NOS. 20-429, 20-454, 20-539

IN THE

Supreme Court of the United States

AMERICAN MEDICAL ASSOCIATION, ET AL.,
Petitioners,

v.

NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,
Respondents.

On Writ of Certiorari to the United States Court of Appeals for the Ninth Circuit

MOTION OF THE AMERICAN ASSOCIATION OF PRO-LIFE OBSTETRICIANS & GYNECOLOGISTS, THE CHRISTIAN MEDICAL AND DENTAL ASSOCIATIONS, AND THE CATHOLIC MEDICAL ASSOCIATION TO INTERVENE OR TO PRESENT ORAL ARGUMENT AS AMICI CURIAE

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OREGON, ET AL.,

Petitioners,

v.

NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,

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NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,

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v.

MAYOR AND CITY COUNCIL OF BALTIMORE,

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On Writ of Certiorari to the United States Court of Appeals for the Fourth Circuit

CORPORATION DISCLOSURE STATEMENT

Pursuant to Supreme Court Rule 29, Movants the American Association of Pro-Life Obstetricians & Gynecologists, the Christian Medical and Dental Associations, and the Catholic Medical Association state that they have no parent company or publicly held company with a 10% or greater ownership interest in them.

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INTRODUCTION

On February 22, 2021, this Court granted petitions for writs of certiorari in these three, consolidated cases to consider the validity of 2019 Department of Health and Human Services (HHS) rules that prohibit recipients of Title X funds from making elective-abortion referrals in Title X clinics, require recipients to maintain physical separation between their clinics and any abortion-related activities, and protect the conscience rights of pro-life healthcare organizations and providers who participate in the Title X program. These 2019 Rules are materially indistinguishable from the regulations this Court upheld in *Rust* v. *Sullivan*, 500 U.S. 173 (1991). And the 2019 Rules are consistent with Title X, which prohibits federal funding for family planning services "where abortion is a method of family planning." 42 U.S.C. 300a-6.

In a January 28, 2021 Memorandum, President Biden declared that his Administration would "review the [2019] Rule[s] and any other regulations governing the Title X program that impose undue restrictions on the use of Federal funds." Mem. on Protecting Women's Health at Home and Abroad, § 2 (Jan. 28, 2021). Though the 2019 Rules protect life at all stages and comply with 42 U.S.C. 300a-6, the Memorandum disparages the Rules as causing "the termination of Federal family planning funding for many women's healthcare providers" and declares the Administration's policy "to support women's and girl's sexual and reproductive health," *id.* § 1—*i.e.*, to support expanded abortion access, funded by taxpayers. Making clear the Administration's priorities, the Memorandum also revoked the Mexico City Policy, allowing foreign aid recipients to fund abortion.

It is a near certainty that the Administration will decline to defend the Rules.

Movants the American Association of Pro-Life Obstetricians & Gynecologists, the Christian Medical and Dental Associations, the Catholic Medical Association, and their many members support the 2019 Rules and benefit from the Rules' conscience protections. Movants' commitment to defending the Rules is illustrated by the fact that two of these Movants were *the only groups* who filed an amicus brief in support of the United States as petitioner in Case No. 20-454. And because the en banc Fourth Circuit's decision invalidates the 2019 Rules in their entirety—including the conscience protections—Movants have standing to defend the regulations on the merits and to request that this Court uphold the 2019 Rules in their entirety.

In these unique circumstances, Movants should be allowed to intervene as petitioner in *Cochran* v. *Mayor and City Council of Baltimore*, No. 20-454, and as respondents in *American Medical Association* v. *Cochran*, No. 20-429, and *Oregon* v. *Cochran*, No. 20-539. Alternatively, the Court should grant Movants leave to participate in oral argument. The Court's grant of either request will not prejudice the timely disposition of this case or any party to it. Conversely, denying both requests is likely to severely prejudice Movants and their members, who should have the opportunity to present merits-stage briefing and oral argument in defense of the 2019 Rules that the Fourth Circuit improperly invalidated.

BACKGROUND

Proposed Intervenors

The American Association of Pro-Life Obstetricians & Gynecologists (AAPLOG) is a nonprofit professional medical organization with over 6,000 obstetrician-gynecologist members and associates. Christina M. Francis Decl. (Add. A) ¶ 2. Before the American College/Congress of Obstetricians and Gynecologists discontinued the title, it recognized the American Association of Pro-Life Obstetricians and Gynecologists as a "special interest group" for 40 years. *Id.* ¶ 3. AAPLOG strives to ensure that pregnant women receive quality care, and that they are informed of abortion's potential long-term consequences on women's health. *Id.* ¶ 4. AAPLOG offers healthcare providers and the public a better understanding of abortion-related health risks, such as depression, substance abuse, suicide, and subsequent preterm birth. *Id.* ¶ 5. Several AAPLOG members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 Rules, and AAPLOG works to protect these members' right not to participate in, or facilitate abortion in any way—including counseling or referral. *Id.* at ¶¶ 6–7.

The Christian Medical and Dental Associations (CMDA) educates, encourages, and equips Christian healthcare professionals to glorify God by following Christ, serving with excellence and compassion, caring for all people, and advancing Biblical principles of health care within the Church and throughout the world. Mike Chupp Decl. (Add. B) ¶ 2. CMDA has 20,000 members and 329 chapters at medical, dental, optometry, physician assistant, and undergraduate

schools across the country. *Id.* ¶ 3. CMDA is opposed to the practice of abortion as contrary to Scripture, respect for the sanctity of human life, and traditional, historical and Judeo-Christian medical ethics. *Id.* ¶ 4. Several CMDA members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 Rules. *Id.* ¶ 6. CMDA's members are committed to the sanctity of human life, and it would violate their consciences to participate in or refer for abortions. *Id.* ¶ 5.

The Catholic Medical Association (CMA) is a nonprofit national organization of Catholic healthcare professionals, including physicians, nurses, and physician assistants with over 2,400 members. Mario R. Dickerson Decl. (Add. C) ¶ 2. CMA is opposed to the practice of abortion as contrary to the teaching and tradition of the Catholic Church, to respect for the sanctity of human life, to traditional Judeo-Christian medical ethics, and to the good of patients. *Id.* ¶ 3. CMA's members are committed to the sanctity of human life, and it would violate their consciences to participate in or refer for abortions. *Id.* ¶ 4. CMA has actively sought conscience protections for its members and other healthcare professionals who might otherwise be forced by laws or regulations or by their employers to provide, counsel, or refer for abortions. *Id.* ¶ 5. Several CMA members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 Rules. *Id.* ¶ 6.

AAPLOG, CMDA, and CMA all have a strong interest in ensuring that Congress's refusal to fund abortion counseling and advocacy through the public fisc is respected, and in defending efforts to implement Congress's conscience protections, which make pro-life healthcare organizations and providers' participation in the Title X program possible. Francis Decl. ¶ 8; Chupp Decl. ¶ 7; Dickerson Decl. ¶ 7.

Statutory and regulatory background

In 1970, Congress enacted Title X, authorizing HHS to make grants and enter contracts "to assist in the establishment and operation of voluntary family planning projects which shall offer a broad range of acceptable and effective family planning methods and services," 42 U.S.C. 300(a), subject to two important caveats. First, such grants and contracts must be made in accord with the Secretary's regulations. 42 U.S.C. 300a-4(a). And second, "[n]one of the funds appropriated under this subchapter shall be used in programs where abortion is a method of family planning." 42 U.S.C. 300a-6. Since 1972, HHS has interpreted the latter requirement "as prohibiting Title X projects from in any way promoting or encouraging abortion as a method of family planning," and "as requiring that the Title X program be 'separate and distinct' from any abortion activities of a grantee." 53 Fed. Reg. 2922, 2923 (Feb. 2, 1988) (describing previous agency opinions).

HHS issued a final rule in 1988 that specifically prohibited Title X providers from counseling about, or providing referrals for, abortion as a family-planning method, even if a patient requested it. 53 Fed. Reg. at 2945. The rule required providers to refer all pregnant clients "for appropriate prenatal and/or social services

by furnishing a list of available providers that promote the welfare of mother and unborn child." *Ibid.* The rule also prohibited indirect abortion referrals and required grantees to keep Title X projects "physically and financially separate" from all prohibited abortion-related activity. *Ibid.* That was the rule this Court upheld in *Rust* v. *Sullivan*, 500 U.S. 173 (1991).

The rule has been a political football ever since. In 1993, President Clinton and HHS suspended the 1988 rule. 58 Fed. Reg. 7455 (Jan. 22, 1993). In 2000, HHS finalized a new rule *requiring* abortion counseling and referrals and eliminating the separation requirement, 65 Fed. Reg. 41,270, 41,275–76, 41,279 (July 3, 2000), in blatant violation of the statutory mandate. HHS restored the 1988 requirements by issuing the 2019 Rules, which included referral prohibitions and physical-separation requirements that are materially identical to those this court upheld in *Rust*. 84 Fed. Reg. 7714 (Mar. 4, 2019); 42 C.F.R. 59.1–59.19. Importantly, the Rules also include conscience protections for individuals and entities—like Movants' members—who decline to perform, participate in, or refer for, abortions. 84 Fed. Reg. at 7716. As HHS explained it, the 2019 Rules "ensure compliance with, and enhance implementation of, the statutory requirement that none of the funds appropriated for Title X may be used in programs where abortion is a method of family planning and related statutory requirements." *Id.* at 7714.

The 2019 Rules substantially benefit AAPLOG, CMDA, CMA, and their members.

AAPLOG offers healthcare providers and the public a better understanding of abortion-related health risks, such as depression, substance abuse, suicide, and subsequent preterm birth. Francis Decl. ¶ 5. AAPLOG also works to protect its members' right not to participate in, or facilitate, abortion in any way—including counseling or referral. *Id.* ¶ 6.

CMDA believes the practice of abortion is contrary to Scripture, respect for the sanctity of human life, and traditional, historical and Judeo-Christian medical ethics. Chupp Decl. ¶ 4. CMDA's members are committed to the sanctity of human life, and it would violate their consciences to participate in, or refer or counsel for abortions. *Id.* ¶ 5.

CMA is opposed to the practice of abortion as contrary to the teaching and tradition of the Catholic Church, to respect for the sanctity of human life, to traditional Judeo-Christian medical ethics, and to the good of patients. Dickerson Decl. ¶ 3. CMA actively seeks conscience protections for its members and other healthcare professionals who might otherwise be forced by laws or regulations or by their employers to provide, counsel, or refer for abortions. *Id.* ¶ 5.

Several AAPLOG, CMDA, and CMA members work at healthcare facilities that receive Title X funds and are affected by the 2019 Rules. Francis Decl. ¶ 7; Chupp Decl. ¶ 6; Dickerson Decl. ¶ 6. The Rules actualize the protection for these physicians' right not to participate in abortion. Previous regulations required Title X recipients to refer for abortion and abortion counseling, if requested. 84 Fed. Reg. at

7716–17. But HHS determined that these requirements "conflict with federal conscience protections, such as the Church, Coats-Snowe, and Weldon Amendments, for individual and institutional entities which object." *Ibid.* So it eliminated both the abortion counseling and abortion referral requirements in the 2019 Rules. *Ibid.* The Fourth Circuit recognized this purpose below: "[T]his provision was added to 'protect the conscience rights of individuals and entities who decline to perform, participate in, or refer for, abortions.'" *Mayor & City Council of Baltimore* v. *Azar*, 973 F.3d 258, 285–86 (4th Cir. 2020) (en banc). AAPLOG, CMDA, CMA, and their members working at Title X recipients have a strong interest in defending the 2019 Rules so that they are not excluded from working at or operating clinics that receive federal Title X funds.

Relevant proceedings

Respondents in No. 20-454 and Petitioners in Nos. 20-429 and 20-539 challenged the 2019 Rules under the Administrative Procedures Act. The en banc Fourth Circuit affirmed a district court's grant of a permanent injunction enjoining the Rules in their entirety. *Mayor & City Council of Baltimore* v. *Azar*, 973 F.3d 258 (4th Cir. 2020). The en banc Ninth Circuit vacated a similar permanent injunction. *California* v. *Azar*, 950 F.3d 1067 (9th Cir. 2020).

The losing parties in each suit filed petitions of certiorari. AAPLOG and CMDA were the only amici to file in support of the United States' petition in No. 20-454. This Court granted all three petitions on February 22, 2021, to resolve the circuit split.

But as noted above, in a January 28, 2021 Memorandum, newly elected President Biden ordered the HHS Secretary to "review" the 2019 Rules, presumably for the purpose of withdrawing and replacing them. Mem. on Protecting Women's Health at Home and Abroad, § 2 (Jan. 28, 2021). The Memorandum disparages the 2019 Rules as causing "the termination of Federal family planning funding for many women's healthcare providers and puts women's health at risk," *id.* § 1, even though there are many healthcare providers—including states—who are more than willing to provide Title X healthcare without entangling themselves in abortion.

The United States has not indicated whether it will continue to defend the 2019 Rules. But such defense is unlikely, given the current Administration's public position and attacks on the Rules.

REASONS FOR GRANTING THE MOTION

This Court frequently grants motions to intervene in appropriate cases. *E.g.*, *N.B.D.* v. *Ky. Cabinet for Health & Family Servs.*, 140 S. Ct. 860 (2020); *BNSF Ry. Co.* v. *EEOC*, 140 S. Ct. 109 (2019); *Vos* v. *Barg*, 555 U.S. 1211 (2009). When considering such a motion, the Court uses the Federal Rules of Civil Procedures as a guide. *Automobile Workers* v. *Scofield*, 382 U.S. 205, 217 n.10 (1965). The Federal Rules contemplate "intervention of right" and "permissive intervention." Fed. R. Civ. P. 24. Movants AAPLOG, CMDA, and CMA qualify for both because they and their members' interests will be "vitally affected" by this Court's ruling, and it is unlikely that the United States will defend Movants' interests. Stephen M. Shapiro, et al., *Supreme Court Practice* 427 (10th ed. 2013).

I. The Court should grant intervention as of right.

Federal Rule 24(a)(2) requires a movant seeking intervention as of right to show timeliness, a cognizable interest, a danger of that interest's impairment, and lack of adequate representation. Movants satisfy all four requirements.

1. Timeliness. "[T]he requirement of timeliness is a flexible one." 7C Wright & Miller, *Federal Practice and Procedure* § 1916 (3d ed.). The "most important consideration" is "whether the delay in moving for intervention will prejudice the existing parties." *Ibid.* Movants easily satisfy this requirement. Grant of their motion to intervene will not delay these cases an iota; the cases will still be briefed and ready for oral argument by the start of the 2021 Term. Litigation in this Court is just getting started. Accord, *e.g.*, *Geiger* v. *Foley Hoag LLP Ret. Plan*, 521 F.3d 60, 64 (1st Cir. 2008) (intervention motion timely where "the case had not progressed beyond the initial stages").

Movants are also prompt in moving to intervene. The Court only recently granted the petitions, and the United States has not yet signaled its intentions—though that communication is undoubtedly coming soon. Movants acted "promptly" once it became necessary for them to protect their interests. *United Airlines, Inc.* v. *McDonald*, 432 U.S. 385, 394 (1977).

Nor would this Court's grant of Movants' intervention prejudice any party. Movants are prepared to abide by a merits briefing and oral-argument schedule that allows this case to be heard at the beginning of the Court's 2021 Term. In sum, the timeliness factor supports granting intervention.

2. Cognizable interest. To intervene as of right, a proposed intervenor must have "a significantly protectable interest" in the lawsuit's subject matter. *Donaldson* v. *United States*, 400 U.S. 517, 531 (1971). That is certainly true of Movants. As noted above, AAPLOG, CMDA, CMA, and their members benefit directly from the 2019 Rules' conscience protections, protections that will disappear if the Fourth Circuit's ruling is upheld. Movants have a direct, concrete, and cognizable interest in defending the Rules and ensuring that the Rules are vindicated by this Court.

This interest remains even if the Administration attempts to unlawfully suspend the 2019 Rules. One of the questions presented in these consolidated cases is whether the 2019 Rules were properly promulgated. This issue is directly relevant to any question of mootness because, if the 2019 Rules were properly promulgated (they were), they can only be repealed or halted through a notice-and-comment process that will require the Administration rationally to explain any departure from the Rules, and that will take considerable time—likely one to two years if the appropriate process is followed, or even longer if proper process is not followed and litigation ensues. That the lower courts sharply divided on the question of proper promulgation makes this Court's review non-advisory even if the Administration purports to change the 2019 Rules. And in the event the Administration takes that route and notifies the Court that it is undertaking notice-and-comment rulemaking and claims that these three cases are now purportedly "moot," Movants welcome the opportunity to explain in much greater detail in a supplemental filing why that is not the case.

Alternatively, if the Administration seeks to stay or remand these cases, pending reconsideration of the rules through notice-and-comment rulemaking, Movants similarly welcome the opportunity to explain in a detailed supplemental filing why that course is not appropriate and should be rejected. Regardless, the cognizable-interest factor supports intervention as well.

3. Impairment. For intervention as of right, a movant need only show that disposition of the action "may as a practical matter impair or impede the movant's ability to protect its interest." Fed. R. Civ. P. 24(a)(2). Accord, *e.g.*, *Nuesse* v. *Camp*, 385 F.2d 694, 701 (D.C. Cir. 1967) (the Rule's language was "obviously designed to liberalize the right to intervene in federal actions"). Movants satisfy that liberal standard here.

Movants' interests are directly affected by the Fourth Circuit's en banc ruling upholding the district court's grant of an injunction prohibiting implementation of the 2019 Rules in their entirety. In fact, if the Court reverses the Fourth Circuit, the interests of Movants and their members will be vindicated. Conversely, if the Court adopts the Fourth Circuit's ruling and reverses the Ninth Circuit, the 2019 Rules' conscience protections will disappear, and the interests of Movants and their members will be permanently impaired. Such impairment also weighs strongly in favor of intervention.

4. Inadequate representation. A party who satisfies the timeliness, cognizable-interest, and impairment factors is entitled to intervene "unless existing parties adequately represent [the intervenor's] interest. Fed. R. Civ. P. 24(a)(2). This requirement "is satisfied if the applicant shows that representation of his interest 'may be' inadequate; and the burden of making that showing should be treated as minimal." *Trbovich* v. *United Mine Workers of Am.*, 404 U.S. 528, 538 n.10 (1972).

Movants satisfy this minimal requirement. Their interests are "related, but not identical" to those of the United States, which is sufficient for intervention. *Trbovich*, 404 U.S. at 538; accord, *e.g.*, *United Guar. Residential Ins. Co. of Iowa* v. *Phila. Sav. Fund Soc'y*, 819 F.2d 473, 475 (4th Cir. 1987) ("*Trbovich* recognized that when a party to an existing suit is obligated to serve two distinct interests, which, although related, are not identical, another with one of those interests should be entitled to intervene."); *Kane County* v. *United States*, 928 F.3d 877, 895 (10th Cir. 2019) (holding there was "no presumption of adequate representation" where the parties' interests were "not identical," given interests unique to the government and not shared by the private intervenor). And that's assuming the United States chooses to defend at all, an assumption that is unwarranted.

Because Movants' interests are not coextensive with the United States's, Movants satisfy Rule 24's minimal requirement that representation *may* be inadequate. *Trbovich*, 404 U.S. at 538 & n.10. As a result, Movants satisfy all four of Rule 24(a)(2)'s requirements for intervention, and their motion to intervene should be granted.

II. Alternatively, the Court should grant permissive intervention.

The requirements for permissive intervention are a "timely motion" and "a common question of law or fact." Fed. R. Civ. P. 24(b)(1)(B). Rule 24(b)(3) also asks "whether the intervention will unduly delay or prejudice the adjudication of the original parties' rights."

For the same reasons just explained, Movants are entitled to permissive intervention. This motion is timely, Movants seek an answer to the same legal questions presented in the petitions for certiorari, and Movants would cause no delay or prejudice, especially given their willingness to ensure that merits briefing is completed such that oral argument can timely take place at the beginning of the Court's 2021 Term.

There is an additional practical consideration. In *Mullaney* v. *Anderson*, 342 U.S. 415 (1952), the Court added a party on appeal to avoid a possible standing problem. "To dismiss the present petition and require the new plaintiffs to start over . . . would entail needless waste and run[ ] counter to effective judicial administration." *Id.* at 417. So too here. In the likely event that the United States does not defend, there will be no adverse party to defend the 2019 Rules in this Court. The Court could, of course, dismiss the petitions. But with the sharp, en banc circuit split, the open question whether the 2019 Rules will continue to protect pro-life medical professionals, and the governing rules' ping-ponging back and forth with each administration, lower courts, litigants, and officials need an answer now as to what Title X requires. This practical problem counsels strongly in favor of granting Movants' motion.

III. At minimum, the Court should allow AAPLOG, CMDA, and CMA to share oral-argument time as Amici.

As noted above, AAPLOG and CMDA are the only parties who filed as amici in support of the United States' petition for certiorari in No. 20-454. As direct beneficiaries of the 2019 Rules, they and CMA have the interest and the expertise to defend the Rules on the merits, no matter the United States's ultimate merits position in this litigation.

This Court has regularly granted motions for divided argument when both a government and private parties appeared on the same side of a case. *E.g.*, *Dep't of Homeland Security* v. *Regents of the Univ. of Cal.*, 140 S. Ct. 398 (2019) (mem.); *Am. Legion* v. *Am. Humanist Ass'n*, 139 S. Ct. 951 (2019) (mem.); *Dep't of Commerce* v. *New York*, 139 S. Ct. 1543 (2019) (mem.); *Tenn. Wine & Spirits Retailers Ass'n* v. *Blair*, 139 S. Ct. 783 (2019) (mem.); *Sturgeon* v. *Frost*, 139 S. Ct. 357 (2018) (mem.); *Janus* v. *Am. Fed'n of State, Cnty., & Mun. Emps., Council 31*, 318 S. Ct. 974 (2018) (mem.); *Masterpiece Cakeshop, Ltd.* v. *Colo. Civil Rights Comm'n*, 138 S. Ct. 466 (2017) (mem.); *Wittman* v. *Personhuballah*, 136 S. Ct. 1241 (2016) (mem.); *Harris* v. *Ariz. Indep. Redistricting Comm'n*, 577 U.S. 1001 (2015) (mem.); *Util. Air Regul. Grp.* v. *EPA*, 135 S. Ct. 1541 (2015) (mem.); *Oneok, Inc.* v. *Learjet, Inc.*, 135 S. Ct. 884 (2014) (mem.). Divided argument in these circumstances recognizes the distinct sovereign interests of the government and the individual interests of private parties directly affected by the rule.

Alternatively, the Court appoints amici to defend positions when the parties to a case decline to do so. *E.g.*, *Lange* v. *California*, 141 S. Ct. 644 (2020) (mem.); *Seila Law LLC* v. *Consumer Fin. Prot. Bureau*, 140 S. Ct. 427 (2019) (mem.); *Holguin-Hernandez* v. *United States*, 139 S. Ct. 2779 (2019) (mem.). If the United States declines to defend the 2019 Rules, the Court should appoint Movants to step in and assume that role. The Court should also seriously consider appointing as amici Ohio and the other states that recently filed a similar motion to intervene or present oral argument as amici. Medical professionals and associations on the one hand, and states on the other, have different but complementary interests, and the Court would benefit from both their presentations.

Finally, if the Court grants intervention or oral-argument time to Ohio and the other states, and in the unlikely event that the United States defends the 2019 Rules, it would still be appropriate to divide argument time among the states, Movants, and the United States. *E.g.*, *Friedrichs* v. *Cal. Teachers Ass'n*, 136 S. Ct. 566 (2015) (mem.) (granting motion for 3-way divided argument and enlarging time to 40 minutes per side); *Bush* v. *Vera*, 516 U.S. 911 (1955) (same). Movants' interests as beneficiaries of the 2019 Rules' conscience protections is distinct from the other parties' interests, and briefing and oral argument that addresses the 2019 Rules' validity from all three perspectives would be beneficial.

CONCLUSION

The Court should grant this motion and allow Movants to intervene as the petitioner in No. 20-454 and as the respondents in Nos. 20-429 and 20-539. Alternatively, the Court should grant Movants' request to participate at oral argument as amici curiae.

Respectfully submitted,

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MARCH 2021

ADDENDUM A

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Respondents.

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I, Christina M. Francis, M.D. under penalty of perjury and pursuant to 28 U.S.C. § 1746, declare:

1. I chair the board of the American Association of Pro-Life Obstetricians and Gynecologists (AAPLOG).

2. AAPLOG is a nonprofit professional medical organization with over 6,000 obstetrician-gynecologist members and associates.

3. Before the American College/Congress of Obstetricians and Gynecologists discontinued the title, it recognized the American Association of Pro-Life Obstetricians and Gynecologists as a "special interest group" for 40 years.

4. AAPLOG strives to ensure that pregnant women receive quality care, and that they are informed of abortions' potential long-term consequences on women's health.

5. AAPLOG offers healthcare providers and the public a better understanding of abortion-related health risks, such as depression, substance abuse, suicide, and subsequent preterm birth.

6. AAPLOG works to protect its members' right not to participate in, or facilitate abortion in any way—including counseling or referral.

7. Several AAPLOG members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 HHS Rules.

8. AAPLOG has a strong interest in ensuring that Congress's refusal to fund abortion counseling and advocacy through the public fisc is respected, and in defending the agency's effort to implement Congress's conscience protections, which make pro-life

healthcare organizations and providers' participation in the Title X program possible.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 11, 2021.

s/ Christina M. Francis, M.D.
Christina M. Francis, M.D.,
AAPLOG Board Chair

ADDENDUM B

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I, Mike Chupp MD, under penalty of perjury and pursuant to 28 U.S.C. § 1746, declare:

1. I serve as Chief Executive Officer for Christian Medical & Dental Associations (CMDA).

2. CMDA educates, encourages, and equips Christian healthcare professionals to glorify God by following Christ, serving with excellence and compassion, caring for all people, and advancing Biblical principles of health care within the Church and throughout the world.

3. CMDA has 20,000 members and 329 chapters at medical, dental, optometry, physician assistant, and undergraduate schools across the country.

4. CMDA is opposed to the practice of abortion as contrary to Scripture, respect for the sanctity of human life, and traditional, historical and Judeo-Christian medical ethics.

5. CMDA's members are committed to the sanctity of human life and it would violate their consciences to participate in or refer for abortions.

6. Several CMDA members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 HHS Rules.

7. CMDA has a strong interest in ensuring that Congress's refusal to fund abortion counseling and advocacy through the public fisc is respected, and in defending the agency's effort to implement Congress's conscience protections, which make pro-life healthcare organizations and providers' participation in the Title X program possible.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 11, 2021.

s/ Mike Chupp, MD
CEO
Medical and Dental Associations

ADDENDUM C

NOS. 20-429, 20-454, 20-539

IN THE

Supreme Court of the United States

AMERICAN MEDICAL ASSOCIATION, ET AL.,
Petitioners,

v.

NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,
Respondents.

On Writ of Certiorari to the United States Court of Appeals for the Ninth Circuit

DECLARATION OF MARIO R. DICKERSON IN SUPPORT OF MOTION OF THE AMERICAN ASSOCIATION OF PRO-LIFE OBSTETRICIANS & GYNECOLOGISTS, THE CHRISTIAN MEDICAL & DENTAL ASSOCIATIONS, AND THE CATHOLIC MEDICAL ASSOCIATION TO INTERVENE OR TO PRESENT ORAL ARGUMENT AS *AMICI CURIAE*

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OREGON, ET AL.,

Petitioners,

v.

NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,

Respondents.

On Writ of Certiorari to the United States Court of Appeals for the Ninth Circuit

NORRIS COCHRAN, ACTING SECRETARY OF HEALTH AND HUMAN SERVICES, ET AL.,

Petitioners,

v.

MAYOR AND CITY COUNCIL OF BALTIMORE,

Respondents.

On Writ of Certiorari to the United States Court of Appeals for the Fourth Circuit

I, Mario R. Dickerson, under penalty of perjury and pursuant to 28 U.S.C. § 1746, declare:

1. I serve as Executive Director for Catholic Medical Association (CMA).

2. CMA is a nonprofit national organization of Catholic healthcare professionals, including physicians, nurses, and physician assistants with over 2,400 members.

3. CMA is opposed to the practice of abortion as contrary to the teaching and tradition of the Catholic Church, to respect for the sanctity of human life, to traditional Judeo-Christian medical ethics, and to the good of patients.

4. CMA's members are committed to the sanctity of human life and it would violate their consciences to participate in or refer for abortions.

5. CMA has actively sought conscience protections for its members and other healthcare professionals who might otherwise be forced by laws or regulations or by their employers to provide, counsel, or refer for abortions.

6. Several CMA members work at healthcare facilities that receive Title X funds and benefit from, and are affected by, the 2019 HHS Rules.

7. CMA has a strong interest in ensuring that Congress's refusal to fund abortion counseling and advocacy through the public fisc is respected, and in defending the agency's effort to implement Congress's conscience protections, which make pro-life healthcare organizations and providers' participation in the Title X program possible.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 11, 2021.

s/ Mario R. Dickerson
Mario R. Dickerson, Executive Director
Catholic Medical Association