



## Representative Kevin Mullin (D-CA-015)

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**Capitol Address:**

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**District Address:**

**Biography:**

Family : Jessica Stanfill; Date of Birth : 7/15/1970; Birthplace : Dale City, CA; Home : South San Francisco, CA; Education : Master of Public Administration, San Francisco State University (CA); Bachelor of Arts, University of San Francisco (CA); Occupation : Founder, Owner, KM2 Communications; Former Political Director, Office of CA State Assemblymember Gene Mullin (his father); Former District Director, Office of CA State Senator Jackie Speier; Assumed Office : 1/3/2023;

Score: 100%

### 2023-2024 Regular Session (118th)

Result	Description	Vote	
Passed	<p>January 11, 2023, H.R. 26, Roll Call Vote 29</p> <p>On January 9, 2023, Rep. Ann Wager (R-MO-02), along with her colleagues Majority Leader Steve Scalise (R-LA-01) and Rep. Kat Cammack (R-FL-03) reintroduced a bill that politicizes abortion care and criminalizes doctors, the misleadingly named Born-Alive Abortion Survivors Protection Act (H.R. 26). Anti-abortion politicians have made it clear that they want to control our bodies and futures, jail doctors and nurses who provide essential health care, and strip us of our bodily autonomy. This bill is no exception. H.R 26 is deliberately misleading and offensive to people who face pregnancy complications and the doctors and nurses who provide their care. This legislation adds new and extreme criminal and financial penalties against doctors and inappropriately intrudes into the doctor-patient relationship by substituting out a family’s and a physician’s best judgment with that of a group of politicians. Doctors already provide appropriate medical care. To suggest otherwise is false, offensive, and dangerous, not to mention a complete waste of taxpayer time and money. This is yet another attempt by anti-abortion politicians to spread misinformation as a means to their end: to ban safe and legal abortion. A vote AGAINST H.R. 26 was a vote in support of sexual and reproductive health. The bill passed the House by a vote of 220-210.</p>	N	✓

<p>Passed</p>	<p>January 11, 2023, H. Con. Res. 3, Roll Call Vote 300  On January 9, 2023, anti-abortion lawmakers led by Rep. Mike Johnson (R-LA-04) introduced H. Con Res. 3, a resolution expressing the sense of Congress condemning the recent attacks on anti-abortion facilities, groups, and churches. We all must reject tactics and threats from groups that use destruction and violence as a means to an end. But let's be clear eyed: the same voices most loudly lifting up the actions of groups threatening violence have historically been silent as health centers, abortion providers, and abortion patients have been under threat. Anti-abortion politicians continue to attack abortion and those who seek it with increasingly misleading, hostile, and dangerous rhetoric. This resolution is not really about violence or safety; it's an attempt to score political points and it does not attempt to hide its anti-abortion agenda while ignoring violence against abortion providers and health centers. A vote AGAINST H. Con. Res. 3 was a vote in support of sexual and reproductive health. The bill passed the House by a vote of 222-209.</p>	<p>N</p>	
<p>Passed</p>	<p>July 13, 2023, Jackson of Texas Amendment #5 to H. R. 2670, Roll Call Vote 300  On July 13, Rep. Ronny Jackson (R-TX-13) offered an amendment to H. R. 2670, the National Defense Authorization Act (NDAA) for Fiscal Year 2024, that would reverse a critical Department of Defense (DOD) policy supporting service members and their families who are forced to travel off base for reproductive health care — including abortion care — that is not covered or offered at their base. In response to the Supreme Court's devastating decision to overturn Roe v. Wade, the DOD announced important policy changes to safeguard reproductive health care access, including abortion, birth control, and fertility care access for service members and their families. DOD's policies are critical to providing needed resources to service members and protecting their health and economic security. Efforts to take away the DOD protections undermine the health and freedoms of service members and their loved ones and DOD's authority to protect its troops and military families. A vote AGAINST the Jackson Amendment was a vote in support of sexual and reproductive health. The Jackson Amendment passed by a vote of 221-213.</p>	<p>N</p>	

<p>Passed</p>	<p>July 13, 2023, Rosendale of Montana Amendment #10 to H. R. 2670, Roll Call Vote 301 On July 13, Rep. Matt Rosendale (R-MT-02) offered an amendment to H. R. 2670, the National Defense Authorization Act (NDAA) for Fiscal Year 2024, that would prohibit coverage of gender-affirming care through TRICARE (the uniformed services health care program for service members and their family members), exacerbating the existing harmful effects of discrimination on transgender service members. Among transgender Americans, 1 in 5 will serve in the military at some point in their lives, 2 to 3 times the rate of their cisgender peers. Inserting discriminatory amendments to the NDAA will have an outsized impact on trans service members and service members with transgender family members. For service members and their families who need access to these essential services, bans on gender-affirming care may block them from getting any care at all — further threatening the mental, physical, and emotional health of trans people. Planned Parenthood believes everyone deserves high-quality, compassionate health care that’s appropriate for one’s needs no matter their gender identity, and opposes efforts to restrict access to gender-affirming care. A vote AGAINST the Rosendale Amendment was a vote in support of sexual and reproductive health. The Rosendale Amendment passed by a vote of 222-211.</p>	<p>N</p>	
<p>Passed</p>	<p>July 13, 2023, Norman of South Carolina Amendment #20 to H. R. 2670, Roll Call Vote 302 On July 13, Rep. Ralph Norman (R-SC-05) offered an amendment to H. R. 2670, the National Defense Authorization Act (NDAA) for Fiscal Year 2024, that would prohibit gender-affirming care for dependents of service members through the Exceptional Family Member Program, which provides provides community support, housing, medical, educational, and personnel services to military families with special needs. Among transgender Americans, 1 in 5 will serve in the military at some point in their lives, roughly 2 to 3 times the rate of their cisgender peers. Inserting discriminatory amendments to the NDAA will have an outsized impact on trans service members and service members with transgender family members. For service members and their families who need access to these essential services, bans on gender-affirming care may block them from getting any care at all — further threatening the mental, physical, and emotional health of trans people. Planned Parenthood believes everyone deserves high-quality, supportive health care appropriate for their needs, regardless of gender identity, and opposes efforts to restrict access to gender-affirming care. A vote AGAINST the Norman Amendment was a vote in support of sexual and reproductive health. The Norman Amendment passed by a vote of 222-210.</p>	<p>N</p>	

Passed	<p>July 14, 2023, H. R. 2670, Roll Call Vote 328 Following the adoption of three amendments that would restrict access to sexual and reproductive health care for service members and their families, Planned Parenthood urged the House of Representatives to oppose H.R. 2670, the National Defense Authorization Act (NDAA) for Fiscal Year 2024. The NDAA is an annual bill that specifies funding levels and policies for the U.S. Department of Defense (DOD). The NDAA passed by the House contains three provisions that limit access to health care for service members and their families by: Reversing the Department of Defense policy to support service members and their families who are forced to travel off base for reproductive health care — including abortion care — that is not covered or offered at their base; Prohibiting coverage of gender-affirming care through TRICARE, exacerbating the existing impact of discrimination on transgender service members; Prohibiting provision of gender-affirming care through the Exceptional Family Member Program. A vote AGAINST H. R. 2670 was a vote in support of sexual and reproductive health. The NDAA passed in the House by a vote of 219-210.</p>	N	
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Failed	<p>September 27, 2023, Good of Virginia Amendment #85, 90-95 to H.R.4368, Roll Call Vote 420, 422-427 On September 27, Rep. Bob Good (R-VA-05) offered a series of amendments to H.R.4368, the Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act for Fiscal Year 2024, that would reduce salaries for various FDA officials (Director of the Center for Drug Evaluation and Research, Director of the Office of Surveillance and Epidemiology, Director of the Division of Risk Management, Director of the Office of New Drugs, Director of the Office of Compliance, Director of the Office of Regulatory Policy). These amendments were designed as punishment and a way to oppose the U.S. Food and Drug Administration (FDA) independent, scientific decision-making related to the dispensing of mifepristone. The underlying bill contains provisions that attempt to reinstate burdensome, medically unnecessary restrictions that the FDA lifted after extensive, evidence-based review. Mifepristone is safe, effective, and has been used by more than five million people in the United States since its FDA approval more than 20 years ago. Mifepristone has helped ensure that patients are able to make their own private medical decisions, and it has expanded access to essential, time-sensitive reproductive health care. Despite overwhelming public support for abortion access, this amendment is an attempt to interfere with the FDA's independent process and restrict mifepristone access. Votes AGAINST the Good Amendments were votes in support of sexual and reproductive health. Good Amendment #85 failed by a vote of 278-152. Good Amendment #90 failed by a vote of 272-158. Good Amendment #91 failed by a vote of 272-159. Good Amendment #92 failed by a vote of 273-156. Good Amendment #93 failed by a vote of 270-161. Good Amendment #94 failed by a vote of 271-160. Good Amendment #95 failed by a vote of 267-163.</p>	N	
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Failed	<p>November 8, 2023, Harshbarger of Virginia Amendment #63 to H. R. 4664, Roll Call Vote 635 On November 8, Rep. Diana Harshbarger (R-TN-01) offered an amendment to H. R. 4664, the Financial Services and General Government Appropriations Act for Fiscal Year 2024 to block funding for the White House Gender Policy Council. Established in 2021 by executive order, the White House Gender Policy Council is charged with advancing gender equity and equality across federal programs, managing a comprehensive effort that requires actions from various agencies. This includes combatting systemic biases and discrimination and supporting women's human rights; increasing economic security and opportunity; increasing access to comprehensive health care, addressing health disparities, and promoting sexual and reproductive health and rights; preventing and responding to all forms of gender-based violence; and much more. Following the establishment of the Gender Policy Council, the Biden-Harris administration released the first-ever national strategy to advance gender equity and equality in the U.S. and around the world. The strategy names a commitment to defending and promoting access to sexual and reproductive health and rights both at home and abroad as part of a comprehensive approach to improving the lives of all people. The Gender Policy Council has also played a key role in executing the Biden-Harris administration's whole-of-government response to the Dobbs decision. A vote AGAINST the Harshbarger Amendment was a vote in support of sexual and reproductive health. The Harshbarger Amendment failed by a vote of 211-205.</p>	N	
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Failed	<p>November 15, 2023, Miller of Illinois Amendment #21 to H. R. 5894, Roll Call Vote 673 On November 15, Rep. Mary Miller (R-IL-15) offered an amendment to H. R. 5894, the Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act for Fiscal Year 2024, to prohibit funding for the Office of Population Affairs (OPA), which administers the Title X Family Planning Program and Teen Pregnancy Prevention (TPP) Program. The underlying Labor-HHS bill already attempts to defund both of these critical programs, and this amendment would have gone even further by attacking the agency that operates them. Title X helps ensure that every person — regardless of their income, or whether they have health insurance — can access basic, preventive reproductive health care, such as birth control, cancer screenings, STI testing and treatment, and wellness exams. In 2022, Title X served nearly 2.6 million people, nearly two-thirds of whom lived at or under the federal poverty level and nearly one-third of whom lacked health insurance. The Teen Pregnancy Prevention Program (TPPP) supports young people’s access to medically accurate and age-appropriate sexual health information needed to make safe and healthy decisions. Since FY10, TPPP has supported community-driven, evidence-based or informed, medically accurate, and age-appropriate approaches that involve parents, educators, and providers in supporting the healthy development of young people. A vote AGAINST the Miller Amendment was a vote in support of sexual and reproductive health. The Miller Amendment failed by a vote of 224-204.</p>	N	
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Passed	<p>January 18, 2024, H.R. 6918, Roll Call Vote 17</p> <p>On January 18, 2024, leading up to what would've been the 51st anniversary of the Roe v. Wade decision, lawmakers passed two thinly veiled anti-abortion bills in the House. H.R. 6918, the deceptively named "Supporting Pregnant and Parenting Women and Families Act" attempts to block an important Department of Health and Human Services proposed rule to strengthen the Temporary Assistance for Needy Families (TANF) program. The TANF program is intended to give direct financial assistance to help families with children pay for essential needs, including rent, food, and childcare. Instead, H.R. 6918 is aimed at funding so-called Crisis Pregnancy Centers or CPCs, which use misinformation and propaganda to promote anti-abortion counseling. These counseling centers claim to help pregnant people, but instead attempt to coerce, deceive, and manipulate them into carrying pregnancies to term. These centers are known to provide pregnant people with biased and inaccurate information and purposely mislead them into thinking that they provide health care. Rather than offering unbiased, medically accurate information on the risks and benefits of both pregnancy and abortion, CPCs often deliberately provide inaccurate information and materials that rely on debunked studies to misrepresent abortion safety and dissuade pregnant people from obtaining an abortion. They have also been known to use tactics to delay a person's access to qualified medical professionals, knowing that pregnancy prevention services and pregnancy-related care are time sensitive. Essential TANF funds should not be used to support biased, deceptive, or misleading programs that harm people instead of helping needy families. A vote AGAINST H.R. 6918 was a vote in support of sexual and reproductive health. The bill passed the House by a vote of 214-208.</p>	N	
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Passed	<p>January 18, 2024, H.R. 6914, Roll Call Vote 19</p> <p>On January 18, 2024, leading up to what would've been the 51st anniversary of the Roe v. Wade decision, lawmakers passed two thinly veiled anti-abortion bills in the House. H.R. 6914, the deceptively named "Pregnant Students' Rights Act," claims to provide information to pregnant students about their rights. However, instead of prioritizing the needs of pregnant and parenting students, the bill advances anti-abortion rhetoric and further stigmatizes people for their pregnancy outcomes. Pregnant and parenting students deserve access to comprehensive information and resources they need to control their health and future — including whether to continue their pregnancy. Instead, H.R. 6914 only outlines information on students' rights to carry a pregnancy to term and take care of a child, while failing to provide necessary resources to support pregnant and parenting students. H.R. 6914 prioritizes anti-abortion rhetoric instead of containing meaningful supports that would strengthen existing Title IX protections and actually help pregnant and parenting students be able to remain enrolled and meet their educational goals. A vote AGAINST H.R. 6914 was a vote in support of sexual and reproductive health. The bill passed the House by a vote of 212-207.</p>	N	
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