## LAUREN BOEBERT 3rd District, Colorado

NATURAL RESOURCES COMMITTEE
BUDGET COMMITTEE



# Congress of the United States

House of Representatives Washington, DC 20515-0603

April 12, 2022

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The Honorable Xavier Becerra U.S. Department of Health & Human Services 200 Independence Avenue, S.W. Washington, D.C. 20201

### Secretary Becerra:

Your recent testimony and appearance before the House Budget Committee on Biden's fiscal year 2023 Budget Proposal on April 6, 2022, left many questions unanswered. That is unacceptable. You, sir, are first and foremost a public servant and taxpayers deserve to know what their government is spending federal monies on. Instead of attempting to answer my questions in good faith, you danced around them, dodged them and refused to directly answer them. This might be cute in some circles, but the American people are not amused. Please provide answers to the following questions within 15 days.

#### Gender Transition of Minors

- 1. HHS recently published a document on "gender affirming care and young people."
  - O Do you believe puberty blockers can ever be medically appropriate treatments for gender dysphoria in pre-pubescent minors?
  - O Do you believe cross-sex hormones can ever be medically appropriate treatments for gender dysphoria in pre-pubescent minors?
  - o What medical evidence did U.S. Department of Health & Human Services (HHS) consider before issuing this document?
- 2. HHS recently funded a separate document titled "gender affirming care is trauma informed care."
  - o Do you believe it is ever appropriate to remove a child from parents who do not decide to provide gender affirming care as it is described in these two federally issued documents?

#### Section 1557

- 3. HHS has also <u>announced</u>, without going through the rulemaking public notice and comment process, that it will interpret prohibitions on sex discrimination in healthcare to include "sexual orientation and gender identity."
  - Assuming medical professionals are now going to be bound by your gender identity announcement, please list exactly how many gender identities there are in order to comply with your interpretation of the law?
  - O As I read your announcement, male or female are no longer to be understood as being based on biology, what then does it mean to be a man or a woman under your interpretation of the law?

- o Does HHS believe men can get pregnant?
- Please identify all gender identities currently recognized by HHS as being protected under the announcement.
- With respect to sex discrimination under the announcement, please explain HHS's position on:
  - What it means for a person to be a man or a woman.
  - How HHS will determine if a complainant or respondent is a man or a woman.
- 4. Does HHS believe the federal government has a compelling governmental interest in prohibiting sexual orientation and gender identity discrimination in federally funded health programs and activities?
- 5. Under your announcement, do HHS funded doctors have a right to decline to perform sterilizing sex-reassignment surgeries on minors if it violates their religious beliefs or conscience?
- 6. How much federal taxpayer funding is provided for mastectomies, penectomies, or hysterectomies for sex-reassignment purposes for minors with gender dysphoria?
- 7. How much federal taxpayer funding is provided for puberty blockers and cross-sex hormones for pre-pubescent kids with gender dysphoria?
- 8. Does HHS acknowledge that a doctor who is licensed to perform and regularly offers mastectomy services is now prohibited under the Section 1557 announcement from having a flat policy of never performing such mastectomies to treat gender dysphoria or for sex-reassignment purposes?
- 9. Does HHS acknowledge that a doctor who is licensed to perform and regularly offers hysterectomy services is now prohibited under the Section 1557 announcement from having a flat policy of never performing such hysterectomies to treat gender dysphoria or for sex-reassignment purposes?
- 10. Does HHS acknowledge that an insurance company covered by Section 1557 that regularly covers or pays for hysterectomy or mastectomy services is now prohibited under the Section 1557 announcement from having a flat policy of never covering or paying for such services to treat gender dysphoria or for sex-reassignment purposes?
- 11. Does this mandate supersede Section 1557 regulations finalized in 2020?
- 12. State all sources of legal authority for your announcement not being required to go through rulemaking public notice and comment process.

#### **Conscience Protections**

- 13. Last year, HHS removed the delegation of authority from the Office for Civil Rights to investigate and enforce the Religious Freedom Restoration Act (RFRA) and First Amendment violations.
  - Who at HHS is charged with ensuring HHS compliance with its obligations under RFRA?

- o How does a person or entity that believes HHS has violated RFRA file a complaint with HHS?
- o What steps is HHS taking to ensure that it does not violate RFRA in its rulemaking?
- o Are the career professionals of the Conscience and Religious Freedom Division being consulted on matters that impact conscience rights?
- Will you commit to seeking the advice of the career professionals in the Conscience and Religious Freedom Division on matters that impact conscience rights?
- 14. What protections will be provided to doctors, nurses, and all other medical providers who decline to provide experimental gender transition treatments, such as puberty blockers, cross-sex hormones, and sex-reassignment surgeries, because in their professional medical judgment they believe such treatments would always be harmful to their patients?
- 15. Your 1557 announcement stated that "OCR will comply with the Religious Freedom Restoration Act... and all other legal requirements." As you know, President Biden has announced his support of the Equality Act, which would prohibit RFRA from applying to Section 1557. Do you also support RFRA not applying to Section 1557?
- 16. Will you be issuing regulations providing clear and robust protections—as multiple courts have ruled are required—to doctors, nurses, medical professionals, and hospitals whose deeply held religious beliefs prevent them from providing experimental gender transition treatments such as puberty blockers, cross-sex hormones, and sex-reassignment surgeries?
- 17. Why is HHS proposing to rescind conscience regulations?

I look forward to your response to these important questions.

Sincerely,

Lauren Boebert Member of Congress