

August 10, 2017

Roger Severino, JD, MPP Director, Office of Civil Rights U.S. Department of Health and Human Services (HHS) 200 Independence Avenue, SW Room 509F, HHH Building Washington, D.C. 20201

Dear Director Severino:

The American Medical Student Association (AMSA) appreciates your time in reviewing our concerns and stances in response to the August 4, 2017 defendants' filing of an update (No. 7:16-cv-00108) in the case Franciscan Alliance, Inc., et al., v. Thomas E. Price, MD, Secretary of Health and Human Services, et al., requesting continuation of the case and ongoing opportunity to reconsider § 1557 (the Rule) of the Patient Protection and Affordable Care Act (ACA). AMSA is the oldest and largest independent association of physicians-in-training in the United States. Founded in 1950, AMSA is a student-governed, non-profit organization committed to representing the concerns of physicians-in-training.

AMSA is a proud supporter and ally with a long-standing history employing our platform to amplify and advocate for the rights of the LGBTQ communities. We recognize the ongoing stigmas and double standards for these communities that still exist within the medical profession, as well as the compounding effects of health disparities in these communities and their intersectional minority members. AMSA adamantly opposes treatment policies or rule revisions that would in any way permit exclusion and discrimination against patients based on their sexual orientation and gender identity, or that inhibit their access to equitable, affordable, quality care.

To that end, we express general support of § 1557 of the ACA as an essential provision of nondiscrimination protections for transgender people. Discrimination and refusal of care solely based on gender identity is likewise harmful to the health of transgender people. Health care for transgender people should be individualized, holistic, and comprehensive - including, but not limited to mental, medical, and surgical treatment. Furthermore, such therapeutic interventions encompassed by transition-related care are supported by the academic literature as necessary, safe, and beneficial to health outcomes for many transgender people. We strongly rebuke health insurance exclusions targeting such transition-related care. We further implore all medical trainees, physicians, and other healthcare personnel to uphold fiduciary responsibilities that are motivated by the professional principles of patient autonomy, the primacy of patient welfare, and social justice in respect to caring for patients, including transgender people and other members of the LGBTQ communities.

In response to the process of reconsidering § 1557 of the ACA, we oppose reopening the Rule. To the extent that HHS seeks to clarify the application of § 1557 and the final Rule to address issues raised in litigation, we urge HHS to do so through issuing interpretive guidance. Nonetheless, if HHS chooses to reopen the Rule, we strongly urge HHS to first seek input from stakeholders through a request for information and public comment period prior to issuing a proposed rule. This is appropriate given the importance and scope of the Rule, and the fact that this process was used in development of the Rule.

Please contact us for additional input or if we can provide any further information.

Sincerely,

Joey Johnson, DO

AMSA National President

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