



The Ohio Senate  
**Senate Government Oversight Committee**  
Senator Kristina Roegner, Chair

HOUSE BILL 68  
WRITTEN OPPOSITION TESTIMONY

Chairman Roegner, Vice-Chair Antani, Ranking Member Hicks-Hudson, and members of the Senate Government Oversight Committee, thank you for the opportunity to provide written testimony in opposition of House Bill 68 (“HB 68”), also called the *Save Adolescents from Experimentation Act* (or “SAFE Act”).

University Hospitals is a Cleveland-based super-regional health system; included on UH’s main campus is University Hospitals Rainbow Babies & Children’s Hospital (“UH Rainbow”). UH Rainbow is among the nation’s best children’s hospitals. Unfortunately, the SAFE Act is rooted in a host of misinformation; UH Rainbow appreciates this opportunity to help shed light on these misconceptions.

**I. Gender Affirming Care Involves A Multidisciplinary Approach With Parental Consent**

When providing gender affirming care to minors, parental rights are honored and, consistent with Ohio law, treatment begins only with the consent of the patients’ parents. There is a false narrative arguing that Children’s Hospitals are sterilizing children, pushing the agenda of gender affirming care onto our youth patients, and providing surgeries to any minor patient with gender dysphoria. These are very serious allegations that are made with no factual claim or evidence. On the contrary, UH Rainbow treats patients with a very conservative approach, only utilizing medication when absolutely medically necessary. The idea that a parent comes in and chooses to just change their young child’s gender is simply not happening. Seeking out and receiving this type of care is a long process involving the child, parents and a team of medical professionals.

To be perfectly clear, UH Rainbow does NOT perform genital surgeries on minors for the condition of gender dysphoria. All treatment that we offer is safe, age-appropriate, and requires parental consent. Every family and patient that comes to our clinics are supported by a mental health professional. UH Rainbow follows the guidelines developed and supported by the American Association of Clinical Endocrinologists, the Pediatric Endocrine Society, and the American Academy of Pediatricians. When a minor comes in for such issues, many medical interventions can be offered to them and their families. It is most important to note that the decision of whether and when to initiate gender affirmative treatment is personal and involves full disclosure and careful consideration of risks, benefits, and other factors unique to each patient and family.

Many protocols suggest that clinical assessment of youth who identify as transgender is ideally conducted on an ongoing basis in the setting of a collaborative, multidisciplinary approach with the continued input and consent of the patient’s parents. This means that, in addition to the patient and family, the care team would include the pediatric provider, a mental health provider (with expertise in caring for transgender youth), social and legal support representatives, and a medical provider experienced in gender care. This is a long, supportive process and quite the opposite of what supporters of this legislation are alleging.

## **II. Children’s Hospitals Commitment to Mental Health Keeps These Clinics Open**

Many supporters of the SAFE Act will argue that Children’s Hospitals are motivated to operate these clinics for financial reasons. This is FALSE coming from no factual claim or evidence. Behavioral health services, and really any navigation services, are either not covered by payers or are reimbursed at levels that do not come close to covering costs. UH Rainbow’s commitment to mental health is driven by our mission to save, protect, and enhance children’s lives.

## **III. Gender Affirming Care Relies On Evidence Based Treatment**

The SAFE Act would ban evidence-based medical treatment that is supported by medical professionals, including but not limited to the American Academy of Pediatricians, the Endocrine Society, the American Academy of Child and Adolescent Psychiatry, and the American Psychiatric Association. For gender diverse children, standards of care and accepted medically necessary services that affirm gender or treat gender dysphoria may include mental health counseling, non-medical social transition, and/or gender-affirming hormone therapy. Every major medical association in the United States recognizes the medical necessity of transition-related care for improving the physical and mental health of transgender people<sup>1</sup>.

## **IV. The Power Of Medical Decisions Belong Within The Patient-Physician Relationship**

The SAFE Act would take control away from parents in consultation with medical professionals, and would harm the mental well-being of transgender youth. ***Decisions about medical care belong within the sanctity of the patient-physician relationship.*** As with all medical interventions, physicians are guided by their ethical duty to act in the best interest of their patients and must shape their recommendations about specific interventions and the timing of those interventions to each patient and their own unique circumstances. We believe it is inappropriate and harmful for any state to legislatively dictate that certain transition-related services are never appropriate and limit the range of options physicians and families may consider when making decisions for pediatric patients. As has happened in other states that have passed laws similar to HB68, there is a concerning risk that providers dedicated to following evidence-based practice to treat complex medical issues for children and adolescents may leave the state, thus harming not only the children seeking care for gender issues, but also harming children seeking care for other complex issues such as disordered eating and chronic pain.

## **V. Conclusion**

UH Rainbow believes that HB 68 is a dangerous intrusion into the practice of medicine and if passed, this creates a dangerous precedent for new standards of legislative interference involving physicians and their patients. We strongly urge this Committee to oppose this troubling legislation. Thank you Chairman Roegner, Vice-Chair Antani, Ranking Member Hicks-Hudson, and members of the Senate Government Oversight Committee for this opportunity to provide feedback on HB 68.

Respectfully submitted,

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<sup>1</sup> <https://www.ama-assn.org/press-center/press-releases/ama-states-stop-interfering-health-care-transgender-children>