

119TH CONGRESS
1ST SESSION

S. _____

To provide a health savings account contribution to certain enrollees, to
reduce health care costs, and for other purposes.

IN THE SENATE OF THE UNITED STATES

Mr. CRAPO (for himself and Mr. CASSIDY) introduced the following bill; which
was read twice and referred to the Committee on _____

A BILL

To provide a health savings account contribution to certain
enrollees, to reduce health care costs, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE; TABLE OF CONTENTS.**

4 (a) **SHORT TITLE.**—This Act may be cited as the
5 “Health Care Freedom for Patients Act of 2025”.

6 (b) **TABLE OF CONTENTS.**—The table of contents for
7 this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—INCREASING CHOICE AND REDUCING PREMIUMS

Sec. 101. Exchange plan HSAs.

Sec. 102. Exchange plan HSA contribution program.

Sec. 103. Funding cost-sharing reduction payments.

Sec. 104. Allowing all individuals purchasing health insurance in the individual market the option to purchase a lower premium plan.

TITLE II—PUTTING AMERICAN PATIENTS FIRST

Sec. 201. Expansion FMAP for certain States providing payments for health care furnished to certain individuals.

Sec. 202. Prohibiting Federal financial participation under Medicaid and CHIP for individuals without verified citizenship, nationality, or satisfactory immigration status.

TITLE III—PREVENTING WASTEFUL SPENDING

Sec. 301. Prohibiting coverage of gender transition procedures as an essential health benefit under plans offered by Exchanges.

Sec. 302. Prohibiting Federal Medicaid and CHIP funding for certain items and services.

1 TITLE I—INCREASING CHOICE 2 AND REDUCING PREMIUMS

3 SEC. 101. EXCHANGE PLAN HSAS.

4 (a) IN GENERAL.—Section 223 of the Internal Rev-
5 enue Code of 1986 is amended by adding at the end the
6 following new subsection:

7 “(i) EXCHANGE PLAN HSAS.—For purposes of this
8 section—

9 “(1) IN GENERAL.—In the case of an Exchange
10 plan HSA, this section shall be applied as provided
11 in paragraphs (3) through (4).

12 “(2) EXCHANGE PLAN HSA.—The term ‘Ex-
13 change plan HSA’ means a health savings account
14 which is designated as an Exchange plan HSA upon
15 the establishment of such account.

16 “(3) NO ROLLOVERS PERMITTED.—Except in
17 the case of a contribution from one Exchange plan

1 HSA to another Exchange plan HSA, subsection
2 (f)(5) shall not apply.

3 “(4) RESTRICTION ON USE OF AMOUNTS.—For
4 purposes of subsection (d)(2)(A), amounts paid
5 for—

6 “(A) abortion, other than—

7 “(i) if the pregnancy is the result of
8 an act of rape or incest, or

9 “(ii) in the case where a woman suf-
10 fers from a physical disorder, physical in-
11 jury, or physical illness, including a life-en-
12 dangering physical condition caused by or
13 arising from the pregnancy itself, that
14 would, as certified by a physician, place
15 the woman in danger of death unless an
16 abortion is performed, or

17 “(B) any sex trait modification procedure
18 or service (as defined in section 156.400 of title
19 45, Code of Federal Regulations, as in effect on
20 the date of the enactment of this subsection),
21 shall not be treated as paid for medical care.”.

22 (b) TREATMENT OF GOVERNMENTAL CONTRIBU-
23 TIONS.—Paragraph (4) of section 223(b) of the Internal
24 Revenue Code of 1986 is amended by striking “and” at
25 the end of subparagraph (B), by striking the period at

1 the end of subparagraph (C) and inserting “, and”, and
2 by inserting after subparagraph (C) the following new sub-
3 paragraph:

4 “(D) the aggregate amount contributed to
5 an Exchange plan HSA pursuant to section
6 102(a) of the Health Care Freedom for Pa-
7 tients Act of 2025 which is excludable from the
8 taxpayer’s gross income for the taxable year
9 under section 102(f) of such Act (and such
10 amount shall not be allowed as a deduction
11 under subsection (a)).”.

12 (c) EFFECTIVE DATE.—The amendments made by
13 this section shall apply to taxable years beginning after
14 December 31, 2025.

15 **SEC. 102. EXCHANGE PLAN HSA CONTRIBUTION PROGRAM.**

16 (a) IN GENERAL.—As soon as administratively fea-
17 sible, the Secretary of Health and Human Services shall
18 make payments to the Exchange plan HSA of each indi-
19 vidual who is an eligible enrollee, for each month which
20 is an eligible month with respect to such individual, in the
21 amount described in subsection (c).

22 (b) ELIGIBLE MONTH.—For purposes of this section,
23 the term “eligible month” with respect to an individual
24 means a calendar month—

1 (1) occurring in calendar year 2026 or 2027,
2 and

3 (2) for which the individual is enrolled in a
4 bronze level qualified health plan or a catastrophic
5 plan through an Exchange established under subtitle
6 D of title I of the Patient Protection and Affordable
7 Care Act (42 U.S.C. 18021 et seq.).

8 (c) PAYMENT AMOUNT.—The amount of each pay-
9 ment under subsection (a) for any individual for an eligible
10 month is $\frac{1}{12}$ of—

11 (1) \$1,000, in the case of an eligible enrollee
12 who has attained age 18, and has not attained age
13 50, as of the first day of the calendar year which in-
14 cludes such month, and

15 (2) \$1,500, in the case of an eligible enrollee
16 who has attained age 50, and has not attained age
17 65, as of the first day of such calendar year.

18 (d) ELIGIBLE ENROLLEE.—For purposes of this sec-
19 tion, with respect to months occurring during a calendar
20 year, the term “eligible enrollee” means an eligible indi-
21 vidual (as defined in section 223(c)(1) of the Internal Rev-
22 enue Code of 1986)—

23 (1) who has attained age 18, and has not at-
24 tained age 65, as of the first day of such calendar
25 year,

(2) in the case of an alien, who is an eligible alien, as defined in section 36B(e)(2)(B) of such Code (as in effect for taxable years beginning after December 31, 2026, applied by substituting “for which the payment under section 102(a) of the Health Care Freedom for Patients Act of 2025 is made” for “for which the credit under this section is being claimed”), and

(3) whose household income, expressed as a percent of the poverty line for the family size involved, does not exceed 700 percent.

(e) DETERMINATION OF ELIGIBILITY.—

(1) IN GENERAL.—Upon election pursuant to paragraph (2) by an individual enrolling in a plan described in subsection (b)(2), the Secretary of Health and Human Services shall make a determination of the individual’s status as an eligible enrollee on the basis of the latest determination pursuant to section 1412 of the Patient Protection and Affordable Care Act (42 U.S.C. 18082) of the individual’s eligibility for the advance payment of the premium tax credits under section 36B of the Internal Revenue Code of 1986 and cost-sharing reductions under section 1402 of such Act (42 U.S.C. 18071).

1 (2) ELECTION.—At such time and in such man-
2 ner as the Secretary of Health and Human Services
3 shall provide, an eligible enrollee shall notify the
4 Secretary of such enrollee's election to receive the
5 payments under subsection (a) and shall provide—

6 (A) the social security number of such eli-
7 gible enrollee,

8 (B) in the case of an alien, an attestation
9 that the individual is an eligible alien, and

10 (C) sufficient information to allow for the
11 identification of, and deposit of the payments
12 under subsection (a) into, the Exchange plan
13 HSA of the eligible enrollee.

14 (3) REPORTING BY EXCHANGE.—The Exchange
15 through which an individual is enrolling in a plan
16 described in subsection (b)(2) shall provide to the
17 Secretary of Health and Human Services the infor-
18 mation provided by the individual which is necessary
19 for the determination under paragraph (1).

20 (4) TIMING OF PAYMENTS.—The payments
21 under subsection (a) with respect to any eligible
22 months occurring before the determination under
23 paragraph (1) is completed shall be made as early
24 as possible after the completion of such determina-
25 tion.

1 (f) TAX TREATMENT OF CONTRIBUTIONS.—For pur-
2 poses of the Internal Revenue Code of 1986, payments
3 under subsection (a) shall not be included in gross income
4 of an eligible enrollee.

5 (g) DEFINITIONS.—For purposes of this section—

6 (1) EXCHANGE PLAN HSA.—The term “Ex-
7 change plan HSA” has the meaning given such term
8 in section 223(i) of the Internal Revenue Code of
9 1986.

10 (2) HOUSEHOLD INCOME; POVERTY LINE.—The
11 terms “household income”, “poverty line”, and
12 “family size” have the same respective meanings and
13 shall be determined in the same manner as for pur-
14 poses of section 36B of the Internal Revenue Code
15 of 1986.

16 (3) BRONZE LEVEL QUALIFIED HEALTH
17 PLAN.—The term “bronze level qualified health
18 plan” means a qualified health plan, as defined in
19 section 1301(a) of the Patient Protection and Af-
20 fordable Care Act (42 U.S.C. 18021(a)), in the
21 bronze level, as defined in section 1302(d)(1)(A) of
22 such Act (42 U.S.C. 18022(d)(1)(A)).

23 (4) CATASTROPHIC PLAN.—The term “cata-
24 strophic plan” means a plan described in section
25 1302(e) of such Act (42 U.S.C. 18022(e)).

1 (h) REGULATORY AUTHORITY.—The Secretary of
2 Health and Human Services shall prescribe such regula-
3 tions or other guidance as are necessary to carry out the
4 purposes of this section.

5 (i) FUNDING.—In addition to amounts otherwise
6 available, there is appropriated to the Secretary of Health
7 and Human Services, out of any money in the Treasury
8 not otherwise appropriated, \$10,000,000,000 for each of
9 fiscal years 2026 and 2027, to remain available until Sep-
10 tember 30, 2028, to carry out the purposes of this section.

11 (j) INFORMATION SHARING.—Paragraph (21) of sec-
12 tion 6103(l) of the Internal Revenue Code of 1986 is
13 amended—

14 (1) by striking “or a basic health program
15 under section 1331 of Patient Protection and Af-
16 fordable Care Act” in subparagraph (A) and insert-
17 ing “a basic health program under section 1331 of
18 the Patient Protection and Affordable Care Act, or
19 a payment under section 102(a) of the Health Care
20 Freedom for Patients Act of 2025”,

21 (2) by inserting “, program, or payment” after
22 “(and the amount thereof)” in subparagraph (A)(v),
23 and

1 (3) by striking “State programs” in subpara-
2 graph (C)(ii) and inserting “State programs or pay-
3 ment”.

4 **SEC. 103. FUNDING COST-SHARING REDUCTION PAYMENTS.**

5 Section 1402 of the Patient Protection and Afford-
6 able Care Act (42 U.S.C. 18071) is amended by adding
7 at the end the following:

8 “(h) FUNDING.—

9 “(1) IN GENERAL.—There are appropriated,
10 out of any monies in the Treasury not otherwise ap-
11 propriated, such sums as may be necessary for pur-
12 poses of making payments under this section for
13 plan years beginning on or after January 1, 2027.

14 “(2) USE OF FUNDS.—

15 “(A) IN GENERAL.—The amounts appro-
16 priated under paragraph (1) may not be used
17 for purposes of making payments under this
18 section for a qualified health plan that provides
19 health benefit coverage that includes coverage
20 of abortion.

21 “(B) EXCEPTION.—Subparagraph (A)
22 shall not apply to payments for a qualified
23 health plan that provides coverage of abortion
24 only if necessary to save the life of the mother

1 or if the pregnancy is a result of an act of rape
2 or incest.”.

3 **SEC. 104. ALLOWING ALL INDIVIDUALS PURCHASING**
4 **HEALTH INSURANCE IN THE INDIVIDUAL**
5 **MARKET THE OPTION TO PURCHASE A**
6 **LOWER PREMIUM PLAN.**

7 (a) IN GENERAL.—Section 1302(e) of the Patient
8 Protection and Affordable Care Act (42 U.S.C. 18022(e))
9 is amended—

10 (1) in paragraph (1)—

11 (A) by redesignating clauses (i) and (ii) of
12 subparagraph (B) as subparagraphs (A) and
13 (B), respectively, and adjusting the margins ac-
14 cordingly;

15 (B) by striking “plan year if—” and all
16 that follows through “the plan provides—” and
17 inserting “plan year if the plan provides—”;
18 and

19 (C) in subparagraph (A), as redesignated
20 by paragraph (1), by striking “clause (ii)” and
21 inserting “subparagraph (B)”;

22 (2) by striking paragraph (2); and

23 (3) by redesignating paragraph (3) as para-
24 graph (2).

1 (b) RISK POOLS.—Section 1312(c)(1) of the Patient
2 Protection and Affordable Care Act (42 U.S.C.
3 18032(c)(1)) is amended by inserting “and including en-
4 rollees in catastrophic plans described in section 1302(e)”
5 after “Exchange”.

6 (c) CONFORMING AMENDMENT.—Section
7 1312(d)(3)(C) of the Patient Protection and Affordable
8 Care Act (42 U.S.C. 18032(d)(3)(C)) is amended by strik-
9 ing “, except that in the case of a catastrophic plan de-
10 scribed in section 1302(e), a qualified individual may en-
11 roll in the plan only if the individual is eligible to enroll
12 in the plan under section 1302(e)(2)”.

13 (d) EFFECTIVE DATE.—The amendments made by
14 subsections (a), (b), and (c) shall apply with respect to
15 plan years beginning on or after January 1, 2027.

16 **TITLE II—PUTTING AMERICAN**
17 **PATIENTS FIRST**

18 **SEC. 201. EXPANSION FMAP FOR CERTAIN STATES PRO-**
19 **VIDING PAYMENTS FOR HEALTH CARE FUR-**
20 **NISHED TO CERTAIN INDIVIDUALS.**

21 Section 1905 of the Social Security Act (42 U.S.C.
22 1396d) is amended—

23 (1) in subsection (y)—

24 (A) in paragraph (1)(E), by inserting “(or,
25 for calendar quarters beginning on or after Oc-

1 tober 1, 2027, in the case such State is a speci-
2 fied State with respect to such calendar quar-
3 ter, 80 percent)” after “thereafter”; and

4 (B) in paragraph (2), by adding at the end
5 the following new subparagraph:

6 “(C) SPECIFIED STATE.—The term ‘speci-
7 fied State’ means, with respect to a quarter, a
8 State that—

9 “(i) provides any form of financial as-
10 sistance from a State general fund during
11 such quarter, in whole or in part, whether
12 or not made under a State plan (or waiver
13 of such plan) under this title or under an-
14 other program established by the State, to
15 or on behalf of an alien who is not a quali-
16 fied alien and is not a child or pregnant
17 woman who is lawfully residing in the
18 United States and eligible for medical as-
19 sistance pursuant to section 1903(v)(4) or
20 for child health assistance or pregnancy-re-
21 lated assistance pursuant to section
22 2107(e)(1)(Q), for the purchasing of
23 health insurance coverage (as defined in
24 section 2791(b)(1) of the Public Health
25 Service Act) for an alien who is not a

1 qualified alien and is not such a child or
2 pregnant woman; or

3 “(ii) provides any form of comprehen-
4 sive health benefits coverage, except such
5 coverage required by Federal law, during
6 such quarter, whether or not under a State
7 plan (or waiver of such plan) under this
8 title or under another program established
9 by the State, and regardless of the source
10 of funding for such coverage, to an alien
11 who is not a qualified alien and is not such
12 a child or pregnant woman.

13 “(D) IMMIGRATION TERMS.—

14 “(i) ALIEN.—The term ‘alien’ has the
15 meaning given such term in section 101(a)
16 of the Immigration and Nationality Act.

17 “(ii) QUALIFIED ALIEN.—The term
18 ‘qualified alien’ has the meaning given
19 such term in section 431 of the Personal
20 Responsibility and Work Opportunity Rec-
21 onciliation Act of 1996, except that the
22 references to ‘(in the opinion of the agency
23 providing such benefits)’ in subsection (c)
24 of such section 431 shall be treated as ref-
25 erences to ‘(in the opinion of the State in

1 which such comprehensive health benefits
2 coverage or such financial assistance is
3 provided, as applicable)’.’; and

4 (2) in subsection (z)(2)—

5 (A) in subparagraph (A), by striking “for
6 such year” and inserting “for such quarter”;
7 and

8 (B) in subparagraph (B)(i)—

9 (i) in the matter preceding subclause
10 (I), by striking “for a year” and inserting
11 “for a calendar quarter in a year”; and

12 (ii) in subclause (II), by striking “for
13 the year” and inserting “for the quarter
14 for the State”.

15 **SEC. 202. PROHIBITING FEDERAL FINANCIAL PARTICIPA-**
16 **TION UNDER MEDICAID AND CHIP FOR INDIV-**
17 **IDUALS WITHOUT VERIFIED CITIZENSHIP,**
18 **NATIONALITY, OR SATISFACTORY IMMIGRA-**
19 **TION STATUS.**

20 (a) IN GENERAL.—

21 (1) MEDICAID.—Section 1903(i)(22) of the So-
22 cial Security Act (42 U.S.C. 1396b(i)(22)) is amend-
23 ed—

24 (A) by adding “and” at the end;

1 (B) by striking “to amounts” and inserting

2 “to— “

3 “(A) amounts”; and

4 (C) by adding at the end the following new
5 subparagraph:

6 “(B) in the case that the State elects
7 under section 1902(a)(46)(C) to provide for
8 making medical assistance available to an indi-
9 vidual during—

10 “(i) the period in which the individual
11 is provided the reasonable opportunity to
12 present satisfactory documentary evidence
13 of citizenship or nationality under section
14 1902(ee)(2)(C) or subsection (x)(4);

15 “(ii) the 90-day period described in
16 section 1902(ee)(1)(B)(ii)(II); or

17 “(iii) the period in which the indi-
18 vidual is provided the reasonable oppor-
19 tunity to submit evidence indicating a sat-
20 isfactory immigration status under section
21 1137(d)(4),

22 amounts expended for such medical assistance,
23 unless the citizenship or nationality of such in-
24 dividual or the satisfactory immigration status

1 of such individual (as applicable) is verified by
2 the end of such period;”.

3 (2) CHIP.—Section 2107(e)(1)(O) of the Social
4 Security Act (42 U.S.C. 1397gg(e)(1)(O)) is amend-
5 ed by striking “and (17)” and inserting “(17), and
6 (22)”.

7 (b) ELIMINATING STATE REQUIREMENT TO PROVIDE
8 MEDICAL ASSISTANCE DURING REASONABLE OPPOR-
9 TUNITY PERIOD.—

10 (1) DOCUMENTARY EVIDENCE OF CITIZENSHIP
11 OR NATIONALITY.—Section 1903(x)(4) of the Social
12 Security Act (42 U.S.C. 1396b(x)) is amended—

13 (A) by striking “under clauses (i) and (ii)
14 of section 1137(d)(4)(A)” and inserting “under
15 section 1137(d)(4)”;

16 (B) by inserting “, except that the State
17 shall not be required to make medical assist-
18 ance available to such individual during the pe-
19 riod in which such individual is provided such
20 reasonable opportunity if the State has not
21 elected the option under section
22 1902(a)(46)(C)” before the period at the end.

23 (2) SOCIAL SECURITY DATA MATCH.—Section
24 1902(ee) of the Social Security Act (42 U.S.C.
25 1396a(ee)) is amended—

1 (A) in paragraph (1)(B)(ii)—

2 (i) in subclause (II), by striking “(and
3 continues to provide the individual with
4 medical assistance during such 90-day pe-
5 riod)” and inserting “and, if the State has
6 elected the option under subsection
7 (a)(46)(C), continues to provide the indi-
8 vidual with medical assistance during such
9 90-day period”; and

10 (ii) in subclause (III), by inserting “,
11 or denies eligibility for medical assistance
12 under this title for such individual, as ap-
13 plicable” after “under this title”; and

14 (B) in paragraph (2)(C)—

15 (i) by striking “under clauses (i) and
16 (ii) of section 1137(d)(4)(A)” and insert-
17 ing “under section 1137(d)(4)”; and

18 (ii) by inserting “, except that the
19 State shall not be required to make med-
20 ical assistance available to such individual
21 during the period in which such individual
22 is provided such reasonable opportunity if
23 the State has not elected the option under
24 section 1902(a)(46)(C)” before the period
25 at the end.

1 (3) INDIVIDUALS WITH SATISFACTORY IMMI-
2 GRATION STATUS.—Section 1137(d)(4) of the Social
3 Security Act (42 U.S.C. 1320b–7(d)(4)) is amend-
4 ed—

5 (A) in subparagraph (A)(ii), by inserting
6 “(except that such prohibition on delay, denial,
7 reduction, or termination of eligibility for bene-
8 fits under the Medicaid program under title
9 XIX shall apply only if the State has elected
10 the option under section 1902(a)(46)(C))” after
11 “has been provided”; and

12 (B) in subparagraph (B)(ii), by inserting
13 “(except that such prohibition on delay, denial,
14 reduction, or termination of eligibility for bene-
15 fits under the Medicaid program under title
16 XIX shall apply only if the State has elected
17 the option under section 1902(a)(46)(C))” after
18 “status”.

19 (c) OPTION TO CONTINUE PROVIDING MEDICAL AS-
20 SISTANCE DURING REASONABLE OPPORTUNITY PE-
21 RIOD.—

22 (1) MEDICAID.—Section 1902(a)(46) of the So-
23 cial Security Act (42 U.S.C. 1396a(a)(46)) is
24 amended—

1 (A) in subparagraph (A), by striking
2 “and” at the end;

3 (B) in subparagraph (B)(ii), by adding
4 “and” at the end; and

5 (C) by inserting after subparagraph (B)(ii)
6 the following new subparagraph:

7 “(C) provide, at the option of the State, for
8 making medical assistance available—

9 “(i) to an individual described in subpara-
10 graph (B) during the period in which such indi-
11 vidual is provided the reasonable opportunity to
12 present satisfactory documentary evidence of
13 citizenship or nationality under subsection
14 (ee)(2)(C) or section 1903(x)(4), or during the
15 90-day period described in subsection
16 (ee)(1)(B)(ii)(II); or

17 “(ii) to an individual who is not a citizen
18 or national of the United States during the pe-
19 riod in which such individual is provided the
20 reasonable opportunity to submit evidence indi-
21 cating a satisfactory immigration status under
22 section 1137(d)(4);”.

23 (2) CHIP.—Section 2105(c)(9) of the Social
24 Security Act (42 U.S.C. 1397ee(c)(9)) is amended

1 by adding at the end the following new subpara-
2 graph:

3 “(C) OPTION TO CONTINUE PROVIDING
4 CHILD HEALTH ASSISTANCE DURING REASON-
5 ABLE OPPORTUNITY PERIOD.—Section
6 1902(a)(46)(C) shall apply to States under this
7 title in the same manner as it applies to a State
8 under title XIX.”.

9 (d) EFFECTIVE DATE.—The amendments made by
10 this section shall apply beginning on October 1, 2026.

11 **TITLE III—PREVENTING**
12 **WASTEFUL SPENDING**

13 **SEC. 301. PROHIBITING COVERAGE OF GENDER TRANSI-**
14 **TION PROCEDURES AS AN ESSENTIAL**
15 **HEALTH BENEFIT UNDER PLANS OFFERED**
16 **BY EXCHANGES.**

17 (a) IN GENERAL.—Section 1302(b)(2) of the Patient
18 Protection and Affordable Care Act (42 U.S.C.
19 18022(b)(2)) is amended by adding at the end the fol-
20 lowing new subparagraph:

21 “(C) GENDER TRANSITION PROCE-
22 DURES.—For plan years beginning on or after
23 January 1, 2027, the essential health benefits
24 defined pursuant to paragraph (1) may not in-

1 clude items and services furnished for a gender
2 transition procedure.”.

3 (b) GENDER TRANSITION PROCEDURE DEFINED.—

4 Section 1304 of the Patient Protection and Affordable
5 Care Act (42 U.S.C. 18024) is amended by adding at the
6 end the following new subsection:

7 “(f) GENDER TRANSITION PROCEDURE.—

8 “(1) IN GENERAL.—In this title, except as pro-
9 vided in paragraph (2), the term ‘gender transition
10 procedure’ means, with respect to an individual, any
11 of the following when performed for the purpose of
12 intentionally changing the body of such individual
13 (including by disrupting the body’s development, in-
14 hibiting its natural functions, or modifying its ap-
15 pearance) to no longer correspond to the individual’s
16 sex:

17 “(A) Performing any surgery, including—

18 “(i) castration;

19 “(ii) sterilization;

20 “(iii) orchiectomy;

21 “(iv) scrotoplasty;

22 “(v) vasectomy;

23 “(vi) tubal ligation;

24 “(vii) hysterectomy;

25 “(viii) oophorectomy;

23

- 1 “(ix) ovariectomy;
2 “(x) metoidioplasty;
3 “(xi) clitoroplasty;
4 “(xii) reconstruction of the fixed part
5 of the urethra with or without a
6 metoidioplasty or a phalloplasty;
7 “(xiii) penectomy;
8 “(xiv) phalloplasty;
9 “(xv) vaginoplasty;
10 “(xvi) vaginectomy;
11 “(xvii) vulvoplasty;
12 “(xviii) reduction thyrochondroplasty;
13 “(xix) chondrolaryngoplasty;
14 “(xx) mastectomy; and
15 “(xxi) any plastic, cosmetic, or aes-
16 thetic surgery that feminizes or
17 masculinizes the facial or other body fea-
18 tures of an individual.
- 19 “(B) Any placement of chest implants to
20 create feminine breasts or any placement of
21 erection or testicular prosthesis.
- 22 “(C) Any placement of fat or artificial im-
23 plants in the gluteal region.

1 “(D) Administering, prescribing, or dis-
2 pensing to an individual medications, includ-
3 ing—

4 “(i) gonadotropin-releasing hormone
5 (GnRH) analogues or other puberty-block-
6 ing drugs to stop or delay normal puberty;
7 and

8 “(ii) testosterone, estrogen, or other
9 androgens to an individual at doses that
10 are supraphysiologic than would normally
11 be produced endogenously in a healthy in-
12 dividual of the same age and sex.

13 “(2) EXCEPTION.—Paragraph (1) shall not
14 apply to the following:

15 “(A) Puberty suppression or blocking pre-
16 scription drugs for the purpose of normalizing
17 puberty for an individual experiencing pre-
18 cocious puberty.

19 “(B) Medically necessary procedures or
20 treatments to correct for—

21 “(i) a medically verifiable disorder of
22 sex development, including—

23 “(I) 46,XX chromosomes with
24 virilization;

1 “(II) 46,XY chromosomes with
2 undervirilization; and

3 “(III) both ovarian and testicular
4 tissue;

5 “(ii) sex chromosome structure, sex
6 steroid hormone production, or sex hor-
7 mone action, if determined to be abnormal
8 by a physician through genetic or bio-
9 chemical testing;

10 “(iii) infection, disease, injury, or dis-
11 order caused or exacerbated by a previous
12 procedure described in paragraph (1), or a
13 physical disorder, physical injury, or phys-
14 ical illness that would, as certified by a
15 physician, place the individual in imminent
16 danger of death or impairment of a major
17 bodily function unless the procedure is per-
18 formed, not including procedures per-
19 formed for the alleviation of mental dis-
20 tress; or

21 “(iv) procedures to restore or recon-
22 struct the body of the individual in order
23 to correspond to the individual’s sex after
24 one or more previous procedures described
25 in paragraph (1), which may include the

1 removal of a pseudo phallus or breast aug-
2 mentation.

3 “(3) SEX.—For purposes of this subsection, the
4 term ‘sex’ means either male or female, as bio-
5 logically determined and defined by subparagraph
6 (A) and subparagraph (B).

7 “(A) FEMALE.—The term ‘female’ means
8 an individual who naturally has, had, will have,
9 or would have, but for a developmental or ge-
10 netic anomaly or historical accident, the repro-
11 ductive system that at some point produces,
12 transports, and utilizes eggs for fertilization.

13 “(B) MALE.—The term ‘male’ means an
14 individual who naturally has, had, will have, or
15 would have, but for a developmental or genetic
16 anomaly or historical accident, the reproductive
17 system that at some point produces, transports,
18 and utilizes sperm for fertilization.”.

19 **SEC. 302. PROHIBITING FEDERAL MEDICAID AND CHIP**
20 **FUNDING FOR CERTAIN ITEMS AND SERV-**
21 **ICES.**

22 (a) MEDICAID.—Section 1903(i) of the Social Secu-
23 rity Act (42 U.S.C. 1396b(i)) is amended—

24 (1) in paragraph (26), by striking “; or” and
25 inserting a semicolon;

1 (2) in paragraph (27), by striking the period at
2 the end and inserting “; or”;

3 (3) by inserting after paragraph (27) the fol-
4 lowing new paragraph:

5 “(28) with respect to any amount expended for
6 specified gender transition procedures (as defined in
7 section 1905(ll)) furnished to an individual enrolled
8 in a State plan (or waiver of such plan).”; and

9 (4) in the flush left matter at the end, by strik-
10 ing “and (18),” and inserting “(18), and (28)”.

11 (b) CHIP.—Section 2107(e)(1)(O) of the Social Se-
12 curity Act (42 U.S.C. 1397gg(e)(1)(O)), as amended by
13 this Act, is further amended by striking “and (22)” and
14 inserting “(22), and (28)”.

15 (c) SPECIFIED GENDER TRANSITION PROCEDURES
16 DEFINED.—Section 1905 of the Social Security Act (42
17 U.S.C. 1396d) is amended by adding at the end the fol-
18 lowing new subsection:

19 “(ll) SPECIFIED GENDER TRANSITION PROCE-
20 DURES.—

21 “(1) IN GENERAL.—For purposes of section
22 1903(i)(28), except as provided in paragraph (2) ,
23 the term ‘specified gender transition procedure’
24 means, with respect to an individual, any of the fol-
25 lowing when performed for the purpose of inten-

tionally changing the body of such individual (including by disrupting the body's development, inhibiting its natural functions, or modifying its appearance) to no longer correspond to the individual's sex:

5 “(A) Performing any surgery, including—

6 “(i) castration;

7 “(ii) sterilization;

8 “(iii) orchiectomy;

9 “(iv) scrotoplasty;

10 “(v) vasectomy;

11 “(vi) tubal ligation;

12 “(vii) hysterectomy;

13 “(viii) oophorectomy;

14 “(ix) ovariectomy;

15 “(x) metoidioplasty;

16 “(xi) clitoroplasty;

17 “(xii) reconstruction of the fixed part

18 of the urethra with or without a

19 metoidioplasty or a phalloplasty;

20 “(xiii) penectomy;

21 “(xiv) phalloplasty;

22 “(xv) vaginoplasty;

23 “(xvi) vaginectomy;

24 “(xvii) vulvoplasty;

25 “(xviii) reduction thyrochondroplasty;

1 “(xix) chondrolaryngoplasty;

2 “(xx) mastectomy; and

3 “(xxi) any plastic, cosmetic, or aes-
4 thetic surgery that feminizes or
5 masculinizes the facial or other body fea-
6 tures of an individual.

7 “(B) Any placement of chest implants to
8 create feminine breasts or any placement of
9 erection or testicular prosthesis.

10 “(C) Any placement of fat or artificial im-
11 plants in the gluteal region.

12 “(D) Administering, prescribing, or dis-
13 pensing to an individual medications, includ-
14 ing—

15 “(i) gonadotropin-releasing hormone
16 (GnRH) analogues or other puberty-block-
17 ing drugs to stop or delay normal puberty;
18 and

19 “(ii) testosterone, estrogen, or other
20 androgens to an individual at doses that
21 are supraphysiologic than would normally
22 be produced endogenously in a healthy in-
23 dividual of the same age and sex.

24 “(2) EXCEPTION.—Paragraph (1) shall not
25 apply to the following when furnished to an indi-

1 vidual by a health care provider if the individual is
2 a minor with the consent of such individual's parent
3 or legal guardian:

4 “(A) Puberty suppression or blocking pre-
5 scription drugs for the purpose of normalizing
6 puberty for an individual experiencing pre-
7 cocious puberty.

8 “(B) Medically necessary procedures or
9 treatments to correct for—

10 “(i) a medically verifiable disorder of
11 sex development, including—

12 “(I) 46,XX chromosomes with
13 virilization;

14 “(II) 46,XY chromosomes with
15 undervirilization; and

16 “(III) both ovarian and testicular
17 tissue;

18 “(ii) sex chromosome structure, sex
19 steroid hormone production, or sex hor-
20 mone action, if determined to be abnormal
21 by a physician through genetic or bio-
22 chemical testing;

23 “(iii) infection, disease, injury, or dis-
24 order caused or exacerbated by a previous
25 procedure described in paragraph (1), or a

1 physical disorder, physical injury, or phys-
2 ical illness that would, as certified by a
3 physician, place the individual in danger of
4 death or impairment of a major bodily
5 function unless the procedure is performed,
6 not including procedures performed for the
7 alleviation of mental distress; or

8 “(iv) procedures to restore or recon-
9 struct the body of the individual in order
10 to correspond to the individual’s sex after
11 one or more previous procedures described
12 in paragraph (1), which may include the
13 removal of a pseudo phallus or breast aug-
14 mentation.

15 “(3) SEX.—For purposes of paragraph (1), the
16 term ‘sex’ means either male or female, as bio-
17 logically determined and defined in paragraphs (4)
18 and (5), respectively.

19 “(4) FEMALE.—For purposes of paragraph (3),
20 the term ‘female’ means an individual who naturally
21 has, had, will have, or would have, but for a develop-
22 mental or genetic anomaly or historical accident, the
23 reproductive system that at some point produces,
24 transports, and utilizes eggs for fertilization.

1 “(5) MALE.—For purposes of paragraph (3),
2 the term ‘male’ means an individual who naturally
3 has, had, will have, or would have, but for a develop-
4 mental or genetic anomaly or historical accident, the
5 reproductive system that at some point produces,
6 transports, and utilizes sperm for fertilization.”.