

EXHIBIT 6

**IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF COLUMBIA**

PRIESTS FOR LIFE, *et al.*,

Plaintiffs,

-v-

DEPARTMENT OF HEALTH AND HUMAN
SERVICES, *et al.*,

Defendants.

Case No. 1:13-cv-01261-EGS

**SUPPLEMENTAL DECLARATION
OF ROBERT J. MUISE**

I, Robert J. Muise, make this declaration pursuant to 28 U.S.C. § 1746 and based on my personal knowledge and/or verifiable information and belief.

1. I am an adult citizen of the United States and co-lead counsel for Plaintiffs in the above-captioned case.

2. Attached to this declaration as Exhibit A is true and correct copy of a news release from the U.S. Department of the Treasury dated July 2, 2013, in which the Obama administration announced “that it will provide an additional year before the ACA mandatory employer and insurer reporting requirement begins” and that it was “extending this transition relief to the employer shared responsibility payments.” Consequently, “[t]hese payments will not apply for 2014. Any employer shared responsibility payment will not apply until 2015.” This news release was posted on the official website of the U.S. Department of the Treasury and can be found here: <http://www.treasury.gov/connect/blog/pages/continuing-to-implement-the-aca-in-a-careful-thoughtful-manner-.aspx>. This website was last visited on October 30, 2013.

3. Attached to this declaration as Exhibit B is a true and correct copy of a “News Release” dated January 20, 2012, and titled, “A Statement by U.S. Department of Health and Human Services Secretary Kathleen Sebelius,” which was posted on the official website of the

U.S. Department of Health & Human Services and can be found here: <http://www.hhs.gov/news/press/2012pres/01/20120120a.html>. This website was last visited on October 28, 2013.

4. Attached to this declaration as Exhibit C is a true and correct copy of a CNS News report titled, "Sebelius: Decrease in Human Beings Will Cover Cost of Contraception Mandate." The news report, which also contains an embed video of the testimony of Secretary Sebelius before the House Energy and Commerce Subcommittee on Health, can be found here: <http://cnsnews.com/news/article/sebelius-decrease-human-beings-will-cover-cost-contraception-mandate>. This website was last visited on October 28, 2013.

5. Attached to this declaration as Exhibit D are two resolutions from the Lambeth Conference, which is an assembly of Anglican bishops. The first resolution is from the 1930 conference. During this conference, the Anglican Church announced that contraception would be permissible in some circumstances. A true and accurate copy of Resolution 15 from the 1930 conference is attached as part of Exhibit D and can be found here: <http://www.lambethconference.org/resolutions/1930/1930-15.cfm>. The second resolution is from the 1958 conference. During this conference, the Anglican Church affirmed that contraception was not morally impermissible. A true and accurate copy of Resolution 115 from the 1958 conference is attached as part of Exhibit D and can be found here: <http://www.lambethconference.org/resolutions/1958/1958-115.cfm>. This website was last visited on October 28, 2013. In short, unlike the Catholic Church, the Anglican Church does not hold that the use of contraception is intrinsically evil and, therefore, prohibited.

I declare (or certify, verify, or state) under penalty of perjury that the foregoing is true and correct.

Executed on the 30th day of October, 2013.

/s/ Robert J. Muise
Robert J. Muise, Esq.

EXHIBIT A

U.S. DEPARTMENT OF THE TREASURY

Treasury Notes

Continuing to Implement the ACA in a Careful, Thoughtful Manner

By: Mark J. Mazur 7/2/2013

Over the past several months, the Administration has been engaging in a dialogue with businesses - many of which already provide health coverage for their workers - about the new employer and insurer reporting requirements under the Affordable Care Act (ACA). We have heard concerns about the complexity of the requirements and the need for more time to implement them effectively. We recognize that the vast majority of businesses that will need to do this reporting already provide health insurance to their workers, and we want to make sure it is easy for others to do so. We have listened to your feedback. And we are taking action.

The Administration is announcing that it will provide an additional year before the ACA mandatory employer and insurer reporting requirements begin. This is designed to meet two goals. First, it will allow us to consider ways to simplify the new reporting requirements consistent with the law. Second, it will provide time to adapt health coverage and reporting systems while employers are moving toward making health coverage affordable and accessible for their employees. Within the next week, we will publish formal guidance describing this transition. Just like the Administration's effort to turn the initial 21-page application for health insurance into a three-page application, we are working hard to adapt and to be flexible about reporting requirements as we implement the law.

Here is some additional detail. The ACA includes information reporting (under section 6055) by insurers, self-insuring employers, and other parties that provide health coverage. It also requires information reporting (under section 6056) by certain employers with respect to the health coverage offered to their full-time employees. We expect to publish proposed rules implementing these provisions this summer, after a dialogue with stakeholders - including those responsible employers that already provide their full-time work force with coverage far exceeding the minimum employer shared responsibility requirements - in an effort to minimize the reporting, consistent with effective implementation of the law.

Once these rules have been issued, the Administration will work with employers, insurers, and other reporting entities to strongly encourage them to voluntarily implement this information reporting in 2014, in preparation for the full application of the provisions in 2015. Real-world testing of reporting systems in 2014 will contribute to a smoother transition to full implementation in 2015.

We recognize that this transition relief will make it impractical to determine which employers owe shared responsibility payments (under section 4980H) for 2014. Accordingly, we are extending this transition relief to the employer shared responsibility payments. These payments will not apply for 2014. Any employer shared responsibility payments will not apply until 2015.

During this 2014 transition period, we strongly encourage employers to maintain or expand health coverage. Also, our actions today do not affect employees' access to the premium tax credits available under the ACA (nor any other provision of the ACA).

Mark J. Mazur is the Assistant Secretary for Tax Policy at the U.S. Department of the Treasury.

Posted in: Tax Policy

EXHIBIT B

HHS Home > Newsroom

News Release

Newsroom
Speeches and Testimony

Reports

Freedom of Information Act (FOIA)

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FOR IMMEDIATE RELEASE
January 20, 2012

Contact: HHS Press Office
(202) 690-6343

A statement by U.S. Department of Health and Human Services Secretary Kathleen Sebelius

In August 2011, the Department of Health and Human Services issued an interim final rule that will require most health insurance plans to cover preventive services for women including recommended contraceptive services without charging a co-pay, co-insurance or a deductible. The rule allows certain non-profit religious employers that offer insurance to their employees the choice of whether or not to cover contraceptive services. Today the department is announcing that the final rule on preventive health services will ensure that women with health insurance coverage will have access to the full range of the Institute of Medicine's recommended preventive services, including all FDA -approved forms of contraception. Women will not have to forego these services because of expensive co-pays or deductibles, or because an insurance plan doesn't include contraceptive services. This rule is consistent with the laws in a majority of states which already require contraception coverage in health plans, and includes the exemption in the interim final rule allowing certain religious organizations not to provide contraception coverage. Beginning August 1, 2012, most new and renewed health plans will be required to cover these services without cost sharing for women across the country.

After evaluating comments, we have decided to add an additional element to the final rule. Nonprofit employers who, based on religious beliefs, do not currently provide contraceptive coverage in their insurance plan, will be provided an additional year, until August 1, 2013, to comply with the new law. Employers wishing to take advantage of the additional year must certify that they qualify for the delayed implementation. This additional year will allow these organizations more time and flexibility to adapt to this new rule. We intend to require employers that do not offer coverage of contraceptive services to provide notice to employees, which will also state that contraceptive services are available at sites such as community health centers, public clinics, and hospitals with income-based support. We will continue to work closely with religious groups during this transitional period to discuss their concerns.

Scientists have abundant evidence that birth control has significant health benefits for women and their families, is documented to significantly reduce health costs, and is the most commonly taken drug in America by young and middle-aged women. This rule will provide women with greater access to contraception by requiring coverage and by prohibiting cost sharing.

This decision was made after very careful consideration, including the important concerns some have raised about religious liberty. I believe this proposal strikes the appropriate balance between respecting religious freedom and increasing access to important preventive services. The administration remains fully committed to its partnerships with faith-based organizations, which promote healthy communities and serve the common good. And this final rule will have no impact on the protections that existing conscience laws and regulations give to health care providers.

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Note: All HHS news releases, fact sheets and other press materials are available at <http://www.hhs.gov/news>.

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Follow HHS Secretary Kathleen Sebelius on Twitter [@Sebelius](#).

Last revised: February 2, 2012

EXHIBIT C

Sebelius: Decrease in Human Beings Will Cover Cost of Contraception Mandate

March 1, 2012 - 5:30 PM

By [Fred Lucas](#)

[Subscribe to Fred Lucas RSS](#)

(CNSNews.com) – Health and Human Services Secretary Kathleen Sebelius told a House panel Thursday that a reduction in the number of human beings born in the United States will compensate employers and insurers for the cost of complying with the new HHS mandate that will require all health-care plans to cover sterilizations and all FDA-approved contraceptives, including those that cause abortions.

"The reduction in the number of pregnancies compensates for the cost of contraception," Sebelius said. She went on to say the estimated cost is "down not up."

Sebelius took questions from the House Energy and Commerce Subcommittee on Health about President Barack Obama's fiscal year 2013 budget proposal.



Health and Human Services Secretary Kathleen Sebelius said on Nov. 14, 2011 that \$1 billion in health care grants were a way of 'sparking' the U.S. economy.
(CNSNews.com/Penny Starr)

Embed »

Because the Catholic church teaches that sterilization, contraception or abortion are wrong and that Catholics must not be involved in them, the regulation forces Catholics--and members of other religious denominations that share those views--to act against the teachings of their faith. Numerous lawsuits have already been asserting that the rule violates the First Amendment's guarantee to the free exercise of religion. Many of the nation's Catholic bishops have published letters saying: "We cannot--we will not--comply with this unjust law."

Sebelius, however, insisted that the mandate "upholds religious liberty."

"The rule which we intend to promulgate in the near future around implementation will require insurance companies, not a religious employer, but the insurance company to provide coverage for contraceptives," Sebelius told the subcommittee.

The Catholic bishops have called for the regulation to be rescinded in its entirety, so that no employer, insurer or individual is forced to act against his or her conscience.

During the subcommittee hearing, Rep. Tim Murphy (R-Pa.) said that contraception provided by insurance companies to people employed by religious organizations under the future form of the rule Sebelius described would not be was not free.

"Who pays for it? There's no such thing as a free service," Murphy asked.

Sebelius responded that that is not the case with insurance.

"The reduction in the number of pregnancies compensates for cost of contraception," Sebelius answered.

Murphy expressed surprise by the answer.

“So you are saying, by not having babies born, we are going to save money on health care?” Murphy asked.

Sebelius replied, “Providing contraception is a critical preventive health benefit for women and for their children.”

Murphy again sought clarification.

“Not having babies born is a critical benefit. This is absolutely amazing to me. I yield back,” he said.

Sebelius responded, “Family planning is a critical health benefit in this country, according to the Institute of Medicine.”

Rep. Brett Guthrie (R-Ky.), a member of the subcommittee, said after the hearing that if mandating contraception saves money there shouldn't be a need for a mandate.

“Their argument is this: Health insurance companies will offer it for free because they make money. You reduce the number of people getting pregnant therefore you reduce the cost of pregnancy, or low birth weight pregnancies or other kind of pregnancies,” Guthrie told CNSNews.com.

“If you think about it, why don't health insurance companies provide it now if the argument is health insurance companies are going to make a lot of money? If the health insurance companies were really acting in their own best interest, they would be giving these pills out for free, if it really saved money,” Guthrie added.

Despite the controversy over whether the mandate is constitutional, Sebelius told Rep. Marsha Blackburn (R-Tenn.) during the hearing that the administration never sought a legal opinion about the regulation from the Department of Justice.

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EXHIBIT D

Resolutions from 1930

Resolution 15

The Life and Witness of the Christian Community - Marriage and Sex

Where there is clearly felt moral obligation to limit or avoid parenthood, the method must be decided on Christian principles. The primary and obvious method is complete abstinence from intercourse (as far as may be necessary) in a life of discipline and self-control lived in the power of the Holy Spirit. Nevertheless in those cases where there is such a clearly felt moral obligation to limit or avoid parenthood, and where there is a morally sound reason for avoiding complete abstinence, the Conference agrees that other methods may be used, provided that this is done in the light of the same Christian principles. The Conference records its strong condemnation of the use of any methods of conception control from motives of selfishness, luxury, or mere convenience.

Voting: For 193; Against 67.

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Resolutions from 1958

Resolution 115

The Family in Contemporary Society - Marriage

The Conference believes that the responsibility for deciding upon the number and frequency of children has been laid by God upon the consciences of parents everywhere; that this planning, in such ways as are mutually acceptable to husband and wife in Christian conscience, is a right and important factor in Christian family life and should be the result of positive choice before God. Such responsible parenthood, built on obedience to all the duties of marriage, requires a wise stewardship of the resources and abilities of the family as well as a thoughtful consideration of the varying population needs and problems of society and the claims of future generations.

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