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The Vermont State legislature is inconsistent in their pursuit of health care choice for individuals, free from government interference.

Last year, legislators claimed <u>Article 22</u>, the reproductive liberty amendment to the State Constitution, would keep government out of decision-making between patients and their doctors.

This year, <u>H.89</u>, which was passed in the House Judiciary Committee on Tuesday, February 7, proposes to codify gender-affirming care as the only type of care for minors experiencing gender dysphoria and incongruence that will be shielded from "abusive litigation" from other states. Page 4 of H.89 read as follows:

12 Sec. 1. 1 V.S.A. § 150 is added to read:

13 § 150. LEGALLY PROTECTED HEALTH CARE ACTIVITY

14 (a) "Gender-affirming health care services" means all supplies, care, and 15 services of a medical, behavioral health, mental health, surgical, psychiatric,

16 therapeutic, diagnostic, preventative, rehabilitative, or supportive nature 17 relating to the treatment of gender dysphoria. Gender-affirming health care 18 services does not include conversion therapy as defined by 18 V.S.A. § 8351.

Act 35, codified as 18VSA8351, detailed restrictions for all mental health providers, resulting in an exclusive gender-affirming standard in Vermont.

While approaches for treating youth experiencing gender-dysphoria and incongruence has evolved over the past several years, as acknowledged by the World Professional Association for Transgender Health (WPATH) the Vermont State Legislature remains locked in the past, relying on outdated American Academy of Pediatrics Standards of Care from 2018, which puts minors, especially adolescent girls, at risk of being rushed into life-altering hormone treatments that they might later regret, as did detransitioner Chloe Cole, who

is "seeking damages [against Kaiser Permanente] based on the evidence of malice, oppression, and fraud".

House Judiciary members, with one dissenting vote, passed the archaic measure with self-congratulating tears and claims of being "leaders" in protecting gender-affirming care, despite evidence-based witness testimony highlighting advancements in research regarding gender-affirming care, and testimony on how the language of H.89 would usurp parental rights and leave minors unprotected.

H.89 passed on the House Floor on February 7, 2023, much to the detriment of youth, children, and families.

S.37, scheduled to be voted upon early this week in the Senate Committee on Health and Welfare, intends to shield exclusively gender-affirming care practitioners from increases in malpractice premiums and force insurance companies to fully cover the costs of exclusively gender-affirming care, further shielding a system of care that currently has lawsuits filed against institutions by persons who received exclusively gender-affirming care.