## As Introduced

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**Representative Click** 

Cosponsors: Representatives Barhorst, Bird, Creech, Claggett, Cutrona, Dean, Demetriou, Edwards, Ferguson, Fowler Arthur, Gross, Hall, Holmes, Hoops, John, Johnson, Jordan, Kick, King, Klopfenstein, Lampton, Lear, Manchester, McClain, Merrin, Miller, K., Miller, M., Plummer, Patton, Powell, Robb Blasdel, Stein, Stewart, Stoltzfus, Swearingen, Wiggam, Williams, Willis, Young, T.

## A BILL

Τc	o enact sections 3109.054, 3129.01, 3129.02,	1
	3129.03, 3129.04, 3129.05, 3129.06, and 3129.07	2
	of the Revised Code regarding gender transition	3
	services for minors and to name this act the	4
	Ohio Saving Adolescents from Experimentation	5
	(SAFE) Act.	6

## BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3109.054, 3129.01, 3129.02,	7
3129.03, 3129.04, 3129.05, 3129.06, and 3129.07 of the Revised	8
Code be enacted to read as follows:	9
Sec. 3109.054. When allocating parental rights and	10
responsibilities or parenting time, a court shall not consider a	11
parent's decision to do any of the following:	12
(A) Refer to and raise the child in a manner consistent with the child's biological sex;	13 14
(B) Decline to consent to the child receiving gender_	15

transition services as defined in section 3129.01 of the Revised 16 17 Code; (C) Decline to consent to the child receiving counseling 18 or other mental health services for the purpose of affirming the 19 child's perception of the child's gender or sex, if the child's 20 perception is inconsistent with the child's biological sex. 21 Sec. 3129.01. As used in this chapter: 2.2 (A) "Biological sex," "birth sex," and "sex" mean the 23 biological indication of male and female, including sex 24 chromosomes, naturally occurring sex hormones, gonads, and 25 nonambiquous internal and external genitalia present at birth, 26 without regard to an individual's psychological, chosen, or 27 subjective experience of gender. 28 (B) "Cross-sex hormone" means testosterone, estrogen, or 29 progesterone given to a minor individual in an amount greater 30 than would normally be produced endogenously in a healthy 31 individual of the minor individual's age and sex. 32 (C) "Gender" means the psychological, behavioral, social, 33 and cultural aspects of being male or female. 34 (D) "Gender reassignment surgery" means any surgery 35 performed for the purpose of assisting an individual with gender 36 transition that seeks to surgically alter or remove healthy 37 physical or anatomical characteristics or features that are 38 typical for the individual's biological sex, in order to instill 39 or create physiological or anatomical characteristics that 40 resemble a sex different from the individual's birth sex, 41 including genital or non-genital gender reassignment surgery. 42 (E) "Gender-related condition" means any condition where 43 an individual feels an incongruence between the individual's 44

gender identity and biological sex. "Gender-related condition" 45 includes gender dysphoria. 46 (F) "Gender transition" means the process in which an 47 individual goes from identifying with and living as a gender 48 that corresponds to his or her biological sex to identifying 49 with and living as a gender different from his or her biological 50 sex, including social, legal, or physical changes. 51 (G) "Gender transition services" means any medical or 52 surgical service (including physician services, inpatient and 53 outpatient hospital services, or prescription drugs or hormones) 54 provided for the purpose of assisting an individual with gender 55 transition that seeks to alter or remove physical or anatomical 56 characteristics or features that are typical for the 57 individual's biological sex, or to instill or create 58 physiological or anatomical characteristics that resemble a sex 59 different from the individual's birth sex, including medical 60 services that provide puberty blocking drugs, cross-sex 61 hormones, or other mechanisms to promote the development of 62 feminizing or masculinizing features in the opposite sex, or 63 genital or non-genital gender reassignment surgery. 64 (H) "Genital gender reassignment surgery" means surgery 65 performed for the purpose of assisting an individual with gender 66 transition and includes both of the following: 67 (1) Surgeries that sterilize, such as castration, 68 vasectomy, hysterectomy, oophorectomy, orchiectomy, and 69 penectomy; 70 (2) Surgeries that artificially construct tissue with the 71 appearance of genitalia that differs from the individual's 72

biological sex, such as metoidiplasty, phalloplasty, and

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vaginoplasty.	
(I) "Health benefit plan" has the same meaning as in	75
section 3922.01 of the Revised Code.	76
(J) "Mental health professional" means all of the	77
following:	78
(1) Either of the following advanced practice registered	79
nurses who holds a current, valid license issued under Chapter	80
4723. of the Revised Code that authorizes the practice of	81
nursing as an advanced practice registered nurse:	82
(a) A clinical nurse specialist who is certified as a	83
psychiatric-mental health CNS by the American nurses	84
credentialing center;	85
(b) A certified nurse practitioner who is certified as a	86
psychiatric-mental health NP by the American nurses	87
credentialing center.	88
(2) A physician specializing in psychiatry;	89
(3) A psychologist, school psychologist, or independent	90
school psychologist licensed under Chapter 4732. of the Revised	91
Code or under rules adopted in accordance with sections 3301.07	92
and 3319.22 of the Revised Code;	93
(4) An independent social worker, social worker, licensed	94
professional clinical counselor, licensed professional	95
counselor, independent marriage and family therapist, or	96
marriage and family therapist licensed under Chapter 4757. of	97
the Revised Code.	98
<u>(K) "Minor individual" means an individual under eighteen</u>	99
years of age.	100

<u>(L) "Non-genital gender reassignment surgery" means</u>	101
surgery performed for the purpose of assisting an individual	102
with gender transition such as augmentation mammoplasty, facial	103
feminization surgery, liposuction, lipofilling, voice surgery,	104
thyroid cartilage reduction, gluteal augmentation, pectoral	105
implants, or other aesthetic procedures.	106
(M) "Physician" means an individual authorized under	107
Chapter 4731. of the Revised Code to practice medicine and	108
surgery or osteopathic medicine and surgery.	109
(N) "Puberty-blocking drugs" means Gonadotropin-releasing	110
hormone analogs or other synthetic drugs used to stop	111
luteinizing hormone and follicle stimulating hormone secretion,	112
synthetic antiandrogen drugs used to block the androgen	113
receptor, or any drug to delay or suppress normal puberty.	114
Sec. 3129.02. A physician shall not knowingly do any of	115
the following:	116
(A) Perform gender reassignment surgery on a minor	117
individual;	118
(B) Prescribe a cross-sex hormone or puberty-blocking drug	119
for a minor individual for the purpose of assisting the minor	120
individual with gender transition;	121
(C) Engage in conduct that aids or abets in the practices	122
described in division (A) or (B) of this section, provided that	123
this section may not be construed to impose liability on any	124
speech protected by federal or state law.	125
Sec. 3129.03. (A) No mental health professional shall	126
diagnose or treat a minor individual who presents for the	127
diagnosis or treatment of a gender-related condition without	
diagnosis of cleatment of a gender related condition without	128

(1) Notwithstanding section 5122.04 of the Revised Code,	130
obtaining the consent of the minor individual's residential	131
parent and legal custodian or the minor individual's guardian;	132
(2) Screening the minor individual for both of the	133
<u>following:</u>	134
(a) Other comorbidities that may be influencing the minor	135
individual's gender-related condition, including depression,	136
anxiety, attention deficit hyperactivity disorder, autism	137
spectrum disorder, and other mental health conditions;	138
(b) Physical, sexual, mental, and emotional abuse and	139
other traumas.	140
(B) No political subdivision may prohibit the use of	141
watchful waiting, treatment and therapies similar to those	142
provided for the treatment of body dysmorphia and eating	143
disorders, or other models of care that assist minor individuals	144
experiencing a gender-related condition in reconciling their	145
gender identity with their biological sex.	146
Sec. 3129.04. This chapter does not prohibit a physician	147
from treating, including by performing surgery on or prescribing	148
drugs or hormones for, a minor individual who meets any of the	149
following:	150
(A) Was born with a medically verifiable disorder of sex	151
development, including an individual with external biological	152
sex characteristics that are irresolvably ambiguous, such an as	153
individual born with forty-six XX chromosomes with virilization,	154
forty-six XY chromosomes with undervirilization, or having both	155
ovarian and testicular tissue;	156
(B) Received a diagnosis of a disorder of sexual	157
development, in which a physician has determined through genetic	158

or biochemical testing that the individual does not have normal	159
sex chromosome structure, sex steroid hormone production, or sex	160
steroid hormone action for a biological male or biological	161
<pre>female;</pre>	162
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(C) Needs treatment for any infection, injury, disease, or	163
disorder that has been caused or exacerbated by the performance	164
of gender transition services, whether or not the services were	165
performed in accordance with state or federal law.	166
Sec. 3129.05. (A) Any violation of section 3129.02,	167
section 3129.03, or section 3129.06 of the Revised Code shall be	168
considered unprofessional conduct and subject to discipline by	169
the applicable professional licensing board.	170
(B) An individual may bring a claim for a violation of	171
this chapter not later than two years after the date the cause	172
of action accrues. A minor individual may bring an action before	173
reaching eighteen years of age through a parent or guardian, and	174
may bring an action in the minor individual's own name upon	175
reaching eighteen years of age at any time from that date until	176
twenty years after that date. Nothing in this chapter shall be	177
construed to preempt any other private cause of action arising	178
under the common law of this state.	179
(C) The attorney general may bring an action to enforce	180
compliance with section 3129.02 or 3129.03 of the Revised Code.	181
Nothing in this chapter shall be construed to deny, impair, or	182
otherwise affect any right or authority of the attorney general,	183
the state, or any agency, officer, or employee of the state,	184
acting under any provision of the Revised Code, to institute or	185
intervene in any proceeding.	186
Sec. 3129.06. (A) Each mental health professional who	187

diagnoses or treats a minor individual for a gender-related	188
condition shall report to the department of health not later	189
than the first day of March of each year all of the following	190
information:	191
(1) The number of minor individuals the mental health	192
professional diagnosed or treated for a gender-related condition	193
<u>in the previous year;</u>	194
(2) The biological sex of the minor individuals the mental	195
health professional diagnosed or treated for a gender-related	196
condition in the previous year;	197
(3) The age at which the minor individual's diagnosis or	198
treatment for a gender-related condition began;	199
(4) The number of minor individuals diagnosed or treated	200
for a gender-related condition who also presented with any of	201
the comorbidities, abuse, or other trauma described in division	202
(A) of section 3129.03 of the Revised Code;	203
(5) The number of minor individuals who resumed	204
identification with their biological sex;	205
(6) The number of minor individuals the mental health	206
professional previously diagnosed or treated for a gender-	207
related condition who have not been treated by the mental health	208
professional for six months or more and who were not included in	209
<u>a previous report;</u>	210
(7) Any other information required by the department by	211
<u>rule.</u>	212
(B) In reporting the information required by this section,	213
both of the following apply:	214
(1) Where appropriate, the mental health professional	215

shall organize the previous year's information by month.	216
(2) The mental health professional shall not report	217
information that identifies or would tend to identify any	218
specific individual.	219
(C) Not later than three months after the annual deadline	220
described in division (A) of this section, the department of	221
health shall compile that information in a report to the general	222
assembly. The department shall submit the report in accordance	223
with division (B) of section 101.68 of the Revised Code.	224
(D) The director of health may adopt rules as necessary to	225
implement this section, including by adding other information to	226
be reported in accordance with division (A) of this section. Any	227
such rules shall be adopted pursuant to section 111.15 of the	228
Revised Code, but the requirement in division (C) of this	229
section is not contingent on the adoption of any such rules.	230
Notwithstanding any provision of section 121.95 of the Revised	231
Code to the contrary, a regulatory restriction contained in a	232
rule adopted under this section is not subject to sections	233
121.95 to 121.953 of the Revised Code.	234
Sec. 3129.07. (A) Medical assistance provided under the	235
medicaid program shall not include coverage for gender	236
transition services for minor individuals.	237
(B) This section does not apply to any of the following:	238
(1) The circumstances described in section 3129.04 of the	239
Revised Code;	240
(2) Mental health services provided for a gender-related	241
<u>condition;</u>	242
(3) Any services that are not gender transition services.	243

Section 2. The General Assembly hereby finds and declares all of the following: 245 (A) This state has a compelling government interest in 246 protecting the health and safety of its citizens, especially 247 vulnerable children. 248 (B) Only a tiny percentage of the American population 249 experiences distress at identifying with their biological sex. 250 According to the American Psychiatric Association, prevalence 251 ranges from 0.005 to 0.014 per cent for natal adult males and 252 from 0.002 to 0.003 per cent for natal females. 253 (C) Studies consistently demonstrate that the vast 254 majority of children who are gender nonconforming or experience 255 distress at identifying with their biological sex come to 256

identify with their biological sex in adolescence or adulthood, 257 thereby rendering most medical health care interventions 258 259 unnecessary.

(D) Scientific studies show that individuals struggling 260 with distress at identifying with their biological sex often 261 have already experienced psychopathology, which indicates these 262 individuals should be encouraged to seek mental health care 263 services before undertaking any hormonal or surgical 264 intervention. 265

(E) Suicide rates, psychiatric morbidities, and mortality rates remain markedly elevated above the background population after inpatient gender reassignment surgery has been performed.

(F) Some health care providers are prescribing puberty-269 blocking drugs in order to delay the onset or progression of 270 normally timed puberty in children who experience distress at 271 identifying with their biological sex. This is being done 272

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despite the lack of any long-term longitudinal studies273evaluating the risks and benefits of using these drugs for the274treatment of such distress or gender transition.275

(G) Health care providers are also prescribing cross-sex 276 hormones for children who experience distress at identifying 277 with their biological sex, despite the fact that no randomized 278 clinical trials have been conducted on the efficacy or safety of 279 the use of cross-sex hormones in adults or children for the 280 purpose of treating such distress or gender transition. 281

(H) The use of cross-sex hormones comes with the following 282serious known risks: 283

(1) For biological females, erythrocytosis, severe liverdysfunction, coronary artery disease, cerebrovascular disease,hypertension, increased risk of breast and uterine cancers, andirreversible infertility;

(2) For biological males, thromboembolic disease,
cholelithiasis, coronary artery disease, macroprolactinoma,
cerebrovascular disease, hypertriglyceridemia, breast cancer,
and irreversible infertility.

(I) Genital and non-genital gender reassignment surgeries
 are generally not recommended for children, although evidence
 indicates referrals for children to have such surgeries are
 becoming more frequent.

(J) Genital gender reassignment surgery includes several
 irreversible invasive procedures for males and females and
 involves the following alterations of biologically normal and
 functional body parts:

(1) For biological males, surgery may involve genital300reconstruction including penectomy, orchiectomy, vaginoplasty,301

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clitoroplasty, and vulvoplasty.

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(2) For biological females, surgery may involve a
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hysterectomy or oophorectomy, reconstruction of the urethra,
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genital reconstruction including metoidioplasty or phalloplasty,
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vaginectomy, scrotoplasty, and implantation of erection or
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testicular prostheses.

(K) The complications, risks, and long-term care concerns308associated with genital gender reassignment surgery for both309males and females are numerous and complex.310

(L) Non-genital gender reassignment surgery includes
 various invasive procedures for males and females and also
 involves the alteration or removal of biologically normal and
 functional body parts:

(1) For biological males, procedures may include 315
augmentation mammoplasty, facial feminization surgery, 316
liposuction, lipofilling, voice surgery, thyroid cartilage 317
reduction, gluteal augmentation, hair reconstruction, and other 318
aesthetic procedures. 319

(2) For biological females, procedures may include
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subcutaneous mastectomy, voice surgery, liposuction,
11pofilling, pectoral implants, and other aesthetic procedures.
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(M) It is an accepted principle of economics and public
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 policy that when a service or product is subsidized or paid for,
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 demand for that service or product increases. Just between 2015
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 and 2016, gender reassignment surgeries increased by twenty per
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 cent.

(N) It is of grave concern to the General Assembly that
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 the medical community is allowing individuals who experience
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 distress at identifying with their biological sex to be subjects
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of irreversible and drastic non-genital gender reassignment 331 surgery and irreversible, permanently sterilizing genital gender 332 reassignment surgery, despite the lack of studies showing that 333 the benefits of such extreme interventions outweigh the risks. 334 (0) The risks of gender transition services far outweigh 335 any benefit at this stage of clinical study on these services. 336 Section 3. Section 1 of this act takes effect six months 337 after the effective date of this section. 338 Section 4. This act shall be known as the Ohio Saving 339 Adolescents from Experimentation (SAFE) Act. 340