TRANS HEALTH CARE IN FLORIDA:

WHAT YOU NEED TO KNOW

WHAT IS GENDER-AFFIRMING CARE?

- According to the Department of Health and Human Services: "Gender-affirming care is a supportive form of healthcare. It consists of an array of services that may include medical, surgical, mental health, and non-medical services for transgender and nonbinary people. For transgender and nonbinary children and adolescents, early gender-affirming care is crucial to overall health and well-being as it allows the child or adolescent to focus on social transitions and can increase their confidence while navigating the healthcare system."
- Gender-affirming care is a very individualized form of health care, and will look different for each person depending on their age, gender, and other physical and mental health needs. For prepubescent transgender youth, this care typically involves a "social transition" (changing clothes, hair, name, etc) and never involves surgery or other irreversible medical treatments. During or after puberty, many transgender youths may receive reversible puberty blockers, hormone replacement therapy, or other medical interventions as overseen and prescribed by medical professionals. Some older transgender adolescents can and do access surgical care on a case-by-case basis as recommended by the World Professional Association of Transgender Health.
- Gender-affirming care is widely recognized as the only evidence-based approach to addressing the health care needs of transgender youth, including severe mental health risks. For more:
- Health and Human Services: <u>Gender-affirming Care and Young People</u>
- The Endocrine Society: <u>Transgender and Gender Diverse</u> <u>Adolescents</u>
- American Academy of Pediatrics: <u>Ensuring Comprehensive</u> <u>Care and Support for Transgender and Gender-Diverse</u> <u>Youth & Adolescents</u>
- The medical community has already been very critical of Florida's effort to ban gender-affirming care. Medical and legal experts have condemned the proposed regulations as "thoroughly flawed and lacking scientific weight" and researchers cited by the Surgeon General to make the case for these restrictions accuse him of misrepresenting their work and condemn the restrictions he proposes.
- In an open letter published in the Tampa Bay Times, 300
 Floridian health care providers who work with transgender youth <u>condemned the proposed regulations</u>, writing the Governor and Surgeon General "misrepresents the weight of the evidence, does not allow for personalized patient and family-centered care, and would, if followed, lead to higher rates of youth depression and suicidality."
- Similar bans signed into law in Arkansas and Alabama are both blocked by federal courts.



WHAT DID THE BOARD OF MEDICINE VOTE TO DO?

- The Florida state Board of Medicine (BOM) is responsible for setting standards of care for all medical providers in Florida, and for enforcing their compliance with licensing and disciplinary review. Changing the standards of care requires (at a minimum) a formal rulemaking process under the Florida Administrative Procedure Act. On Friday, August 5, the Board officially began the formal rulemaking process, which lasts up to 180 days and usually requires at least 90 days to complete, to consider proposed regulations restricted medically-necessary care for transgender youth.
- The proposed changes to state standards of care would do two things:
 - 1. Threaten medical providers with penalties or fines if they provide genderaffirming care to anyone under the age of 18 as treatment for gender dysphoria.
 - 2. Impose waiting periods on adults seeking gender-affirming care, and require adults to sign an informed consent form that includes disinformation about the risks of gender-affirming care.



TRANS HEALTH CARE IN FLORIDA: WHAT YOU NEED TO KNOW (CONTINUED)

WHAT HAPPENS NEXT?

- The BOM vote was triggered by a "petition to initiate rulemaking" submitted to the BOM by the Department of Health (DOH) a the behest of Surgeon General Joseph Ladapo, who heads the DOH, and presumably at the direction of Gov. Ron DeSantis, who is pushing all of this to further his extremist political agenda. Now that the BOM has initiated rulemaking, they will work internally to draft a proposed regulation, submit it for formal review, comments, and public hearing, and eventually publish a final rule. Once they publish their proposed regulation, they must accept public comments for 21 days, then hold a public hearing. After the hearing, they have to wait at least 14 days to publish the final version of the regulation (longer if there are big changes on problems, though I would expect not given the political alignment in the executive branch to get this done). Once the final regulation is published, it goes into effect 20 days later.
- If the BOM does in fact make a final regulation to ban gender-affirming care for minors (or something even more expansive), it would likely go into effect in October or November of 2022.

WHAT IMPACT WOULD THIS REGULATION HAVE ON PROVIDERS OF GENDER-AFFIRMING CARE IN FLORIDA?

- If a final regulation is adopted and goes into effect (and is not enjoined by a court), that would mean any providers who continue to provide this care to minors would be subject to professional discipline by the BOM.
 Disciplinary proceedings can be initiated by public complaint and also by the Surgeon General's staff directly. That discipline could lead to suspensions or revocations of medical licenses.
- Most likely, that would mean all providers would voluntarily stop providing such care, health care insurance plans would proactively stop covering it, and malpractice insurers would impose higher premiums or drop coverage for gender-affirming providers even if they don't treat minors or the population covered by the ban.

To learn more visit: www.aclufl.org/en/news/trans-health-care-florida-what-you-need-know

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WHAT CAN I DO TO STOP IT?

- The BOM vote was triggered by a "petition to initiate rulemaking" submitted to the BOM by the Department of Health (DOH) a the behest of Surgeon General Joseph Ladapo, who heads the DOH, and presumably at the direction of Gov. Ron DeSantis, who is pushing all of this to further his extremist political agenda. Now that the BOM has initiated rulemaking, they will work internally to draft a proposed regulation, submit it for formal review, comments, and public hearing, and eventually publish a final rule. Once they publish their proposed regulation, they must accept public comments for 21 days, then hold a public hearing. After the hearing, they have to wait at least 14 days to publish the final version of the regulation (longer if there are big changes on problems, though I would expect not given the political alignment in the executive branch to get this done). Once the final regulation is published, it goes into effect 20 days later.
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