

116TH CONGRESS 2D SESSION

H. R. 8013

To prohibit taxpayer-funded gender reassignment medical interventions, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

August 11, 2020

Mr. Lamalfa (for himself, Mr. Norman, Mr. Aderholt, Mr. Lamborn, Mr. Allen, Mr. King of Iowa, Mr. Steube, Mr. Babin, Mr. Flores, and Mr. Hice of Georgia) introduced the following bill; which was referred to the Committee on Energy and Commerce, and in addition to the Committees on the Judiciary, and Ways and Means, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To prohibit taxpayer-funded gender reassignment medical interventions, and for other purposes.

- 1 Be it enacted by the Senate and House of Representa-
- 2 tives of the United States of America in Congress assembled,
- 3 SECTION 1. SHORT TITLE; TABLE OF CONTENTS.
- 4 (a) Short Title.—This Act may be cited as the
- 5 "End Taxpayer Funding of Gender Experimentation Act
- 6 of 2020".
- 7 (b) Table of Contents.—The table of contents of
- 8 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—PROHIBITING FEDERALLY FUNDED GENDER REASSIGNMENT MEDICAL INTERVENTIONS

- Sec. 101. Prohibiting taxpayer-funded gender reassignment medical interventions.
- Sec. 102. Amendment to table of chapters.

TITLE II—APPLICATION UNDER THE AFFORDABLE CARE ACT

Sec. 201. Clarifying application of prohibition to premium credits and costsharing reductions under ACA.

1 TITLE I—PROHIBITING FEDER-

- 2 ALLY FUNDED GENDER REAS-
- 3 **SIGNMENT MEDICAL INTER-**
- 4 **VENTIONS**
- 5 SEC. 101. PROHIBITING TAXPAYER-FUNDED GENDER REAS-
- 6 SIGNMENT MEDICAL INTERVENTIONS.
- 7 Title 1, United States Code, is amended by adding
- 8 at the end the following new chapter:
- 9 "CHAPTER 4—PROHIBITING TAXPAYER-
- 10 FUNDED GENDER REASSIGNMENT

11 **MEDICAL INTERVENTIONS**

- "301. Prohibition on funding for gender reassignment medical interventions.
- "302. Prohibition on funding for health benefits plans that cover gender reassignment medical interventions.
- "303. Limitation on Federal facilities and employees.
- "304. Construction relating to separate coverage.
- "305. Construction relating to the use of non-Federal funds for health coverage.
- "306. Construction relating to complications arising from gender reassignment medical interventions.
- "307. Treatment of individuals born with medically verifiable disorder of sex development.
- "308. Gender reassignment medical intervention defined.

1	"§ 301. Prohibition on funding for gender reassign-
2	ment medical interventions
3	"No funds authorized or appropriated by Federal
4	law, and none of the funds in any trust fund to which
5	funds are authorized or appropriated by Federal law, shall
6	be expended for any gender reassignment medical inter-
7	vention.
8	"§ 302. Prohibition on funding for health benefits
9	plans that cover gender reassignment
10	medical interventions
11	"No funds authorized or appropriated by Federal
12	law, and none of the funds in any trust fund to which
13	funds are authorized or appropriated by Federal law, shall
14	be expended for health benefits coverage that includes cov-
15	erage of gender reassignment medical interventions.
16	"§ 303. Limitation on Federal facilities and employees
17	"No health care service furnished—
18	"(1) by or in a health care facility owned or op-
19	erated by the Federal Government; or
20	"(2) by any physician or other individual em-
21	ployed by the Federal Government to provide health
22	care services within the scope of the physician's or
23	individual's employment,
24	may include gender reassignment medical interventions.

1 "§ 304. Construction relating to separate coverage

- 2 "Nothing in this chapter shall be construed as pro-
- 3 hibiting any individual, entity, or State or locality from
- 4 purchasing separate coverage for gender reassignment
- 5 medical interventions or health benefits coverage that in-
- 6 cludes gender reassignment medical interventions so long
- 7 as such coverage is paid for entirely using only funds not
- 8 authorized or appropriated by Federal law and such cov-
- 9 erage shall not be purchased using matching funds re-
- 10 quired for a federally subsidized program, including a
- 11 State's or locality's contribution of Medicaid matching
- 12 funds.

13 "§ 305. Construction relating to the use of non-Fed-

14 eral funds for health coverage

- 15 "Nothing in this chapter shall be construed as re-
- 16 stricting the ability of any non-Federal health benefits cov-
- 17 erage provider from offering coverage for gender reassign-
- 18 ment medical interventions, or the ability of a State or
- 19 locality to contract separately with such a provider for
- 20 such coverage, so long as only funds not authorized or ap-
- 21 propriated by Federal law are used and such coverage
- 22 shall not be purchased using matching funds required for
- 23 a federally subsidized program, including a State's or lo-
- 24 cality's contribution of Medicaid matching funds.

1	" \S 306. Construction relating to complications arising
2	from gender reassignment medical inter-
3	ventions
4	"Nothing in this chapter shall be construed to apply
5	to the treatment of any infection, injury, disease, or dis-
6	order that has been caused by or exacerbated by the per-
7	formance of a gender reassignment medical intervention.
8	This rule of construction shall be applicable without re-
9	gard to whether the gender reassignment medical inter-
10	vention was performed in accord with Federal or State
11	law, and without regard to whether funding for the gender
12	reassignment medical intervention is permissible under
13	section 307.
14	"§ 307. Treatment of individuals born with medically
15	verifiable disorder of sex development
16	"The limitations established in sections 301, 302,
17	and 303 shall not apply with respect to the following indi-
18	viduals:
19	"(1) An individual with external biological sex
20	characteristics that are irresolvably ambiguous, such
21	as those born with 46 XX chromosomes with
22	virilization, 46 XY chromosomes with
23	undervirilization, or having both ovarian and testic-
24	ular tissue.
25	"(2) An individual with respect to whom a phy-
26	sician has determined through genetic or biochemical

1	testing that the individual does not have normal sex
2	chromosome structure, sex steroid hormone produc-
3	tion, or sex steroid hormone action for a biological
4	male or female.
5	"§ 308. Gender reassignment medical intervention de-
6	fined
7	"For purposes of this chapter, the term 'gender reas-
8	signment medical intervention' means—
9	"(1) performing a surgery that sterilizes an in-
10	dividual, including castration, vasectomy,
11	hysterectomy, oophorectomy, metoidioplasty,
12	penectomy, phalloplasty, and vaginoplasty, to change
13	the body of such individual to correspond to a sex
14	that is discordant with biological sex;
15	"(2) performing a mastectomy on an individual
16	for the purpose described in paragraph (1); and
17	"(3) administering or supplying to an individual
18	medications for the purpose described in paragraph
19	(1), including—
20	"(A) GnRH agonists or other puberty-
21	blocking drugs to stop or delay normal puberty;
22	"(B) testosterone or other androgens to bi-
23	ological females at doses that are
24	supraphysiologic to the female sex; and

1	"(C) estrogen to biological males at doses
2	that are supraphysiologic to the male sex.".
3	SEC. 102. AMENDMENT TO TABLE OF CHAPTERS.
4	The table of chapters for title 1, United States Code,
5	is amended by adding at the end the following new item:
	"4. Prohibiting taxpayer-funded gender reassignment medical interventions
6	TITLE II—APPLICATION UNDER
7	THE AFFORDABLE CARE ACT
8	SEC. 201. CLARIFYING APPLICATION OF PROHIBITION TO
9	PREMIUM CREDITS AND COST-SHARING RE-
10	DUCTIONS UNDER ACA.
11	(a) In General.—
12	(1) Disallowance of Refundable Credit
13	AND COST-SHARING REDUCTIONS FOR COVERAGE
14	UNDER QUALIFIED HEALTH PLAN WHICH PROVIDES
15	COVERAGE FOR GENDER REASSIGNMENT MEDICAL
16	INTERVENTIONS.—
17	(A) IN GENERAL.—Subparagraph (A) of
18	section 36B(c)(3) of the Internal Revenue Code
19	of 1986 is amended by inserting before the pe-
20	riod at the end the following: "or any health
21	plan that includes coverage for gender reassign-
22	ment medical interventions (other than any
23	gender reassignment medical intervention or

1	treatment described in section 306 or 307 of
2	title 1, United States Code)".
3	(B) Option to purchase or offer sep-
4	ARATE COVERAGE OR PLAN.—Paragraph (3) of
5	section 36B(c) of such Code is amended by
6	adding at the end the following new subpara-
7	graph:
8	"(C) Separate coverage or plan for
9	GENDER REASSIGNMENT MEDICAL INTERVEN-
10	TIONS ALLOWED.—
11	"(i) Option to purchase separate
12	COVERAGE OR PLAN.—Nothing in subpara-
13	graph (A) shall be construed as prohibiting
14	any individual from purchasing separate
15	coverage for gender reassignment medical
16	interventions described in such subpara-
17	graph, or a health plan that includes such
18	gender reassignment medical interventions,
19	so long as no credit is allowed under this
20	section with respect to the premiums for
21	such coverage or plan.
22	"(ii) Option to offer coverage or
23	PLAN.—Nothing in subparagraph (A) shall
24	restrict any non-Federal health insurance
25	issuer offering a health plan from offering

1	separate coverage for gender reassignment
2	medical interventions described in such
3	subparagraph, or a plan that includes such
4	gender reassignment medical interventions
5	so long as premiums for such separate cov-
6	erage or plan are not paid for with any
7	amount attributable to the credit allowed
8	under this section (or the amount of any
9	advance payment of the credit under sec-
10	tion 1412 of the Patient Protection and
11	Affordable Care Act).".
12	(2) DISALLOWANCE OF SMALL EMPLOYER
13	HEALTH INSURANCE EXPENSE CREDIT FOR PLAN
14	WHICH INCLUDES COVERAGE FOR GENDER REAS-
15	SIGNMENT MEDICAL INTERVENTIONS.—Subsection
16	(h) of section 45R of the Internal Revenue Code of
17	1986 is amended—
18	(A) by striking "Any term" and inserting
19	the following:
20	"(1) IN GENERAL.—Any term"; and
21	(B) by adding at the end the following new
22	paragraph:
23	"(2) Exclusion of health plans including
24	COVERAGE FOR GENDER REASSIGNMENT MEDICAL
25	INTERVENTIONS —

1	"(A) IN GENERAL.—The term 'qualified
2	health plan' does not include any health plan
3	that includes coverage for gender reassignment
4	medical interventions (other than any gender
5	reassignment medical intervention or treatment
6	described in section 306 or 307 of title 1,
7	United States Code).
8	"(B) SEPARATE COVERAGE OR PLAN FOR
9	GENDER REASSIGNMENT MEDICAL INTERVEN-
10	TIONS ALLOWED.—
11	"(i) Option to purchase separate
12	COVERAGE OR PLAN.—Nothing in subpara-
13	graph (A) shall be construed as prohibiting
14	any employer from purchasing for its em-
15	ployees separate coverage for gender reas-
16	signment medical interventions described
17	in such subparagraph, or a health plan
18	that includes such gender reassignment
19	medical interventions, so long as no credit
20	is allowed under this section with respect
21	to the employer contributions for such cov-
22	erage or plan.
23	"(ii) Option to offer coverage or
24	PLAN.—Nothing in subparagraph (A) shall
25	restrict any non-Federal health insurance

1 issuer offering a health plan from offering 2 separate coverage for gender reassignment medical interventions described in such 3 subparagraph, or a plan that includes such gender reassignment medical interventions, 6 so long as such separate coverage or plan 7 is not paid for with any employer contribu-8 tion eligible for the credit allowed under 9 this section.".

- 10 (b) APPLICATION TO MULTI-STATE PLANS.—Section
 11 1334(a) of Public Law 111–148 (42 U.S.C. 18054(a)) is
 12 amended by adding at the end the following new para13 graph:
- 14 "(7) Coverage consistent with federal 15 POLICY REGARDING GENDER REASSIGNMENT MED-16 ICAL INTERVENTIONS.—In entering into contracts 17 under this subsection, the Director shall ensure that 18 no multi-State qualified health plan offered in an 19 Exchange provides health benefits coverage for 20 which the expenditure of Federal funds is prohibited 21 under chapter 4 of title 1, United States Code.".
- 22 (c) EFFECTIVE DATE.—The amendments made by 23 subsection (a) shall apply to taxable years ending after 24 December 31, 2019, but only with respect to plan years 25 beginning after such date, and the amendment made by

- 1 subsection (b) shall apply to plan years beginning after
- 2 such date.

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