust our States to do the right thing.

Leftists want to eliminate hunting, lock up our lands, further restrict gun rights, and pander to the interests of extreme environmentalists who don't understand our rural way of life.

In 2020, in Colorado, Denver and Boulder voted to reintroduce gray wolves west of the Continental Divide. This ballot-box biology has led Colorado to rush through the importation of Canadian gray wolves and has set them loose in our State, despite numerous protests and questions about the legality of this dysfunctional and

chaotic approach, putting predators over people.

These predators do not obey arbitrary boundaries. Sure, Colorado may say that they will be introduced west of the Continental Divide, but that doesn't keep them west, and that doesn't necessarily keep them in Colorado, either, as we have seen.

Importing foreign predators into our State has received pushback from our Tribes, energy operators, and our farmers and ranchers. ESA restrictions prohibit ranchers and pet owners from protecting their livestock and pets, as ranchers who shoot at, injure, or kill protected wolves that are stalking sheep or cattle face potential prosecution.

Unfortunately, wolves, again, don't see State lines. They don't know the difference between State, Federal, Tribal, or private land. It is in their nature to travel great distances in pursuit of prey, whether that is deer, elk, sheep, cattle, or even our pets. It has been well documented that wolves don't only hunt to satisfy their hunger. They also hunt for sport.

In March of this year, one of the Canadian wolves attacked and killed a working cattle dog in Jackson County, Colorado, neighboring one of the counties I represent in my district. Last year, a gray wolf from the Great Lakes region was found over 1,000 miles away in Elbert County, east of the Continental Divide, in Colorado's Fourth District, which I represent.

Colorado's agricultural producers have lost \$580,000 in just one year from wolves already introduced. We should listen to our farmers and ranchers and finally delist the gray wolf.

□ 1150

Gray wolves were first listed under the ESA in 1967. That was 58 years ago. Since then, delisting the gray wolves has been supported by the Obama, Trump, and even Biden administrations.

In November 2020, scientists and non-partisan career employees at the Department of the Interior once again found gray wolves were fully recovered and once again issued a rule that returned management of the gray wolf populations to State and Tribal wildlife agencies, as it should be.

Unfortunately, frivolous litigation was filed by environmental extremists, and an activist California judge pandered to them by vacating the 2020 rule and unilaterally relisting the gray wolf by judicial fiat.

Mr. Speaker, the science is crystal clear on this issue: Gray wolves should no longer be on the Endangered Species List. We can no longer put farmers, ranchers, and even our pets in harm's way by using taxpayer dollars to protect a species that has been fully recovered. It is time for the Federal Government to get out of the way and allow the State and Tribal wildlife agencies to manage this species.

Again, just as my colleague on the other side of the aisle agrees, this is an Endangered Species Act success story.

Mr. Speaker, I urge support of my bill.

Ms. HOYLE of Oregon. Mr. Speaker, I yield myself such time as I may consume.

Mr. Speaker, when my colleagues say an activist judge overturned this, it was a Republican-appointed judge who found, again, that it failed to use the best available science.

The U.S. Fish and Wildlife Service just canceled the first-ever nationwide gray wolf recovery plan, which was due this month. This comprehensive, science-based plan would have finally provided a holistic approach to wolf recovery with all stakeholders at the table. This is the type of solution that the courts have been seeking after invalidating five of the six previous attempts to delist wolves.

Unfortunately, H.R. 845 is part of a pattern. Instead of investing time and money into supporting proven paths of success, we are voting on far-reaching and unscientific proposals that don't actually solve the problem and won't make it into law. H.R. 845 would also fragment and make wolf management harder.

Mr. Speaker, I yield 4 minutes to the gentlewoman from Michigan (Mrs. DINGELL).

Mrs. DINGELL. Mr. Speaker, today, we are witnessing an unprecedented extinction crisis with 1 million species at risk of disappearing forever in coming decades.

As the co-chair of the Endangered Species Act Caucus, protecting our Nation's wildlife is one of my top priorities. I am deeply concerned that the provisions included in this bill will cause our country to backtrack on the progress we have made. That is why I have to be opposed today to the bill on the floor, the so-called Pet and Livestock Protection Act.

There has been a lot of discussion about the gray wolf. Let's talk about the listing of the gray wolf under the Endangered Species Act. While progress has been made in certain regions, the reality is clear: Gray wolves have not yet achieved full recovery, and removing Federal protections would be premature and dangerous.

Today, wolves occupy only a fraction of their historic range. Large areas of suitable habitat remain unoccupied, and many existing populations are small, isolated, and genetically vulnerable.

True recovery under the Endangered Species Act requires not just survival in a few regions, but long-term security across a significant portion of the species' range.

We also know from experience what happens when protections are lifted too soon. After previous delisting efforts, several States moved quickly to authorize aggressive hunting and trapping seasons. In some cases, wolf populations declined sharply within 1 single year. These setbacks erase decades of conservation progress and create instability, rather than sound wildlife management.

Gray wolves play a vital role in maintaining healthy ecosystems. As apex predators, they help regulate prey populations, reduce overgrazing, and promote the recovery of forests and watersheds. These ecological benefits support biodiversity and contribute to healthier landscapes that benefit hunters, farmers, outdoor recreation, and rural communities alike.

Some argue that delisting is necessary to address conflicts with livestock in local communities, but science tells a different story. Broad lethal control does not reliably reduce livestock losses and can actually increase conflicts by disrupting pack structure. Nonlethal tools, such as range riders, fladry, improved husbandry practices, and fair compensation programs have proven to be far more effective and deserve continued investment.

The Endangered Species Act is one of the most successful conservation laws in our Nation's history. It sets clear science-based standards for recovery and requires that threats be adequately addressed before protections are removed.

Delisting gray wolves without enforceable, science-based State management plans undermines both the intent of the law and public trust.

This decision is about more than one species. It is about whether we let politics override science or whether we uphold our responsibility to protect wildlife for future generations.

Until gray wolves are truly recovered, connected across the range, and protected by durable management plans, Federal protections must remain in place. That is why attempts to delist the gray wolves through congressional action are opposed by scientists, conservation groups, and the majority of Americans across the political spectrum.

For these reasons, I urge my colleagues to oppose delisting and to stand with science, conservation, and the rule of law.

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

Mr. Speaker, I want to state again: The gray wolf is an ESA recovery success story. We should be celebrating this.

While gray wolves might not currently occupy all of their historic range, they do not meet the criteria for listing under the ESA. This was confirmed by the Biden administration, as with previous administrations before.

Most species are not found throughout their historic range. Elk and black bears, for example, are still absent from much of their historic range, but they are not listed under the ESA.

According to my colleague's argument, the wolf can't be totally recovered until it is back in its entire historic range. Mr. Speaker, the Northeast United States is part of the historic range of the gray wolf. If what I

am hearing is correct, are we promoting restoring the wolf to the Northeastern United States, within metropolitan and suburban areas, where packs of wolves can range 100 miles a day? Is that what we want to make the criteria before we say gray wolves are recovered?

The scientists at the Fish and Wildlife Service in the Biden administration, along with those in the Trump administration, the Obama administration, and the Bush administration, have said that the gray wolf is recovered.

This is just another push to continue a top-down Federal approach to wildlife management that does little to actually help wildlife.

Mr. Speaker, I yield 3 minutes to the gentleman from Wisconsin (Mr. TIFFANY).

Mr. TIFFANY. Mr. Speaker, I suggest to the gentlewoman from Michigan, if she wants to do a ride-along with me and deliver wolves to Madison, Wisconsin, part of their previous range, I would be happy to do that if she would join in that process.

□ 1200

I just want to address one thing in regards to the gentlewoman from Oregon. We have got really good news, what she talked about in regards to inflation. I urge her to watch CNN this morning with the inflation numbers that have come out that are the lowest since 2021. That is good news, as we end 2025, and it is really good news as we go into 2026 that the Pet and Livestock Protection Act is going to pass out of the House of Representatives today.

Federal protections were established a couple decades ago, and there are hundreds of wolves in Wisconsin, Minnesota, and Michigan. Now, there are over 4,000 wolves. Talk about inflation. It has hit the wolf population. Also, if you go back to 2015, 26 of the most eminent wildlife biologists in the upper Midwest urged these judges to delist the wolf, take them off the Endangered Species Act, because the wolf is recovered as the data has shown.

Populations have been bouncing back and forth between being listed and delisted, and this bill provides a permanent solution, returning the population management back to the States.

As everyone in Wisconsin knows, this is something we have seen far too often, most recently when the judge in Oakland, California, vacated the 2020 delisting rule and unilaterally put it back on the ESA list by judicial fiat.

Wisconsinites know best when it comes to managing Wisconsin's wolf population, and it is long past time that we empowered Wisconsinites to be able to manage the gray wolf population once again.

The chairman handled it in a very positive manner. This is a recovery success under the Endangered Species Act.

This is the graphic representation of what is happening, the carnage that is

happening across our States, in rural areas, where pets and livestock are being slaughtered because the wolf is not being managed.

If you talk to any sportsman, they will tell you the wolf belongs on the landscape, but when you do not manage a wildlife population, this is what happens, the slaughter continues of people's pets and livestock.

Gray wolf delisting has been supported by four Presidents. Even the Biden administration's Fish and Wildlife Service asked the Federal appeals court last fall to reinstate the rule.

The gray wolf has been the latest recovery success, with significant populations in the Rocky Mountains and western Great Lakes.

There is something else we should all remember. When a species is removed from the ESA list, it is something we should celebrate.

From farmers to pet owners to sportsmen and -women, delisting the gray wolf is of paramount importance to rural America.

The SPEAKER pro tempore (Mr. BEAN of Florida). The time of the gentleman has expired.

Mr. WESTERMAN. Mr. Speaker, I yield an additional 30 seconds to the gentleman from Wisconsin.

Mr. TIFFANY. Mr. Speaker, in order to maintain our rural way of life, the wolf needs to be delisted. It is past time to return management to the States. This is a legislative fix we can do.

Mr. Speaker, I urge my colleagues to vote "yes." I urge the United States Senate to pass this bill when it comes over to them.

Ms. HOYLE of Oregon. Mr. Speaker, I yield myself such time as I may consume.

I appreciate the words of my good friend from Wisconsin. I invite him to come to my district where the manufacturers in my district are paying more for goods that they have to import to build things in the U.S. and my farmers and wine producers and exporters are losing their markets and have less money to pay for things where the prices have risen for their Thanksgiving, Christmas dinner, and presents. But you are welcome to come.

Also, the issue with H.R. 845, after the 2020 delisting, in Wisconsin 30 percent of its wolf population was killed in just 4 days. Idaho passed a law allowing the killing of up to 90 percent of wolves, including the pups. Montana removed wolf protections around Yellowstone raising bag limits and expanded trapping, killing many of the beloved wolves that tourists travel from around the world to see.

The ecological consequences matter. Wolves are a keystone species critical to healthy ecosystems. When reintroduced to Yellowstone in 1995, they provided benefits throughout the entire ecosystem.

Wolves changed elk behavior, allowing willows and aspens to recover. They brought back beaver, whose dams

create habitats for fish, amphibians, and birds. One study found a 1,500 percent increase in the willow growth, surpassing 82 percent of trophic cascades in global analysis. Recently, we have seen evidence that wolves are helping to protect deer and elk populations from the spread of chronic wasting disease, a horrifying neurological disease rampaging through the States and causing real problems for hunters.

The State of Oregon has worked to lead the way in wolf recovery, but there is only so much we can do if neighboring wolf populations are wiped out.

We want to see recovery, get the environmental benefits, and also make sure that our ranchers are compensated for any losses that occur.

Mr. Speaker, I yield 4 minutes to the gentleman from Virginia (Mr. BEYER), my good friend.

Mr. BEYER. Mr. Speaker, as co-chair of the House Endangered Species Caucus, I rise today in strong opposition to H.R. 845.

This bill, formerly called the Trust in Science Act, has gone under a rebrand since the best available science contradicts this politically motivated bill.

I am here to remind the American people of some key facts underlying this bill. First, a small reminder, people are predators, too. In fact, we are the most successful apex predator of all time.

This bill has the deeply unpopular Project 2025's name all over this. Look at page 534, part 3, section 16, where delisting the gray wolf is listed as the second highest priority for the Department of the Interior, just behind delisting the grizzly bear.

Despite the Trump administration's incompetence and chaos, we have not forgotten about the direction coming from Project 2025 and the damage already done to our country.

Second, this bill fails to recognize the status of gray wolves today, taking us back to an outdated rulemaking that didn't hold up in court.

It is important to recognize State-by-State differences in wolf recovery but also in State-sanctioned predation. What does the best available recovery science say today? That is what we should be supporting.

Gray wolf recovery goals are outdated, and they need to be updated. That is what we should be working on instead of this extinction effort. That is what this is: permission to once again reduce the wolf population in the lower 48 to zero.

We know that premature delisting hinders the ability of gray wolves to be delisted legitimately.

Today, wolves continue to face ongoing serious threats to their survival, including poaching, habitat loss, and the patchwork of inconsistent State mismanagement.

The protections of the ESA have allowed gray wolf populations across the country to stabilize and regain

strength. If delisted nationally, gray wolves will once again be hunted and trapped to the point of extinction.

If we actually wanted to trust the science, we see that the gray wolf has made progress in their recovery but also that wolves in the Northern Rocky Mountains are being killed in dramatic numbers, even the celebrated Yellowstone National Park's gray wolves.

The Biden administration recognized this and put forth a National Wolf Recovery Plan that was supposed to be released last week on December 12. This highly anticipated plan would have developed a comprehensive nationwide recovery plan that would have engaged the public to help develop a unified recovery approach based on scientific evidence. Unfortunately, the Trump administration hastily announced its cancellation last November.

By the way, the only reason Canadian wolves were necessary is because we had killed every last lower 48 wolf.

Finally, I have to address the spurious argument that protecting pets and livestock somehow is ample justification for delisting the wolves.

In Montana, Mr. Speaker, fewer than 60 livestock out of almost 3 million are killed every year by wolves. That is one loss for every 50,000 cows or sheep. That is a very tiny loss ratio compared to deaths by accident, lightning, freezing temperatures, and all of the other natural hazards that come from living outside 365 days a year, not to mention that most of these animals are being raised to be slaughtered. The numbers don't look much different in Wyoming or Idaho. Ranchers are compensated very generously for losses related to wolves, always more than market value, sometimes three times the value of the animal lost.

Mr. Speaker, State Farm reported that 93,000 dogs—not 5 or 10—93,000 were hit by cars in 2022, yet no one has suggested banishing automobiles.

I love dogs. Most of us do. We know how smart and complicated and ferociously loyal they are. They are just wolves we have tamed. There is abundant evidence that wolf families are more like human families than any other species. Wolves and men have evolved together over the millennia, one reason wolves show up in all our most important stories, poems, and songs.

When we kill all the wolves, we kill something in our own humanity. We deny our connection to nature and what is beautiful and glorious.

How can we proclaim the wonder of existence, the generosity of a loving God, and then hate the charismatic creatures he has also given to this world.

Mr. Speaker, I urge my colleagues to kill this bill.

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

The whole State of Virginia was at one time gray wolf habitat. Washington, D.C. had gray wolves. When are

we going to turn them loose here on the Mall or Old Town or whatever part of Virginia?

□ 1210

This is a problem that seems to get exported to rural areas, and people turn a blind eye to what happens in the rural areas.

Also, there is a difference between desiring fewer wolves and desiring no wolves. States where wolves have already been delisted have a proven track record of success which has been confirmed by the U.S. Fish and Wildlife Service. This bill does not prohibit the U.S. Fish and Wildlife Service from listing the wolf in the future if it determines a listing is warranted.

However, as the service has confirmed multiple times, the gray wolf currently does not meet that criteria.

Mr. Speaker, I yield 4 minutes to the gentleman from Minnesota (Mr. STAUBER).

Mr. STAUBER. Mr. Speaker, as a member of the newly formed follow the science caucus, I rise today in strong support of a bill I am proud to cosponsor, H.R. 845, the Pets and Livestock Protection Act.

It has been proven time and time again that the gray wolf is not endangered and, in fact, has fully recovered.

When the gray wolf was listed as threatened in Minnesota under the Endangered Species Act in 1978, a recovery goal of 1,250 to 1,400 wolves was set.

Today, according to data from the U.S. Fish and Wildlife Service and the Minnesota Department of Natural Resources, we have over 2,700 wolves in Minnesota. However, as my constituents will tell you, Mr. Speaker, that is a severe undercount. It is more like 5,000 to 7,000 in Minnesota.

Over one-half of the gray wolves across the lower 48 are in Minnesota, and most of them can be found in my district.

The gray wolf might be one of the greatest success stories of the ESA, and it is one that should be celebrated. Now that the species has recovered, it is time to delist. That is not just my opinion. It is a bipartisan view that has been held by several Presidential administrations on both sides of the aisle.

In 2009, the Bush administration delisted the gray wolves. Activist groups sued to relist.

In 2013, the Obama administration delisted the gray wolves. Activist groups sued to delist.

In 2020, the Trump administration delisted gray wolves. Activist groups sued to relist.

Just last year, the Biden administration even agreed, when they chose to defend the Trump administration's 2020 delisting rule.

Presidents Bush, Obama, Trump, and even Biden, trusted the science and sought to do the right thing. It is activist groups, with the help of activist judges, who continue to choose to disregard the science and fight to keep these unnecessary protections in place.

As a result, my constituents have to face growing wolf populations in their backyards each and every day.

Mr. Speaker, look at this photo right here to my right. Just last month in Ely, Minnesota, a wolf was seen in the school parking lot in the middle of the day. It was just feet from the schoolhouse door. Mr. Speaker, because of the gray wolf's listing status, nothing could be done to protect the lives of the students there. The broken ESA is putting my constituents' lives at risk.

Simply said, it is beyond time that the gray wolf is delisted under the ESA. Unfortunately, as long as activists are willing to abuse our Federal Court system to weaponize the ESA, I am afraid an administrative delisting will never be possible. There is only one alternative, Mr. Speaker. Congress needs to act and finally vote in legislation to delist the gray wolves.

As a hunter in northern Minnesota, last year I held several townhalls on the gray wolf and the concerns of the delisting. Hunters for Hunters, Hunter Nation, and other pro-hunting groups supported this endeavor.

Mr. Speaker, if you look at trail cams, for example, you will see a nice, beautiful, in this case, 8-point buck. Ten minutes later, on the same trail, same trail cam, comes the wolf.

Who knows what happened to that big, beautiful buck.

The fact of the matter is that we should celebrate the ESA's accomplishment. The gray wolf has recovered. Let the States manage it. They can be more nimble than the Federal Government.

Mr. Speaker, I urge my colleagues to join me in support of this important piece of legislation.

Ms. HOYLE of Oregon. Mr. Speaker, I acknowledge that wolf-livestock conflicts do happen and that ranchers deserve support when there is a wolf problem. We already have tools that work to address these conflicts, but this bill does nothing to improve them or to help our ranchers.

H.R. 845 has no funding for conflict mitigation, no support for nonlethal deterrents, and no additional compensation for losses. If we want to delist wolves responsibly, then we need to give Fish and Wildlife Service the resources and direction it needs to work collaboratively, respond to science, and invest in conflict prevention.

Mr. Speaker, I yield such time as he may consume to the gentleman from California (Mr. HUFFMAN), who is the ranking member.

Mr. HUFFMAN. Mr. Speaker, I thank the gentlewoman from Oregon for yielding.

Mr. Speaker, the gentlewoman is right. If we want to talk about the occasional conflicts that exist between livestock and pets and any predators, that is a legitimate conversation. However, what we are hearing from across the aisle is really jumping the shark, if you will forgive another predator metaphor, Mr. Speaker.

We are being led to believe that packs of wolves are about to descend on urban areas in New England and Madison, Wisconsin, and that they are looming outside of schools.

I think my colleagues across the aisle need to understand: The American people are a little smarter than that. They are kind of going to see through this Little Red Riding Hood meets chupacabra narrative the gentleman was trying to spin to scare people about wolves.

Mr. Speaker, let me tell you the way it actually works. The Endangered Species Act does not prevent wildlife managers from intervening any time a wolf or any other predator threatens property or human beings. In fact, just a few weeks ago in Northern California, I believe it was the Sierra Valley, a pack of wolves from one of our packs there had begun preying on cattle in an area where they are concentrated because of the way they move through the State, and the California Department of Fish and Wildlife came in and took some. I think they took five or six of them, killed them. There was no ESA lawsuit, and there was no violation of the law.

A little reality check on what we just heard from my colleague from Minnesota, that there was nothing anyone could do about this scary chupacabra wolf in the school parking lot. That is nonsense. That is not the way the ESA works.

Now, let's be clear. This bill is not about protecting pets or livestock. It is about politics overriding science, and the consequences of doing that are disastrous. The precedent set by this bill would be very troubling. It would tell wildlife scientists that their expertise doesn't matter. It tells Tribal nations that their voices can be ignored, and it tells the American people they no longer have the right to challenge unlawful government actions.

The ESA is simple and effective. It ensures decisions are grounded in science. That is the heart of it, and this bill throws that principle out the window. It mandates a nationwide delisting of gray wolves, and it explicitly blocks judicial review. It would prevent courts from doing their job to determine whether a government action even complies with the law.

Now, we don't have to speculate about what happens when protections for gray wolves are lifted because we have seen it play out.

In the State of Wisconsin where hunters like the group, Hunter Nation, which is led by Ted Nugent and Don Jr. on the board, swept in as soon as the wolf hunting season was open. Quickly they did that, despite objections from Tribes in the region. The result was devastating. Mr. Speaker, 218 wolves, about 20 percent of the State's population, were wiped out. By the end of the season, 30 percent were killed—nearly twice as many wolves as the State had authorized.

Over the course of about 60 hours, thousands of hunters, including some

unlicensed hunters, participated in coordinating hunting groups, engaged in a dangerous terrorizing campaign against the wolves using bait and wolf calls. They hunted at night. They used dogs. Mr. Speaker, 188 wolves were taken by dogs. They killed 130 wolf pups that were less than 2 years old. This is not thoughtful, science-based management of the State's wolf population. This is not celebrating the recovery of the wolf as we keep hearing in this debate.

This week we received a letter from the Wisconsin Tribes who had sued to try to stop that hunt. In the letter, they object to this bill today. They point out the inadequacy of existing State-level regulatory mechanisms that led to that disaster in Wisconsin.

Mr. Speaker, I include in the RECORD a letter from six Wisconsin Tribes.

DECEMBER 17, 2025.

DEAR CONGRESSPERSON: We, the federally recognized bands of Ojibwe in Wisconsin, oppose the legislation proposed by Rep. Lauren Boebert (R-CO) to delist gray wolves and believe that the gray wolf should remain protected under the Endangered Species Act ("ESA"). We write to inform you of our continued opposition to proposed legislation that would direct the Secretary of the Interior to reissue final rules relating to delisting the gray wolf under the ESA, particularly where judicial review of the rule would be barred.

The Pet and Livestock Protection Act, H.R. 845, would impact our rights and treaty-protected resources. The treaty-protected resources of the Ojibwe bands include gray wolves in the territory ceded to the United States under the Treaties of 1837 and 1842 ("ceded territory"), which has become the northern third of the State of Wisconsin. We previously expressed this opposition to lawmakers, including Sen. Baldwin and Sen. Johnson when they proposed legislation to delist the gray wolf in 2022.

One of the requirements for a finding of recovery and delisting under the ESA is a determination that the species in question is no longer imperiled by "the inadequacy of existing regulatory mechanisms." 16 U.S.C. §1533(a)(1)(D). However, Wisconsin's February 2021 wolf hunt resulted in the deaths of almost twice the number of wolves allowed to be killed by the state. This debacle clearly demonstrated that Wisconsin's existing regulatory mechanisms are not up to the task of enabling effective management of the state's wolf population. If the gray wolf is delisted, and the Wisconsin Department of Natural Resources ("WDNR") implements another hunt as required under Wisconsin law, Wisconsin's problematic legal framework for regulation and oversight of state-licensed wolf hunters and trappers will again threaten the wolves and Ojibwe treaty rights.

This misguided legislation continues a long history of disproportionately targeting the gray wolf—the first endangered species ever to be legislatively delisted by Congress. This proposed legislation also disregards the fact that many Americans nationwide believe that wolves should remain protected. In 2013 for example, approximately one million Americans voiced opposition to the proposal to strip endangered species protections from gray wolves. In addition, widespread public opposition to the wolf hunt has been routinely disregarded by the WDNR Board, making federal protections even more important.

Our position still stands that legislation to delist the gray wolf is misguided and con-

tinues to disregard strong tribal opposition to delisting, as well as widespread opposition from the general public.

Bad River Band of Lake Superior Chippewa, Lac Courte Oreilles Band of Lake Superior Chippewa Indians, Lac du Flambeau Band of Lake Superior Chippewa Indians, Red Cliff Band of Lake Superior Chippewa Indians, Sokaogon Chippewa Community, St. Croix Chippewa Indians of Wisconsin.

□ 1220

Mr. HUFFMAN. Mr. Speaker, Tribes support continued protection for wolves. Seventy-eight percent of Americans support continued protection for wolves. They want to see living wolf pups in Yellowstone, not news stories about tortured wolves in bars or wolf hunts with dogs. I urge my colleagues to vote "no" on this bill.

I would also like to just move to some additional remarks that are part of our motion to recommit.

The entire debate so far has shown why Members of Congress have no business in listing and delisting decisions. We are not scientific experts. We are not objective scientists tasked with assessing population numbers, recovery goals, and continued threats to the species.

That is why the ESA properly leaves those questions to actual experts, not politicians. For that reason, we shouldn't be passing this bill at all, but if Republicans are going to go down this road, then there should at least be some guardrails in place that are based on actual science.

For this reason, at the appropriate time, I will offer a motion to recommit this bill back to committee.

If the House rules permitted, I would have offered this motion with an important amendment to this bill. We were not allowed to do that.

My amendment is straightforward. The NRA gets to have this bill and its little hunting spree, but if Ted Nugent and Don Jr. and all the other folks who need to do this to prove their manhood actually go where scientists have warned us about and take the wolf population down below science-based recovery standards, then the Secretary of the Interior would have to issue an emergency regulation temporarily restoring Federal protection in that instance.

This would provide a necessary backstop if Congress legislatively delists the gray wolf and it careens right back toward extinction again, which we know it would.

Mr. Speaker, I ask unanimous consent to insert the text of my amendment into the RECORD immediately prior to the vote on the motion to recommit. I hope my colleagues will join me in voting for the motion to recommit in a few moments and keeping amodicum of actual science in the Endangered Species Act.

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

There was no objection.

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

Mr. Speaker, I have a question: Which will it be? What is the good science?

As I have mentioned before, the Obama administration, the Bush administration, the first Trump administration, the Biden administration all said the wolf has been recovered. The experts, the scientists at U.S. Fish and Wildlife have said it has been recovered.

Yet my friends argue it has not been recovered because there are some places where its native range is that the wolf is not there. I remind everyone, we are in gray wolf territory, historical gray wolf territory.

Mr. Speaker, like many, like you probably and myself, I have walked around D.C. at night, and this is a rat-infested city. I think there would be at least a little bit of food for the wolves if we were to turn a pack loose on The Mall. However, what happens when they eat all the rats? What do they go after next?

Now, this is a preposterous situation because I don't think anybody really wants a pack of wolves on The Mall. However, if you go down the logic trail that my colleagues are making, the wolf is not recovered until it is back in its historic range.

Why do we want to sit in a big city where wolves once were and say: We want wolves, just not in our backyard. We want them out in the Midwest or West where it is somebody else's problem, but we don't want those problems here because it makes no sense to put wolves back here in the big cities and across the Northeast.

Mr. Speaker, I yield 2 minutes to the gentleman from California (Mr. LAMALFA), where they have a lot of wolves.

Mr. LAMALFA. Mr. Speaker, I thank my colleague from Arkansas for yielding.

It is amazing here. I represent the northeast corner of California where the wolves are being inflicted upon the people and the wildlife of that area. The stuff I hear coming from the other side of the aisle about recovering the wolves and even the mocking, yes, it is real.

There are wolves that are encroaching on elementary schools in Siskiyou County, the Little Shasta Elementary School. This isn't some "Little Red Riding Hood" story. This isn't some made-up deal. It is very real, and they are coming closer and closer to town all over the northeast part of California.

My colleague from the north coast, when he mocks us like that, I am wondering if this Proposition 50 in California kicks in, and he ends up representing my constituents up there that are fighting against this, and I am their only voice in the echo chamber of California against this: Are you going to have townhalls up there? Are you going to go into Modoc County, Siskiyou County, Sierra Valley, and tell them this is a "Red Riding Hood" story about the wolves devouring their livestock, eating up all their wildlife?

The mocking. Why is it they can't stand the people that produce the food, the lumber that comes from my part of the State, from the West, from the rural parts of America? Is it they want all of their beef—I guess if they don't eat beef, they might be able to have this conversation—if they want their beef to be imported from somewhere else, if they don't want it produced here, under our standards, why is it they hate my constituents who are just trying to provide the urban people with what they need?

We don't need a hell of a lot, just coming from the urban area, I tell you what. If the gentleman wants to cater only to Marin County and have this population continue to devastate our people up there and rein in just a little bit the misinterpretation of the Endangered Species Act over the 50 years—yeah, it was well-intentioned when it came out. It was a temporary tool. It never was meant to be a life sentence or even a death sentence for livestock and for people's livelihoods up here in this area here or all over the West. This is a clear example of how the ESA has drifted a long ways from that end.

It is high time that people have tools, especially my home State of California, where they have no tools until the fish and game finally decides to come in.

Ms. HOYLE of Oregon. Mr. Speaker, I reserve the balance of my time.

Mr. WESTERMAN. Mr. Speaker, I yield 4 minutes to the gentleman from Oregon (Mr. BENTZ).

Mr. BENTZ. Mr. Speaker, I rise today in strong support of H.R. 845. The bill would address at least some of the injury and injustice being inflicted on my State and my constituents by the inappropriate and unfair enforcement of the Endangered Species Act as it has been applied in the reintroduction of the gray wolf.

This injustice is apparent in the Federal Government's inability to manage and control the killing, the maiming, and the terrorizing of thousands of head of livestock across my district and the rest of the United States and in the failure of the government to properly pay for the cost of its decision to reintroduce the wolf.

I will address the lack of management first.

Let me begin my discussion of failed management by showing several pictures which are graphic illustrations of the lurking reality that many of my ranching families must deal with every single day.

As you can see, there is nothing refined about how a wolf goes about feeding itself. You can only imagine the feelings of the rancher when he or she finds their livestock torn apart or dying. You can try to imagine the anger they feel, knowing that they are legally prevented from stopping that wolf before it causes this pain and horror for their cattle and calves and stopping these wolves from doing this over and over again and again.

I have held meeting after meeting across my district listening over and

over to stories about wolves attacking herds, scattering to the four winds terrified cattle and calves, and ignoring the sad hazing efforts that we heard about earlier from across the aisle that livestock owners are reduced to using under the law to try to protect their livelihoods.

The fury, the anger, the frustration, the fear that a wolf may at some point attack a child, which it came close to doing earlier last year while children in my district were waiting for a schoolbus, is totally understandable and why we are on this floor sharing the reality of the wolf in America today.

If we are to protect those who are trying their best to feed this country, to make a living, to keep their communities viable and safe, to put out range fires, to pay their taxes, and continue to be productive parts of this Nation, we must manage the wolf. This means we must delist the wolf and move management of these creatures back to the States. Remember, this is exactly what the Democratic Obama and Biden administrations and Republican Bush and Trump administrations have agreed needed to be done literally years ago. The wolf listed status continues only because of judicial fiat.

Let me turn to the actual cost of re-introduction of the wolf and the need for those who have created this cost to be responsible for paying for it.

University studies show that the annual cost of the wolf to the cattle business as of a few years ago was estimated to be \$128 million. That is each year. This number is far higher now that cattle prices are higher.

Many think the only cost of the wolf is the killing of the livestock, but the impact of the primal fear and terror cattle understandably feel when a wolf is near has dramatic and serious impacts on weight gain and on pregnancy rates. These losses in production are real, and they are serious. In a time when even the President is concerned about beef prices, these losses affect everyone by causing a reduction in the size of America's cattle herd and, of course, their productivity.

□ 1230

In recognition of this damage caused by the wolf, laws have been enacted, some in the big, beautiful bill and some at the State level, to try to bring at least some ESA reimbursement equity into play by providing some payment to the owners for the death of cattle caused by wolves, but these programs come nowhere close to offsetting the very real loss.

Mr. Speaker, I can assure you that the rancher would be absolutely happier if he or she could completely avoid these losses that lead to asking for justice under these programs.

If we are to properly, fairly, and logically manage the wolf, we must pass Congresswoman BOEBERT and Congressman TIFFANY's bill, H.R. 845, the Pet and Livestock Protection Act.

This bill would federally delist the wolf and allow States to actually manage wolf populations—not exterminate, manage. If we are to properly allocate responsibility for the monetary cost of the wolf—that is, the cost of the Endangered Species Act—America itself must pay for the consequences of this law. That means Congress must manage the problem and appropriate dollars to pay for it.

Mr. Speaker, let's begin by passing this bill.

Ms. HOYLE of Oregon. Mr. Speaker, I reserve the balance of my time.

Mr. WESTERMAN. Mr. Speaker, I yield 2 minutes to the gentleman from Colorado (Mr. CRANK).

Mr. CRANK. Mr. Speaker, I rise in support of the Pet and Livestock Protection Act, which I am a cosponsor of, led by my friends, Representative BOEBERT and Representative TIFFANY.

The truth is, Congress should not have to step in to delist the gray wolf, but here we are. That is because the Endangered Species Act listing process no longer works as it was intended to do.

The gray wolf has exceeded recovery goals. The U.S. Fish and Wildlife Service, under both Republican and Democratic administrations, has repeatedly concluded that the species should be delisted. Yet, every time, radical, litigious groups step in to block that decision.

They ignore science. They ignore facts. They ignore the law. They don't want recovery. They want permanent Federal control.

Meanwhile, wolves are wreaking unchecked havoc on ranchers, farmers, wildlife, and rural communities, which are paying the price.

In the State of Wyoming, since they reintroduced the wolf, their moose population has decreased by 80 percent. Why are we choosing wolves over moose in the State of Wyoming?

I spend more time in wolf country than probably many of the Members on this House floor. The elk populations are being decimated. They are starved. I hear my colleagues on the other side talking about how in 4 days, they killed 30 wolves. Do you know what? That is called wildlife management. You can do that.

When you have a hunting season for deer and set a goal to kill 200 deer, there are 200 deer killed in a week. It is wildlife management. That is what we do. That is what the professionals do and do exceedingly well.

I find it interesting that it is the people in this Chamber who don't have wolves in their district who want wolves in other people's districts.

Ms. HOYLE of Oregon. Mr. Speaker, I will just clarify. I said that in 4 days, 30 percent of the wolf population was killed, 30 percent, not 30 wolves.

Mr. Speaker, I reserve the balance of my time.

Mr. WESTERMAN. Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from Arkansas has 3 minutes remaining.

Mr. WESTERMAN. Mr. Speaker, I yield 2 minutes to the gentleman from Colorado (Mr. HURD).

Mr. HURD of Colorado. Mr. Speaker, I am an original cosponsor of the Pet and Livestock Protection Act because it delists the gray wolf under the Endangered Species Act. This gives wildlife managers more control in States while protecting domestic animals from wolf attacks.

For years, Republican and Democratic administrations alike under Presidents Bush, Obama, Trump, and Biden have all reached the same conclusion: The gray wolf population is healthy, has exceeded all recovery goals, can sustain life from a variety of threats, and should be delisted.

The Endangered Species Act was never meant to be a permanent listing statute. It was designed to recover species, and once recovery is achieved, to step back. That is not what is happening.

Environmental groups have repeatedly run to courts to block delisting, ignoring the science and overriding bipartisan agency findings. The cost is regulatory whiplash, uncertainty, and paralysis while ranchers, landowners, and rural communities pay the price.

Mr. Speaker, I will respond to something that was said at the beginning of this debate. One of my colleagues on the other side of the aisle criticized this Congress for discussing wolves and said we should be focused on affordability.

First of all, we have been and are voting on bills that improve life and make it more affordable for every American, but here is the thing: For the ranchers, outfitters, and rural Coloradans I represent, this is affordability. This is their livelihood. This is how food gets to tables across America, whether you live in a small town or in the largest city. This is a way of life that America depends on, and it deserves respect, not dismissal.

H.R. 845 is supported by science. It respects each State's circumstances. It delivers protection for rural America.

Mr. Speaker, I urge support for this bill.

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

Mr. Speaker, H.R. 845 delists the gray wolf across the United States and blocks judicial review of the delisting. This is an antiscience bill that prioritizes politics ahead of species conservation.

This bill will result in hundreds of unnecessary and indiscriminate wolf kills while doing very little to address the legitimate conflicts between some wolves and livestock. I will work with anyone on addressing those legitimate conflicts.

We have tools and funding available to address those concerns—not enough, but we have those—without undermining the progress we have made to recover this iconic species.

Mr. Speaker, I urge my colleagues to vote “no” on H.R. 845, and I yield back the balance of my time.

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

Mr. Speaker, the facts and the science are clear. The gray wolf is a recovered species. It is time for America to celebrate that, and Congress needs to act to make that happen.

By passing this bill, Congress would be celebrating an ESA success story and endorsing the bipartisan policy of four successive Presidential administrations—namely, to trust the science and delist the gray wolf.

Mr. Speaker, I thank Congresswoman BOEBERT and Congressman TIFFANY for their strong leadership on this important legislation.

Mr. Speaker, I urge my colleagues to support the bill, and I yield back the balance of my time.

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

Pursuant to House Resolution 951, the previous question is ordered on the bill, as amended.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT

Mr. HUFFMAN. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Mr. Huffman of California moves to recommit the bill H.R. 845 to the Committee on Natural Resources.

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

Mr. Huffman moves to recommit the bill H.R. 845 to the Committee on Natural Resources with instructions to report the same back to the House forthwith, with the following amendment:

Add at the end the following:

SEC. 4. EXCESSIVE WOLF LOSSES.

If, at any time, the Secretary of the Interior finds the unsustainable harvest of gray wolves or another factor has reduced the gray wolf population below recovery thresholds, the Secretary shall, not later than 7 days after the date on which the Secretary makes such finding, with respect to the gray wolf—

(1) issue an emergency regulation under section 4(b)(7) of the Endangered Species Act of 1973 (16 U.S.C. 1533(b)(7)) to temporarily restore Federal protections; and

(2) initiate a species status review.

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

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

Mr. HUFFMAN. 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, further proceedings on this question will be postponed.

□ 1240

DO NO HARM IN MEDICAID ACT

Mr. GUTHRIE. Mr. Speaker, pursuant to House Resolution 953, I call up the bill (H.R. 498) to amend title XIX of the Social Security Act to prohibit Federal Medicaid funding for gender transition procedures for minors, and ask for its immediate consideration.

The Clerk read the title of the bill.

The SPEAKER pro tempore. Pursuant to House Resolution 953, the bill is considered read.

The text of the bill is as follows:

H.R. 498

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

SECTION 1. SHORT TITLE.

This Act may be cited as the "Do No Harm in Medicaid Act".

SEC. 2. PROHIBITING FEDERAL MEDICAID FUNDING FOR GENDER TRANSITION FOR MINORS.

(a) IN GENERAL.—Section 1903(i) of the Social Security Act (42 U.S.C. 1396b(i)) is amended—

(1) in paragraph (26), by striking “; or” and inserting a semicolon;

(2) in paragraph (27), by striking the period at the end and inserting “; or”; and

(3) by inserting after paragraph (27) the following new paragraph: “(28) with respect to any amount expended for specified gender procedures under section 1905(kk) to an individual under 18 years of age enrolled in a State plan (or waiver of such plan), including any amounts expended for the administration of a State program that furnishes specified procedures and drugs to individuals under 18 years of age.”

(4) in the flush left matter at the end, by striking “and (18),” and inserting “(18), and (28)”.

(b) PROHIBITING FEDERAL MEDICAID FUNDING FOR GENDER TRANSITIONS FOR MINORS.—Section 1905 of the Social Security Act (42 U.S.C. 1396d) is amended by adding at the end the following new subsection:

“(KK) PROHIBITING FEDERAL MEDICAID FUNDING FOR GENDER TRANSITIONS FOR MINORS.—

“(A) For purposes of section 1903(i)(28), except as provided in subparagraph (B), the term ‘specified gender transition procedures’ means, with respect to an individual, any of the following when performed for the purpose of intentionally changing the body of such individual (including by disrupting the body’s development, inhibiting its natural functions, or modifying its appearance) to no longer correspond to the individual’s sex:

“(i) Performing any surgery, including—

“(I) castration;

“(II) sterilization;

“(III) orchiectomy;

“(IV) scrotoplasty;

“(V) vasectomy;

“(VI) tubal ligation;

“(VII) hysterectomy;

“(VIII) oophorectomy;

“(IX) ovariectomy;

“(X) metoidioplasty;

“(XI) clitoroplasty;

“(XII) reconstruction of the fixed part of the urethra with or without a metoidioplasty or a phalloplasty;

“(XIII) penectomy;

“(XIV) phalloplasty;

“(XV) vaginoplasty;

“(XVI) vaginectomy;

“(XVII) vulvoplasty;

“(XVIII) reduction thyrochondroplasty;

“(XIX) chondrolaryngoplasty;

“(XX) mastectomy; and

“(XXI) any plastic, cosmetic, or aesthetic surgery that feminizes or masculinizes the facial or other physiological features of an individual.

“(ii) Any placement of chest implants to create feminine breasts or any placement of erection or testicular prosthesis.

“(iii) Any placement of fat or artificial implants in the gluteal region.

“(iv) Administering, supplying, prescribing, dispensing, distributing, or otherwise conveying to an individual medications, including—

“(I) gonadotropin-releasing hormone (GnRH) analogues or other puberty-blocking drugs to stop or delay normal puberty; and

“(II) testosterone, estrogen, progesterone or other androgens to an individual at doses that are supraphysiologic, greater or more potent than would normally be produced endogenously in a healthy individual of the same age and sex.

“(B) EXCEPTION.—Subparagraph (A) shall not apply to the following when furnished to an individual by a health care provider with the consent of such individual’s parent or legal guardian:

“(i) Puberty suppression or blocking prescription drugs for the purpose of normalizing puberty for an individual experiencing precocious puberty.

“(ii) Appropriate and medically necessary procedures or treatments to correct for—

“(I) a medically verifiable genetic disorder of sex development, including—

“(aa) 46,XX chromosomes with virilization;

“(bb) 46,XY chromosome with undervirilization; and

“(cc) both ovarian and testicular tissue;

“(II) sex chromosome structure, sexsteroid hormone production, or sex hormone action, if determined to be abnormal for a healthy individual of the same sex and age by a physician through genetic or biochemical testing;

“(III) infection, disease, injury, or disorder caused or exacerbated by a previous procedure described in subparagraph (A), or a physical disorder, physical injury, or physical illness that would, as certified by a physician, place the individual in imminent danger of death or impairment of a major bodily function unless the procedure is performed, not including procedures performed for the alleviation of mental distress; or

“(IV) procedures to restore or reconstruct the body of the individual in order to correspond to the individual’s sex after one or more previous procedures described in subparagraph (A), which may include the removal of a pseudo phallus or breast augmentation.

“(C) SEX.—For purposes of subparagraph (A), the term ‘sex’ means either male or female, as biologically determined and defined by clause (i) and clause (ii).

“(i) FEMALE.—The term ‘female’ means an individual who naturally has, had, will have, or would have, but for a developmental or genetic anomaly or historical accident, the reproductive system that at some point produces, transports, and utilizes eggs for fertilization.

“(ii) MALE.—The term ‘male’ means an individual who naturally has, had, will have, or would have, but for a developmental or genetic anomaly or historical accident, the reproductive system that at some point produces, transports, and utilizes sperm for fertilization.”

The SPEAKER pro tempore. The bill shall be debatable for 1 hour, equally divided and controlled by the chair and ranking minority member of the Committee on Energy and Commerce or their respective designees.

The gentleman from Kentucky (Mr. GUTHRIE) and the gentleman from New Jersey (Mr. PALLONE) each will control 30 minutes.

The Chair recognizes the gentleman from Kentucky (Mr. GUTHRIE).

GENERAL LEAVE

Mr. GUTHRIE. Mr. Speaker, I ask unanimous consent that all Members may have 5 legislative days to revise and extend their remarks and include extraneous material on H.R. 498.

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

There was no objection.

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

Mr. Speaker, I rise in strong support of H.R. 498, the Do No Harm in Medicaid Act. This bill helps support our fellow hardworking Americans whose valuable and finite tax dollars should not continue to fund medically unnecessary care under the Medicaid program.

It is our duty as Members of Congress to focus hard-earned taxpayer dollars on care that is medically necessary to improve the health of Americans. H.R. 498, Do No Harm in Medicaid Act, does just that. It prohibits Federal dollars from going toward specified gender transition procedures for individuals under 18.

My fellow House Republicans, particularly my colleagues on the Energy and Commerce Committee, have worked diligently this Congress to eliminate waste, fraud, and abuse in the Medicaid program and the Working Families Tax Cut Act.

Our goal is to eliminate unnecessary and improper procedures and strengthen Medicaid for expectant mothers and children, low-income seniors, and individuals with disabilities.

The CBO estimates this bill would save taxpayers \$445 million over a decade. I want to make it abundantly clear that it in no way prevents minors from accessing medical care that they truly need. It just simply prohibits the use of Medicaid funding on specified procedures that are medically unnecessary.

This critical legislation builds upon our work in the Working Families Tax Cut Act to create a more sustainable Medicaid program. I ask my colleagues to support the bill.

Mr. Speaker, I reserve the balance of my time.

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

Mr. Speaker, it is shamelessly bold for Republicans to bring a bill to the floor called the Do No Harm in Medicaid Act. That is today’s Republican Party. They simply lack any shame.

They say that they are doing no harm to Medicaid when their big, ugly bill earlier this year cut nearly \$1 trillion from the Medicaid program. That is a huge cut that will leave millions of low-income families without any health coverage at all.

We already see the devastating effects of their big, ugly bill. States,

which are already facing budget shortfalls, stare down a reduction of as much as 20 percent of their Federal Medicaid funding. They are being left with an impossible challenge.

We are seeing across-the-board cuts that are crippling hospitals, maternity units, home care providers, and clinics. We are seeing healthcare providers close their doors and cut their services. We are seeing States scale back benefits, leaving those who are able to keep their Medicaid coverage with less of the healthcare that they need.

Now, even with all of that, Republicans have the audacity to bring a bill to the floor that they claim is about doing no harm in Medicaid. That is not what this is about.

H.R. 498 is an extreme attack on medically necessary healthcare for children. The bill bans Medicaid funding for gender-affirming care for minors and strips States of even more Medicaid funding if they choose to cover this medically necessary care with their own State dollars.

Mr. Speaker, Republicans are once again reaching into the doctor's office and taking deeply personal and private medical questions out of the hands of doctors, parents, and patients. They are putting it into their own hands, as if anyone wants politicians making medical decisions for them and their children.

As Members of Congress, we ought to be focused on bringing down healthcare costs and ensuring people have access to the healthcare they need, not getting in the way of doctors and parents who know what is best for their patients and their children.

The reality is this floor debate is nothing more than political theater, aimed at distracting from the devastating healthcare crisis Republicans created and are making worse every day.

They are trying to distract from the fact that their healthcare cuts are going to strip healthcare away from 15 million Americans and close hospitals all across the Nation. They are trying to distract from the fact that they are letting the Affordable Care Act's enhanced premium tax credits expire on January 1.

Republican inaction is driving up healthcare costs for more than 20 million Americans who are facing double, triple, or even quadruple premium increases.

Mr. Speaker, Republicans can't distract from this cruelty. I urge my colleagues to vote "no" on this bill.

I also call on Speaker JOHNSON to immediately bring up the Jeffries discharge petition that now has the support of a majority of House Members and that would extend the ACA premium tax credits for 3 years.

A majority of this House—Democrat and Republican—wants to act to extend these tax credits. It is time for Speaker JOHNSON to bring that bill to the floor.

Mr. Speaker, I reserve the balance of my time.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Illinois (Mrs. MILLER).

Mrs. MILLER of Illinois. Mr. Speaker, I rise today in strong support of H.R. 498, the Do No Harm in Medicaid Act.

Medicaid was designed as a safety net to be used only by U.S. citizens when they fall onto hard times and need medical support. It was never intended to be bankroll irreversible, gender-mutilating surgeries on vulnerable children. Yet, today, this program is being exploited by the far left, preying on young children to advance their radical trans agenda.

Adolescence is a vulnerable time for boys and girls. They are growing into the young men and women that God intended them to be. What these children really need is love and wise counsel, not taxpayer-funded permanent chemical sterilization, mutilating surgeries, or activists profiting from their confusion.

The most egregious actor is none other than Planned Parenthood, the leading abortion provider in the Nation and now the leading provider of these dangerous procedures. The Do No Harm in Medicaid Act shields innocent children from predatory companies and stops Medicaid from being weaponized against our next generation.

Mr. Speaker, the Federal Government has no business paying for the destruction of children's bodies, and the American people should never be complicit in it. I thank my colleagues for leading this bill, and I urge all to vote "yes."

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentleman from California (Mr. TAKANO), the chair of the Congressional Equality Caucus.

Mr. TAKANO. Mr. Speaker, I rise in opposition to this hateful legislation. The so-called Do No Harm in Medicaid Act prohibits Medicaid from spending funds on medically necessary care like puberty blockers and gender-affirming hormone treatment for transgender individuals under 18.

This is Congress seeking to ban healthcare for the most vulnerable among us. Republicans are working to ban parents from providing their trans children on Medicaid with necessary healthcare. These types of decisions should be made between families and their physicians. Yet, here we are, letting politicians in Washington, D.C., tell parents across America that they know how to raise their trans youth.

Transgender people need consistent access to essential and medically necessary care like everyone else. This care makes it possible for transgender people to live safely and authentically as themselves.

I have spoken with countless families about the impact of this lifesaving care and what it has done for their children. I have also spoken with doctors that have provided this safe and effective care. The healthcare that trans youth receive is a decision that they should

be able to make in consultation with their parents, therapists, and doctors, not by politicians.

□ 1250

Medical care for transgender youth is safe and effective and is supported by every major medical association, representing more than 1.3 million U.S. doctors.

The hypocrisy of this legislation is staggering. The bill bans Medicaid from covering medical care for transgender youth but allows for the same exact care for nontransgender youth. The proof is here in black and white. Republicans are seeking specifically to target transgender youth, and trans people are less than 1 percent of the population.

Republicans are targeting the wrong 1 percent. This is not the 1 percent that is trying to take away the healthcare of all Americans. I call on the Speaker to bring the Affordable Care Act tax credits to the floor now, today, and save healthcare for 22 million Americans.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Utah (Mr. KENNEDY).

Mr. KENNEDY of Utah. Mr. Speaker, I rise today in support of the Do No Harm in Medicaid Act, which will ensure that taxpayer dollars are not funding the evil practice of transgender child mutilation. I thank my colleagues from Texas and from Kentucky for sponsoring this important bill.

As a father of eight myself, I know that we all want our children to grow up healthy, supported, and empowered. Children should not be subjected to a medical system that pushes life-altering medical procedures and hormone treatments that are incredibly harmful.

As a family doctor for over 25 years, I took an oath to do no harm and provide my patients of all ages evidence-supported treatment plans. That is why, as a Utah State senator, I led the way in 2023 by passing Utah's landmark legislation that banned transgender treatments and procedures for minors.

As a result, I faced death threats, and my house was vandalized by woke activists, as demonstrated to my left. I am not deterred. That is why I am staunchly committed to getting this right and finding Federal solutions, as I did in Utah, that will protect America's children.

At the core of the practice of medicine is that we do not subject the patient to unnecessary and dangerous medical treatments. When it comes to gender-transition interventions, puberty blockers, hormones like testosterone and estrogen, and surgical procedures, the evidence shows that this is the wrong approach to getting these kids the help that they need.

The most comprehensive and authoritative review of these practices was conducted in the United Kingdom by Dr. Hilary Cass. Her 2024 "Cass Review" concluded that the scientific evidence supporting such interventions is

remarkably weak. There is no strong, long-term evidence showing that puberty blockers and transgender surgeries improve long-term mental or physical health outcomes for minors, nor is there robust data on their safety or impact on development.

In the United States, the Department of Health and Human Services released a peer-reviewed report last month titled: "Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices." This study concluded that harms from treatments, including these puberty blockers, cross-sex hormones, and surgeries are significant, long-term, and frequently underrecognized in clinical research. The evidence for these interventions in minors is weak and insufficiently checked, particularly for outcomes like fertility, psychological well-being, and quality of life.

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

Mr. GUTHRIE. Mr. Speaker, I yield an additional 30 seconds to the gentleman from Utah.

Mr. KENNEDY of Utah. Mr. Speaker, I am proud to protect the children of Utah and commend the 25 other States that have stood up for their kids, as well. I urge all of my colleagues to follow the scientific evidence and stop funding these horrific procedures on kids.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentleman from New York (Mr. TONKO), who is the ranking member of our Environment Subcommittee.

Mr. TONKO. Mr. Speaker, I thank the gentleman from New Jersey (Mr. PALLONE) for yielding.

Mr. Speaker, this bill is the latest in a long line of cruel and calculated Republican actions to erase and endanger LGBTQ+ people, especially trans youth, by using fear as a political weapon.

Let's be clear. Kids trying to live authentically are not a threat. Families seeking care are not political pawns, and the providers committed to their oath to do no harm are not extremists.

Every major U.S. medical group agrees that healthcare for trans youth is safe, effective, and necessary.

This care can reduce anxiety, reduce depression and suicide risk, and help young people thrive. If any other treatment lowered suicidal ideation at the same rate, we would call it a miracle. The ability is that we have an opportunity here to help our kids live as their true and healthy selves, and that is a miracle.

Yet instead of us celebrating or expanding access to lifesaving care, we are debating the bill that would prevent families from getting their children the care that they need. It is, frankly, embarrassing. Politicians should not be telling parents how to raise their own children.

Mr. Speaker, I will fight bills like this with everything I have because equality and dignity and justice are not up for debate.

I stand with the trans community in New York—20 and beyond, and I urge my colleagues to reject this bill.

Mr. GUTHRIE. Mr. Speaker, I yield 5 minutes to the gentleman from Texas (Mr. CRENSHAW), the sponsor of the legislation and member of the Committee on Energy and Commerce.

Mr. CRENSHAW. Mr. Speaker, I am very proud to have sponsored this legislation and have fought this battle for many years.

I think we could actually get it done this time. I am not sure that my colleagues even believe what they are saying. I think they know that their constituents don't believe it.

Let's not forget that, in the 1930s, the medical community believed that lobotomies could cure psychosis. They also believed that electroshock therapy could do the same. They even gave the lobotomy inventor a Nobel Prize in 1949. Then the science caught up with the ideology, and medicine was changed for the better.

Today's great sin in medicine is perhaps one of the worst that we have seen in human history. It is a sick and twisted ideology paired with a social media-fueled social contagion that has actually normalized the ultimate lie, which is that biological gender does not matter and can even be changed. Here is the greatest sin: that this lie also applies to children.

There are some very simple, fundamental truths in life: Men are men, women are women, and children are innocent. They can't be told that they are in the wrong body.

Mutilating children is wrong. Irreversible treatments on children who need therapy is wrong. These truths are very obvious to the vast majority of Americans, and it takes an incredible amount of propaganda and institutional coercion to get an entire society to even question these truths. Yet that is exactly what has happened.

Mr. Speaker, polls indicate that more than 70 percent of Americans support a full ban on puberty blockers for minors. That is from places like *The Washington Post*.

Imagine if the question had been asked differently. That is just about puberty blockers. What if they had been asked about double mastectomies on 12-year-old girls. I think the number would be probably approximately 90 percent, maybe higher.

Mr. Speaker, I am not arguing with my colleagues. I am pleading with Members to understand this. Their constituents don't want children to undergo gender transformations. They don't.

Their constituents know that kids are too young to understand the consequences of permanent physiological changes. I think my colleagues know it, too.

Even if my colleagues are uncertain about that, I think they can be rest assured that they definitely don't want their tax dollars to pay for it, which is all this bill does.

This debate is so often buried under euphemisms. There is gender-affirming

care. There is a medical consensus. There is a standard of care.

Strip away the language. Here is the reality: Healthy children are being placed on drugs that halt normal development, sterilize them, permanently alter their bodies before they are even old enough to vote or drink or get a tattoo.

These are kids suffering from teenage angst, and I don't deny the existence of gender dysphoria. However, psychotherapy is the answer to that, not permanent hormonal changes or surgical mutilations. That is not compassion. That is not medicine. That is an abomination.

We are told that questioning this practice puts children at risk and that if we don't medicalize a child's distress, they will take their own life. That claim has been debunked. It is not supported by science. Studies from all over the world have proven it false, and those who continue to promulgate it should be ashamed.

The highest quality medical reviews have consistently found no clear evidence that puberty blockers, cross-sex hormones, or surgeries reduce suicide risk in minors—none. Yet we are told to suspend our moral judgment, suspend scientific skepticism, and accept irreversible harm as the default response to childhood stress. That is not how responsible medicine works.

Puberty blockers are not approved by the FDA for treating gender dysphoria. They were never designed to interrupt normal puberty in otherwise healthy children. Cross-sex hormones can permanently compromise fertility. Surgeries irreversibly alter healthy organs. These are not neutral acts.

□ 1300

These are life-altering decisions imposed on minors whose brains, identities, and bodies are still developing.

We are told that treatments are reversible. That claim is very false. International health authorities have concluded that suppressing puberty often locks children into a pathway toward permanent medical transition. Nearly every child placed on puberty blockers proceeds with the cross-sex hormones. The so-called pause button that almost always leads to irreversible outcomes is not a pause. It is a trap.

While activists insist this is settled science, the rest of the world is pulling the emergency brake. The United Kingdom now limits puberty blockers. Sweden and Finland have sharply restricted their use. France's medical authorities warn of serious risks to bone development and fertility. Those lying, depraved activists reviewed the same evidence and said, No, we are good with it.

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

Mr. GUTHRIE. Mr. Speaker, I yield an additional 1 minute to the gentleman from Texas.

Mr. CRENSHAW. Children suffering from gender dysphoria deserve care,

dignity, and clinical compassion, but that compassion does not mean pushing them on a medical pathway that leads to irreversible physical harm.

The answer is in evidence-based psychotherapy care, therapy, family support, and clinical monitoring over time.

What does this bill even do? The Do No Harm in Medicaid Act draws a very clear moral line that the government will not participate in, endorse, or normalize irreversible gender surgeries and chemical interventions on minors.

It is codifying President Trump's agenda to protect our children and keep them healthy. It says he won't be complicit.

Medicaid won't fund this abomination, but contrary to what many of the claims are, it preserves narrow exceptions for genuine medical conditions, like early onset puberty, disorders of sex development, and treatment of complications.

This was a very carefully crafted bill that addresses all the concerns that have been raised. It is not about hate. It is not about politics. It is about protecting kids when adults fail them. It is an easy vote.

Mr. Speaker, I urge my colleagues to support the Do No Harm in Medicaid Act, please.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Oregon (Ms. BONAMICI).

Ms. BONAMICI. Mr. Speaker, I thank Ranking Member PALLONE for yielding.

Mr. Speaker, I rise to oppose the deceptively titled Do No Harm in Medicaid Act.

Healthcare costs are about to skyrocket for millions of Americans across the country, but instead of solving that crisis, we are here with a bill that has politicians interfering with personal healthcare decisions and outrageously putting into law provisions that will essentially ban the type of healthcare that Republicans have decided they don't like. Personal healthcare decisions should be made by patients and providers, not by politicians.

This bill attacks the rights of States by banning Medicaid from covering any medical care for transgender youth, and it would put discrimination into law because it would allow the same exact care for cisgender youth.

The history of gender diverse people goes back to ancient cultures, and why this House majority is so obsessed with a very small group of vulnerable people baffles me. Transgender people deserve the same protections as everyone else, including the ability to access medically necessary care. They certainly don't deserve this bill.

Research shows that health insurance coverage for transgender people is affordable and cost-effective.

This legislation is about discrimination, and we have seen this playbook time and time again. Republicans are fear-mongering about the trans community to divert attention from the fact that they have no real solutions to make healthcare more affordable.

Congress should be focused on fixing the expiring ACA subsidies, addressing the rising costs of healthcare, and addressing affordability issues, which is what I am hearing about at home. We should not be working on this bill that would interfere in personal healthcare decisions that are between patients and their own healthcare providers.

Mr. Speaker, this bill will cause, not prevent, harm, and I urge my colleagues to reject it.

Mr. GUTHRIE. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Washington State (Ms. RANDALL).

Ms. RANDALL. Mr. Speaker, I have been sitting here listening to the remarks on the floor, and I have to admit that I find myself torn between heartbroken tears and the urge to throw something, which I will not do because I am a professional human being.

I have to wonder how many actual trans people and families of trans kids anyone on the other side of the aisles knows, how many conversations anyone has had with parents who are staying up late worried about whether that night is the night that their child is going to take their life because they feel so unsupported and so unloved and are taking in the hatred from the floor of the House of Representatives.

The kids and parents in my community live their lives in terror, and they have it the best, because Washington State is a place where we have fought to protect healthcare access for LGBTQ kids and trans kids. We have fought to ensure that every young person has the ability to make healthcare decisions that are right for them, in consultation with their parents and their doctors. It is true medically directed care in consultation with a doctor.

The American people have told us over and over that they don't want politicians in the doctor's office. They don't want politicians making decisions about what kind of medical care they can access, but that is what is happening right now.

They are trying to strip away life-saving care from children who are moving to my State at higher and higher rates. Almost every week, I hear of a family who has moved from Texas, Idaho, or Florida because the parents want their children to survive.

This effort not only to cut Medicaid coverage but to try to ban access for children—

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

Mr. PALLONE. Mr. Speaker, I yield an additional 1 minute to the gentlewoman from Washington.

Ms. RANDALL. Mr. Speaker, this behavior is appalling. It is dangerous. It is evil. It is evil to seek to deny life-saving care for children who are more at risk than any others.

I spend a lot of time in LGBTQ clubs in high schools, talking to young people who are shocked when I come in

and tell them that, as a queer woman, I am a Member of Congress. They say: Do you know any trans people your age? They don't believe that they will make it to 40. They don't believe that they will make it to 50 or 60. They don't believe that they have a future because they are watching the floor and listening to the words that come out of our mouths, and they know that half of the people in this Chamber do not care if they survive.

Mr. Speaker, I think it is very clear that I am not going to vote for this bill, and I urge all of my colleagues to join me.

Mr. GUTHRIE. Mr. Speaker, I yield 2 minutes to the gentleman from Texas (Mr. CRENSHAW).

Mr. CRENSHAW. Mr. Speaker, I don't need much time.

The question was asked if we had ever bothered speaking to trans kids. The answer is absolutely yes. Maybe that is why I am so passionate about this. It turns out there are hundreds and hundreds, thousands perhaps, of trans kids who were coerced by radicalized doctors. Their parents were lied to.

Their parents were given studies that said there is a 1 percent remorse rate. These studies are based on nonsense. They are not even based on a pool of participants that are minors. They were told that these things are just a pause button, that it is reversible, that this is just a standard of care. Standard of care based on what? Based on junk science. We cannot base standards of care on junk science.

Now, the science has caught up: the Cass Review study, the systematic review, which is the gold standard of any kind of study because it looks at all the different studies methodically, and then the 300-page review that HHS just did.

I have had them on my podcast twice to talk about their experiences. Chloe Cole spoke at the Department of Health and Human Services just now, about an hour ago. Chloe Cole, at 12 years old, was going through what a lot of 12-year-olds are going through. She is a tomboy. She has older brothers. She likes sports. She is confused. Doctors tell her that she is a boy. They convinced her parents of the same. She is put on puberty blockers and soon on high levels of testosterone. By age 15, she has a double mastectomy. She is not sure if she can ever have kids, and she definitely can't feed her children normally.

Yes, we have talked to them. Maybe my colleagues on the other side should, too.

□ 1310

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from California (Ms. CHU).

Ms. CHU. Mr. Speaker, I rise in opposition to H.R. 498, the so-called Do No Harm in Medicaid Act.

Yesterday, four Republicans stood with Democrats and signed a discharge

petition to force a vote on a clean extension of ACA premium tax credits, but Republican leadership is refusing to immediately bring that bill to the floor.

Now, 22 million Americans will see their premiums skyrocket, and our constituents will be forced to decide between healthcare and paying rent or affording groceries.

Instead of allowing a bipartisan vote to lower healthcare costs, Republicans have chosen to bring forward H.R. 498, which completely ignores the affordability crisis and needlessly targets transgender children.

That includes my nephew, Lee, who is currently transitioning. He is a child. He is loved, and like every other child in this country, the healthcare decisions should be made by his family and his doctors, not by politicians.

H.R. 498 would strip Medicaid coverage for gender-affirming care for trans youth, care that is medically necessary, evidence-based, and supported by every major medical association in this country.

This bill will endanger lives, and it will do nothing to bring down skyrocketing healthcare costs or address any real issues facing working Americans. Instead, it denies medically necessary care simply because that care goes to a trans child.

As vice chair of the Equality Caucus, I will always fight to protect the dignity, safety, and humanity of the trans community.

Lee deserves better. Our children deserve better, and the entire trans community deserves better.

Mr. GUTHRIE. Mr. Speaker, before I yield to my friend, I have asked, since we have been meeting this year, about the extension of the tax credits they keep bringing up. Remember, they are talking about the extension of the tax credits that they set to expire.

So the question I have asked, and nobody has been able to answer, Mr. Speaker, is: Why did you set them to expire? Remember, they were set to expire in the Inflation Reduction Act, or the Green New Deal.

Within the Inflation Reduction Act, tax cuts were made so-called permanent, although they were replaced in another bill, but they set these to expire. Nobody has ever explained to me why the Democrats made the decision to end the enhanced subsidies that they are talking about and shutting the government down for 43 days, when they chose to end them, and then coming in here today talking about we need to have a vote on it, when they chose to end them. They never explained why they chose to end them.

Mr. Speaker, I yield 1 minute to the gentleman from Texas (Mr. CRENSHAW).

Mr. CRENSHAW. Mr. Speaker, I will not be long. I will just ask a simple question, because the statement was made that all the science suggests that these procedures are medically necessary.

Can they cite their sources? Show me the studies. I cited mine. Cite their sources.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Massachusetts (Ms. PRESSLEY).

Ms. PRESSLEY. Mr. Speaker, I rise in strong opposition to this legislation. Every parent wants to keep their child safe, wants their child to grow without pain, to sleep through the night without fear or suffering. But when our children are growing up, it is inevitable that they will need medical care, from a fall from a bike or a fall on the playground.

Parents rush to the doctor's office. They bandage scraped knees. They hold their child's hand and wipe away tears while their pediatrician lays out a plan. In these moments, that urgent question on that parent's mind is: What does my child need to be okay?

A broken bone, asthma, gender dysphoria, diabetes, whatever the presenting issue is, a treatment plan takes shape.

For some families, what their children need to be okay is access to gender-affirming care. They need care that is safe, evidence-based, and recognized as essential by every major medical association; care, that for some children, is the difference between despair and hope, between isolation and community, between surviving and thriving.

Yet today, we are debating a bill that would tell parents on Medicaid that their child's pain is unworthy of care, that their doctor's judgment does not matter, and that politicians know better than parents sitting in exam rooms.

Cole, a young person from Massachusetts, wrote to me and said: Transgender people deserve the same chance to thrive and live fulfilling lives as everyone else. Having the freedom to control our bodies and seek the healthcare we need, including gender-affirming care, is an essential right for all people.

I agree.

To Cole and every person who is trans or nonbinary, let me speak plainly: You belong. You are enough, and you deserve to show up in this world as your full, authentic self. You deserve to grow up. You deserve to grow old.

Healthcare is a human right, and parents doing everything they can to make sure their child is okay deserve support, not interference, and certainly not cruelty.

I don't know what God y'all pray to, but the one that I know is a loving God, and He does not discriminate. His love does not discriminate. He loves all the children, including the trans children.

Healthcare is a human right, and parents doing everything they can to make sure their child is okay deserve support.

Shame on this bill. Shame on an agenda that strips healthcare away from vulnerable children, and shame on anyone who votes to deny care to families trying to do right by their kids.

Mr. GUTHRIE. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentlewoman from Washington (Ms. JAYAPAL).

Ms. JAYAPAL. Mr. Speaker, I rise in strong opposition to this incredibly cruel bill.

As prices skyrocket, as Republicans strip away healthcare from Americans across this country, strip away basic support for American families, what are we using floor time for today? A cruel attack against trans children that does nothing to lower anyone's costs and does everything to put a target on the backs of our vulnerable kids and families.

I understand that there is fear that has been promoted by the majority around trans kids and what happens and what this process is. I understand that we have to explain this to people.

But let me be very clear about something. The medical science is clear. The decisions that have been made by trans kids and their families are decisions that have taken months, years sometimes, to go through, consultation with parents, with medical providers, with therapists, before ever providing the medical care.

The most common form of gender-affirming care for young people is medications that simply pause puberty and have been used safely for decades.

Why do my colleagues across the aisle, so-called limited-government people, suddenly want government to get in the way of the decisions that parents and their kids make together? Why do they want to stop children from getting medical care that has been proven to be safe and effective and helps them to live happily, helps them to live, just live?

Why is the majority attacking vulnerable trans kids and raising the level of fear and hatred toward them?

We should be protecting every family's right to make the decisions that they need to make for their child's well-being.

Let me tell you something. What is happening on this floor and in this Congress around this issue is so incredibly dangerous. Trans kids are walking around with mace in their pockets because they are being attacked by people because the majority is insisting there is something to fear from them.

The SPEAKER pro tempore (Mr. MOORE of Utah.) The time of the gentlewoman has expired.

Mr. PALLONE. Mr. Speaker, I yield an additional 1 minute to the gentlewoman from Washington.

Ms. JAYAPAL. Mr. Speaker, I will not stand for these kinds of attacks. The condescension that is coming from the other side—have you talked to your constituents? Do you really know? You don't really know what you are doing.

Excuse me. We are here to represent our districts, and I still believe I am the Member that gets the most votes of any Member of Congress anywhere in the country. Don't tell me I don't know how to represent my district.

What you are doing today, what this majority is doing today, is making life dangerous for kids. What the majority

is doing today is getting in the way of families and parents and kids making the decisions that they need to make so that they can live, so that they don't commit suicide.

What parent in this body or anywhere in this country wouldn't do anything for their children? What parent doesn't want their kids to live?

This is dangerous. You are putting our kids at risk, and I will not stand for it. The American people won't stand for it. Vote "no" on this horrific and cruel bill.

□ 1320

Mr. GUTHRIE. Mr. Speaker, I yield 1 minute to the gentleman the Texas (Mr. CRENSHAW).

Mr. CRENSHAW. Mr. Speaker, again, it has been stated that these so-called treatments are safe and effective and save lives. I ask the gentlewoman again: Cite your sources. Cite your sources.

You won't. That is because you know that I know all of the sources that you are going to cite. You know what I am going to say about them: about the problems with their methodology; about the pool of participants they use; about how short those studies were; and about how most of them didn't even apply to minors.

You know what I am going to say, and so you won't cite your sources.

Mr. Speaker, I will cite mine. We have systematic reviews that have been published and accepted throughout the scientific community. That is why the rest of the Western world is reversing their stance on this, and the United States needs to also.

That is because I couldn't tell if that speech about harming kids was about our bill or about the act of conducting irreversible physiological changes on children who are going through gender dysphoria.

Yes, we are trying to protect kids. We are trying to love our kids.

Mr. PALLONE. Mr. Speaker, may I ask how much time remains on our side.

THE SPEAKER pro tempore. The gentleman from New Jersey has 11 minutes remaining.

Mr. PALLONE. Mr. Speaker, I yield 3 minutes to the gentleman from Illinois (Mr. SCHNEIDER).

Mr. SCHNEIDER. Mr. Speaker, I hadn't originally planned to talk about this, but today, December 18, is the anniversary of my grandfather's passing 51 years ago.

My grandfather Emil and his wife, Molly, had 18 grandchildren. What made them extraordinary is that they saw the grace of every one of their grandchildren and wanted each and every one of their grandchildren to reach their full potential. What made them truly special is that that love extended to everyone in our community and across the globe.

As a father of two, I want nothing more for my kids than for them to be happy and to reach their potential.

As a Representative in this body in the House of Representatives, we all should want nothing more for our kids than for every kid in America to reach their full potential and be comfortable in their personal identity.

That is why I rise so strongly in opposition to H.R. 498.

I ask my colleagues on the other side: What are you afraid of?

This harmful bill would prohibit State Medicaid programs from providing lifesaving gender-affirming care to individuals under the age of 18. It not only bars the use of Federal funds to States for this care but prohibits States from using their own money to provide it.

My Republican colleagues want to insert themselves into the practice of medicine and make a family's medical decision from the Halls of this Chamber. Shame on them.

My Republican colleagues want a veto in what health services are available to children and their families.

Mr. Speaker, even if you live in my State of Illinois where the State legislature signed into law protections for gender-affirming care, this body would still prevent that access.

This bill purposely targets kids, children, and only kids. These are decisions that should be made by the patient, their parents and guardians, and the medical providers providing the care to give these kids the chance to reach their potential and to be comfortable in who they are as Americans.

Without access to these services, my Republican colleagues are putting children's lives at risk, and it is despicable.

I oppose this bill, and I urge my colleagues to oppose this bill. I urge my colleagues, as I have done, to talk to people and to talk to families to hear the stories of how this care has saved lives and to get their noses out of the business of individuals, their families, and their medical providers.

Mr. GUTHRIE. Mr. Speaker, I am glad my friend from Illinois pointed out this only affects children because adults can make their decisions. We don't take any decisions away from adults. This affects children.

It is very specific. I think my friend from Texas is going to talk about it. I would like for my friend from Illinois, or anybody, to read through what is specifically identified as prohibited in this bill and say which of those saves someone's life. It is permanent surgery to change someone. It is very limited what is in this bill.

Mr. Speaker, I yield 3 minutes to the gentleman from Texas (Mr. CRENSHAW).

Mr. CRENSHAW. Mr. Speaker, this claim is made over and over, that allowing gender-affirming care, as they call it, is saving lives. The problem with that claim is that there is no evidence to suggest that.

All of the reviews, all of the studies, all of the systematic reviews—a systematic review means a systematic review of all of the studies—show that there can be no clear line drawn be-

tween suicide rates and doing this kind of care.

A paper published in the British Medical Journal examined the landscape. Mr. Speaker, 61 systematic studies concluded there is great uncertainty about the effects of puberty blockers, cross-sex hormones, and surgeries in young people.

On suicide risk, there is no clear evidence that these medical interventions prevent suicide. A 2020 study analyzing trans-identifying patients of all ages over 40-plus years found that suicides occur at every stage of medical transition.

A 2021 systematic review concluded that based on available data, no conclusions can be drawn about whether hormones, puberty blockers, or surgeries reduced suicide risk.

Again, in 2024, another independent review found that Britain's post-2020 restriction of puberty blockers did not cause a rise in suicides despite many of the lies told on social media by activists.

They keep saying that every medical society supports this—and, so, okay, then, we have to listen to them. Well, that is true. It is because of ideological pressure rather than scientific evidence. We know that these studies that they are citing are based on low-quality evidence, small sample sizes, and very high risk of bias.

A Johns Hopkins systematic review found that the evidence supporting claims that hormonal treatments may improve quality of life, depression, and anxiety among transgender patients was "low." The study called for more research, particularly on adolescents.

The same review concluded that it was about impossible—this is Johns Hopkins—it was about impossible to draw conclusions about the effects of hormone therapy on suicide risk.

Even a review published by the American Academy of Pediatrics, which institutionally has supported gender transition, admits that "evidence regarding the psychosocial and cognitive impact of hormonal treatments for transgender adolescents is generally lacking."

I could keep going. The point here, Mr. Speaker, is you have got a problem, and it is a gender dysphoric problem. We know that a kid is going through something hard. And you want to take the most extreme possible medical intervention to deal with that while the science says we have no idea whether that is a good idea or not.

That is what the actual scientific consensus says.

Now, if the argument was: Hey, give them more fruit or something, then that is not really harmful. That would be fine. We wouldn't be arguing about it, but the minority is talking about double mastectomies. They are talking about puberty blockers and hormonal therapies that permanently change the physiology of a young person before they are old enough to even understand what they might want in 20 years.

That is the most irresponsible type of policymaking one can imagine. It is the most irresponsible type of medicine that one can imagine.

Mr. PALLONE. Mr. Speaker, I yield 2 minutes to the gentleman from Florida (Mr. SOTO), who is a member of our committee.

Mr. SOTO. Mr. Speaker, I rise in opposition today to H.R. 498, the so-called Do No Harm in Medicaid Act, and I urge my colleagues to support my motion to recommit.

H.R. 498 is an unnecessary ban on Medicaid funding. Instead, we see what Republicans are doing: a \$1-trillion cut to Medicaid in the big, ugly law that is going to mean a 15 percent cut next year in Florida that they are going to have to work on and trying to insert themselves into deeply personal medical decisions.

Mr. Speaker, there was a Christmas miracle this week. We saw four Republicans join us in a discharge petition to get at what the American people really want to vote on. They want us to vote on extending the enhanced premium tax credits for the ACA to stop a huge healthcare hike for 20 million Americans. That is what people want us to be talking about here today, before their premiums double, triple, and even quadruple.

They don't want us to be delving into these culture war issues when we have real work to do to fund Medicaid and to extend the ACA tax credits.

□ 1330

Affordability is the biggest thing in the Nation right now. My district has the second most ObamaCare of any district. In my district, 275,000 people will see their healthcare double or triple, so this should be the priority right now.

Mr. Speaker, all America wants for Christmas is a 3-year ACA tax credit extension, and I am hoping we can get it together. I have given us an opportunity.

For this reason, at the appropriate time, I will offer a motion to recommit this bill back to committee. If the rules permitted, I would have offered the motion with an important amendment to this bill.

My amendment would include a clean 3-year extension of the enhanced premium tax credits, just in time for Christmas.

Mr. Speaker, I ask for unanimous consent to insert the text of my amendment in the RECORD immediately prior to the vote on the motion to recommit.

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

There was no objection.

Mr. SOTO. I hope my colleagues will join me in voting for the motion to recommit.

Mr. GUTHRIE. Mr. Speaker, I yield myself 1 minute.

Since that is the motion to recommit, maybe it would be a good opportunity for my friends on the other side

of the aisle to let the country know when they decided to let these tax credits expire in the same bill that they have permanent tax credits for the Green New Deal. I don't know, you would have to think maybe they want to take the money from the tax credits and spend it on the Green New Deal. Unless there is a better explanation than that, that is exactly what the bill did.

Mr. Speaker, may I inquire how much time is remaining on my side of the aisle.

The SPEAKER pro tempore. The gentleman from Kentucky has 11 minutes remaining.

Mr. GUTHRIE. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, I yield 3 minutes to the gentlewoman from New Mexico (Ms. STANSBURY).

Ms. STANSBURY. Mr. Speaker, I just heard my colleagues across the aisle give a lecture about irresponsible policymaking. I remind this body that we are 7 days from Christmas. We were scheduled to take votes tomorrow, but the Speaker and my Republican colleagues are in such a hurry to get out of town before the holidays that you have canceled votes tomorrow and are leaving town. In many cases, many of you are planning to leave in the next several hours, and this is the bill that you are running? This is the bill that you are running, not a bill to save the healthcare of millions of Americans? This is your bill 1 week before Christmas, to take healthcare away from LGBTQ kids in the United States?

I mean, it is hard to believe that this is what you are doing with your majority. This is one of the most powerful bodies in the world, and you have canceled votes, to take away healthcare from LGBTQ+ kids.

If passed, this bill would prohibit young people in communities all across the United States, in low-income families, from receiving lifesaving care. I am proud to come from a State, New Mexico, that has protected gender-affirming care and which stands with the LGBTQ+ and trans community and their families.

Let me tell you that, yes, this is necessary care, and it is care that keeps kids alive. It is about mental health. It is about self-harm. It is about reducing suicides. It is about making sure that human beings, young people, have access to care that is essential for them to live their lives.

In addition to this, this bill tramples on the so-called States' rights that you tell us every day you want to protect by penalizing States that would take their own resources to ensure that kids have access to care.

If you are actually concerned about the welfare of children, if you are actually concerned about healthcare in this country and its costs, and if you are actually sincere about your care for the American people, then bring a vote on the Affordable Care Act extension to this floor now.

The American people are tired of these games. You all are going to get on a plane and go home in a couple of hours while millions of Americans lose their healthcare, and this is the bill that you are running on the floor before you do that? Shame on you. It is disgraceful.

The SPEAKER pro tempore. Members are reminded to direct their comments to the Chair.

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

Mr. Speaker, I remind the gentlewoman that we did have a bill yesterday that passed. It hardly got any Democratic support. If you look at the enhanced tax credits that they set to expire to pay for the Green New Deal, so the moral cause that people are bringing up, they chose to put Green New Deal tax credits over extended premium tax credits. That is obvious. It is in the same bill. It wasn't like they voted for one bill and then another.

At the same time, yesterday, we estimated a good half of the people on—we know, from a GAO study, there is waste, fraud, and abuse in the ObamaCare marketplace that we wanted to fix. It went to the Senate, and it got taken out during the reconciliation bill.

We put in cost-share reductions that were estimated to lower premiums in the marketplace by 12.7 percent. When it went to the Senate, the Democrats challenged it in the Senate and took it out.

We also know there are another 163 million Americans who get their healthcare from their employers, which they offered nothing to assist and help, which we did yesterday. We know most of the people in the marketplace are small business men and women who have to buy in the individual marketplace because they work for themselves and don't have a big employer with a big employee pool. We allowed them, in yesterday's bill, to band together so they can buy across their associations. Instead of being a car dealer with 20 employees, you can be 100 car dealers, with 20 times 100 employees, so they have a bigger pool and can get cheaper rates for their employees.

We did have a bill that passed yesterday without a single Democratic vote that lowered premiums in the marketplace and premiums for every working American.

Mr. Speaker, I yield 2 minutes to the gentleman from Texas (Mr. CRENSHAW), my friend.

Mr. CRENSHAW. Mr. Speaker, I love debunking lies in real time. It is one of my favorite things to do.

The chairman just did a great job debunking a lie. We were just told that this is the only bill we are doing this week. No, it is not. It is an important bill, but everything he just listed was also pretty important to lower people's healthcare costs. I don't know why there was no Democratic support for it.

I want to debunk some more lies. Again, on this idea that puberty

blockers for children are safe and effective, let me read some more facts. The Center for Investigative Reporting found that the FDA received over 10,000 adverse event reports from women who took Lupron, which is a common puberty blocker, off-label as children, to help them grow taller. Reported side effects included brittle bones and fractures, tooth enamel loss and cracked teeth, spinal disk degeneration and chronic joint pain, seizures, migraines, suicidal thoughts—so it is actually the opposite, isn't it?—cognitive issues, and fertility problems.

The FDA ordered the manufacturer to add a warning label, noting that children taking Lupron may develop new or worsened psychiatric symptoms. Trans-identifying minors are already three times more likely than the general population to experience anxiety, depression, and neurodevelopmental disorders.

Why make it worse? Stop talking about compassion. They are the ones doing the opposite of compassion by tricking these kids into thinking that this might be their answer. It is not. Therapy is.

There was another claim made that this tramples on States' rights, so I guess we need to have a quick civics lesson. We are talking about Federal funding, Medicaid funding provided by the Federal Government. The Federal Government can put restrictions on what that money is used for. It is not a trampling of States' rights. It is not a trampling of doctors' rights.

Let me ask something. My daughter picks up my fake eyes, and she goes: "Eye, eye, eye." She is 2. She puts it on. Maybe when she is old enough to talk, she might identify as somebody with one eye. Should I take her to the doctor and say: Hey, will you enucleate her eyeball because, you know, she identifies as monocular just as I am, just like her daddy.

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

Mr. GUTHRIE. Mr. Speaker, I yield an additional 1 minute to the gentleman from Texas.

Mr. CRENSHAW. Mr. Speaker, you would say that is insane. You would call that absolutely insane, and it would be insane.

Here is the reality. The scary part about that analogy is that it is actually a lot less troubling to lose an eye than it is to completely change your gender. Completely changing your gender is a far more invasive procedure than losing an eye. Trust me, I know.

□ 1340

Mr. PALLONE. Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from New Jersey has 4 minutes remaining. The gentleman from Kentucky has 7 minutes remaining.

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

Mr. Speaker, I just have to correct two comments that were made by my Republican colleagues.

First, the sponsor of the bill said that they are just talking about Federal funds. The fact of the matter is, they are not just talking about Federal funds because this bill prevents States like Washington State—we had two people speak about this—from using State funds for gender-affirming care for minors. It is not just a prohibition on Federal funds.

Also, my chairman from Kentucky kept saying that the healthcare bill that the Republicans put on the floor yesterday would lower costs and somehow address the healthcare crisis. It does not. It does not lower costs, and it certainly doesn't extend the tax credits that are necessary under the Affordable Care Act to lower costs. Those expire January 1.

Mr. Speaker, I know the sponsor from Texas also mentioned medical professional organizations that oppose this bill, and there are many, but I include in the RECORD a letter from four of those organizations: American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American College of Physicians, and American Psychiatric Association.

DECEMBER 16, 2025.

DEAR MEMBERS OF CONGRESS: We, the undersigned medical professional organizations, write in strong opposition to H.R. 3492 and H.R. 498. These bills would criminalize and dismantle health care for transgender young people and as such represent a direct threat to patient welfare. We urge you to reject these extreme proposals.

Families must be able to make personal medical decisions regarding the care of their child in consultation with trained health professionals. H.R. 3492 threatens parents and physicians with imprisonment for obtaining medically necessary health care. Such a proposal harms the physical and mental health and well-being of families and interferes with parents' ability to make informed decisions in the best interests of their child. It also creates an irresolvable ethical conflict that makes it impossible to fulfill their duty to put the needs of the patient first.

Health care for transgender young people is individualized, age-appropriate, provided according to longstanding expert clinical guidelines, and supported by leading American medical organizations. Under existing guidelines, medical interventions are provided only after careful screening and joint decision-making including a patient, family, and their care team. H.R. 498 would insert the federal government between patients and physicians. It would also put this care out of reach for families nationwide by prohibiting the use of federal Medicaid funding for its provision and requiring physicians to provide different care to patients based on the health insurance they hold. Preventing anyone from obtaining medically necessary care threatens their physical and mental health and well-being and that of their families.

Our organizations are united in opposition to political interference in the practice of medicine. The confidential relationship between a patient, their caregiver, and a physician is the foundation of clinical care. Physicians and other health professionals should never be criminalized or penalized for providing care consistent with evidence-based guidelines and best clinical judgment, and the government should not interfere. Physicians, not the federal government, are best positioned to work with patients and their

families to address their unique medical and mental health care needs.

We urge lawmakers to oppose these harmful intrusions into the patient-physician relationship and the provision of medical care.

Sincerely,

American Academy of Pediatrics, American College of Obstetricians & Gynecologists, American College of Physicians, American Psychiatric Association.

Mr. PALLONE. Mr. Speaker, I am going to read certain sections of it. They say: "We, the undersigned medical professional organizations, write in strong opposition to H.R. 3492."

"Healthcare for transgender young people is individualized, age-appropriate, provided according to longstanding expert clinical guidelines, and supported by leading American medical organizations. . . . Our organizations are united in opposition to political interference in the practice of medicine. The confidential relationship between a patient, their caregiver, and a physician is the foundation of clinical care."

Physicians and other health professionals should never be stopped "from providing care consistent with evidence-based guidelines and best clinical judgment, and the government should not interfere. Physicians, not the Federal Government, are best positioned to work with patients and their families to address their unique medical and mental health care needs."

Mr. Speaker, I yield 1 minute to the gentleman from Ohio (Mr. LANDSMAN), a member of our committee.

Mr. LANDSMAN. Mr. Speaker, I have been watching this debate, and I will say just one thing, which is, Mr. Speaker, I remember when the Republican Party was about small government, local control, and personal liberties. Those were the foundations of the party that I grew up with.

I wasn't a Republican, but I admired those things about the party. It seems as if they all have strayed, Mr. Speaker, from those core tenets of personal liberty, States' rights, local control, leaving people alone.

We are talking about children here, kids who get bullied, who have the highest suicide rates of any other group of kids. Now, politicians are bullying them and saying that they are going to pick on them, too. It is wrong.

Mr. GUTHRIE. Mr. Speaker, I reserve the balance of my time.

Mr. PALLONE. Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from New Jersey has 30 seconds remaining.

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

Mr. Speaker, I will say that I totally oppose this bill. I think these decisions should be left with parents and physicians, but more than anything else, I will mention today that Republicans need to do the right thing and bring up the Jeffries discharge petition that would extend the tax credits under the ACA for 3 more years. They should not allow them to expire on January 1. It should be brought up now.

I oppose this bill, and I ask that the Speaker bring up the discharge petition now.

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

Mr. GUTHRIE. Mr. Speaker, I invite anyone to read through the list of the specific things that are prohibited in this bill from being performed on minors and say which one they think is good for a minor to have. Instead of reading through the list, I wish they would go through the list and say which is good for a minor to have.

On Medicaid, we have this issue of States providing Medicaid to people who are here illegally. That is the Medicaid administration. It is the same dollars. It is commingled.

If you are going to operate something through Medicaid, unless you say that you are going to use Federal dollars for that procedure but State dollars for that procedure, it is the same administration doing them.

We tried to fix that in the big, beautiful bill. It was struck down by the Democrats in the Senate. We think that is wrong.

Mr. Speaker, may I inquire as to the time remaining.

The SPEAKER pro tempore. The gentleman from Kentucky has 6 minutes remaining.

Mr. GUTHRIE. Mr. Speaker, I yield the balance of my time to the gentleman from Texas (Mr. CRENSHAW), my friend.

Mr. CRENSHAW. Mr. Speaker, in closing, let's just summarize what we have heard today.

We have heard that so-called gender-affirming care is necessary, effective, prevents suicides, and helps vulnerable children. No one can cite any sources for that claim. They can cite letters from certain associations that are ideologically driven.

I will again read the quote from the American Academy of Pediatrics when they did a review. On hormonal treatments for transgender adolescents, APA said: "Evidence regarding their psychosocial and cognitive impact is generally lacking." I get that their leadership is saying one thing, but the scientists are all saying something else.

As responsible policymakers, we might want to take a pause before we just go on and assume that permanent physiological changes to children are a good idea because they are going through something tough, whether that is gender dysphoria, teenage angst, depression, or anxiety.

If you talk about compassion, I am talking about compassion, too. Compassion is being a responsible adult in the room for that child who doesn't know all of these things.

Compassion is not a doctor lying to a child's parents about junk science in studies that say they won't have any remorse, that they will be fine, that puberty blockers are like a pause button. No, they are not. There was a study in Britain that showed 96 or 98

percent move on to hormonal therapies. It is not a pause button at all.

Again, ask the thousands of trans kids who now vehemently regret their decisions. They are in lawsuits with the doctors who did this to them. That alone should tell us to take a pause here.

Let's just take a pause on this ideology because there is no evidence that it works, and there is plenty of evidence to show that it is extreme in nature because it is permanent.

They wouldn't do this for any other body part. You can't just identify as one-armed and ask the doctor to cut off your arm. The doctor won't do it, just like the doctor won't take out someone's eye because they want to identify like me. They are not going to do it because that would be malpractice and insane.

Tell me how this is any different. I have asked my colleagues to cite their sources many times, but no one has. I have cited all of them.

This is about very simple common sense. The vast majority of Americans agree that these treatments shouldn't even be done on minors.

Mr. Speaker, let me remind everyone that this bill doesn't even go that far. It simply says that your tax dollars won't allow this to be done on minors, just your Medicaid tax dollars. That is all it does.

To not vote for this is to truly vote against their own constituents, truly vote against the American people's wishes, and vote against common sense.

The science is settled on this. There is no benefit to what they are claiming. I don't know why they keep fighting this battle. It is a losing battle. I hope many of them will change their minds and come across the aisle to vote for this bill.

This really doesn't have to be a partisan issue at all. It should be an issue of common sense, science, and true compassion for children.

Mr. GUTHRIE. Mr. Speaker, I yield back the balance of my time.

□ 1350

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

Pursuant to House Resolution 953, the previous question is ordered on the bill.

The question is on the engrossment and third reading of the bill.

The bill was ordered to be engrossed and read a third time, and was read the third time.

MOTION TO RECOMMIT

Mr. SOTO. Mr. Speaker, I have a motion to recommit at the desk.

The SPEAKER pro tempore. The Clerk will report the motion to recommit.

The Clerk read as follows:

Mr. SOTO of Florida moves to recommit the bill H.R. 498 to the Committee on Energy and Commerce.

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

Mr. SOTO of Florida moves to recommit the bill H.R. 498 to the Committee on Energy and Commerce with instructions to report the same back to the House forthwith with the following amendment:

Strike all after the enacting clause and insert the following:

SECTION 1. EXTENSION OF ENHANCED HEALTH INSURANCE PREMIUM TAX CREDIT.

(a) IN GENERAL.—Section 36B(c)(1)(E) of the Internal Revenue Code of 1986 is amended—

(1) by striking "January 1, 2026" and inserting "January 1, 2029", and

(2) by striking "2025" in the heading thereof and inserting "2028".

(b) APPLICABLE PERCENTAGES.—Section 36B(b)(3)(A)(iii) of such Code is amended—

(1) by striking "January 1, 2026" and inserting "January 1, 2029", and

(2) by striking "2025" in the heading thereof and inserting "2028".

(c) EFFECTIVE DATE.—The amendments made by this section shall apply to taxable years beginning after December 31, 2025.

The SPEAKER pro tempore. Pursuant to clause 2(b) of rule XIX, the previous question is ordered on the motion to recommit.

The question is on the motion to recommit.

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

Mr. SOTO. 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, further proceedings on this question will be postponed.

STANDARDIZING PERMITTING AND EXPEDITING ECONOMIC DEVELOPMENT ACT

The SPEAKER pro tempore. Pursuant to House Resolution 951 and rule XVIII, the Chair declares the House in the Committee of the Whole House on the state of the Union for the further consideration of the bill, H.R. 4776.

Will the gentleman from Texas (Mr. WILLIAMS) kindly take the chair.

□ 1350

IN THE COMMITTEE OF THE WHOLE

Accordingly, the House resolved itself into the Committee of the Whole House on the state of the Union for the further consideration of the bill (H.R. 4776) to amend the National Environmental Policy Act of 1969 to clarify ambiguous provisions and facilitate a more efficient, effective, and timely environmental review process, with Mr. WILLIAMS of Texas in the chair.

The Clerk read the title of the bill.

The Acting CHAIR. When the Committee of the Whole rose earlier today, a request for a recorded vote on amendment No. 6 printed in House Report 119-410 offered by the gentleman from Texas (Mr. ROY) had been postponed.

ANNOUNCEMENT BY THE ACTING CHAIR

The Acting CHAIR. Pursuant to clause 6 of rule XVIII, proceedings will now resume on those amendments printed in House Report 119-410 on which further proceedings were postponed, in the following order: