

119TH CONGRESS
2D SESSION

S. 5030

To amend title XXVII of the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to require group health plans and health insurance issuers offering group or individual health insurance coverage that provide benefits for sex-rejecting procedures to provide benefits for items and services to address the harms caused by sex-rejecting procedures and to restore healthy human form and functioning, to the greatest extent practicable.

IN THE SENATE OF THE UNITED STATES

JULY 16, 2026

Mr. MARSHALL (for himself and Ms. LUMMIS) introduced the following bill; which was read twice and referred to the Committee on Health, Education, Labor, and Pensions

A BILL

To amend title XXVII of the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to require group health plans and health insurance issuers offering group or individual health insurance coverage that provide benefits for sex-rejecting procedures to provide benefits for items and services to address the harms caused by sex-rejecting procedures and to restore healthy human form and functioning, to the greatest extent practicable.

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

1 **SECTION 1. SHORT TITLE.**

2 This Act may be cited as the “Treatment and Res-
3 toration Uniformity and Transparency in Health Coverage
4 Act of 2026” or the “TRUTH in Coverage Act of 2026”.

5 **SEC. 2. REQUIRING GROUP HEALTH PLANS AND HEALTH**
6 **INSURANCE ISSUERS OFFERING GROUP OR**
7 **INDIVIDUAL HEALTH INSURANCE COVERAGE**
8 **THAT PROVIDE BENEFITS FOR SEX-REJECT-**
9 **ING PROCEDURES TO PROVIDE BENEFITS**
10 **FOR ITEMS AND SERVICES TO ADDRESS THE**
11 **HARMS OF SUCH PROCEDURES.**

12 (a) PHSA.—Part D of title XXVII of the Public
13 Health Service Act (42 U.S.C. 300gg–111 et seq.) is
14 amended by adding at the end the following new section:
15 **“SEC. 2799A–12. REQUIRED COVERAGE OF ITEMS AND SERV-**
16 **ICES TO ADDRESS THE HARMS OF SEX-RE-**
17 **JECTING PROCEDURES.**

18 “(a) IN GENERAL.—A group health plan and a health
19 insurance issuer offering group or individual health insur-
20 ance coverage shall, in the case such plan or coverage pro-
21 vides benefits with respect to any sex-rejecting procedure,
22 also provide benefits for items and services furnished to
23 an individual who has received any such procedure to ad-
24 dress the harms of such procedure (including restorative
25 care), regardless of whether—

1 “(1) such individual received benefits with re-
 2 spect to the sex-rejecting procedure under the indi-
 3 vidual’s plan or coverage; or

4 “(2) such plan or issuer provides benefits under
 5 the individual’s plan or coverage for the sex-rejecting
 6 procedure.

7 “(b) APPLICATION OF FINANCIAL REQUIREMENTS
 8 AND TREATMENT LIMITATIONS.—A group health plan
 9 and a health insurance issuer offering group or individual
 10 health insurance coverage shall ensure that, with respect
 11 to items and services for which benefits to address the
 12 harms of sex-rejecting procedures are required to be pro-
 13 vided under such plan or coverage under subsection (a)—

14 “(1) the financial requirements applicable to
 15 such items and services are no more restrictive than
 16 the predominant financial requirements applied to
 17 substantially all medical and surgical benefits cov-
 18 ered by the plan or coverage and there are no sepa-
 19 rate cost-sharing requirements that are applicable
 20 only with respect to such items and services; and

21 “(2) the treatment limitations applicable to
 22 such items and services are no more restrictive than
 23 the predominant treatment limitations applied to
 24 substantially all medical and surgical benefits cov-
 25 ered by the plan or coverage and there are no sepa-

1 rate treatment limitations that are applicable only
2 with respect to such items and services.

3 “(c) DEFINITIONS.—In this section:

4 “(1) FEMALE.—Referring to a natural person,
5 the term ‘female’ means an individual characterized
6 by a reproductive system naturally organized to
7 produce (at maturity, absent disruption or con-
8 genital anomaly) large gametes (ova).

9 “(2) FINANCIAL REQUIREMENT; PREDOMINANT;
10 TREATMENT LIMITATION.—The terms ‘financial re-
11 quirement’, ‘predominant’, and ‘treatment limitation’
12 have the meaning given such terms in clauses (i)
13 through (iii), respectively, of section 2726(a)(3)(B),
14 except that the term ‘financial requirement’ shall in-
15 clude aggregate lifetime limits and annual limits.

16 “(3) MALE.—Referring to a natural person, the
17 term ‘male’ means an individual characterized by a
18 reproductive system naturally organized to produce
19 (at maturity, absent disruption or congenital anom-
20 aly) small gametes (sperm).

21 “(4) RESTORATIVE CARE.—The term ‘restora-
22 tive care’ means items and services furnished to an
23 individual who has received any sex-rejecting proce-
24 dure at any point during the individual’s lifetime to
25 address, mitigate, monitor, treat, or reverse the

1 harms, complications, and adverse effects of such
 2 procedure, including interventions intended to re-
 3 store, to the greatest extent practicable, healthy
 4 human form and functioning. Such care includes
 5 items and services furnished to address—

6 “(A) impaired reproductive capacity, di-
 7 minished ovarian reserve, impaired spermatogenesis, or other reproductive-system injury;

9 “(B) endocrine dysfunction, hormonal im-
 10 balance, hypogonadism, dependence on exoge-
 11 nous hormones, or other disruption of healthy
 12 endocrine function;

13 “(C) impaired sexual function, including
 14 loss of sexual sensation, anorgasmia, erectile
 15 dysfunction, genital pain, vaginal stenosis, di-
 16 minished libido, or other sexual dysfunction;

17 “(D) urinary dysfunction, including uri-
 18 nary incontinence, urinary retention, urethral
 19 complications, recurrent urinary tract infec-
 20 tions, or other genitourinary injury;

21 “(E) resultant vocal cord damage, perma-
 22 nent voice changes, vocal dysfunction, or im-
 23 paired speech;

24 “(F) female hirsutism, male-pattern
 25 baldness, breast atrophy, breast development, or

1 other secondary-sex-characteristic changes
 2 caused by cross-sex hormones;

3 “(G) osteoporosis, osteopenia, impaired
 4 bone development, fractures, reduced bone den-
 5 sity, or other skeletal disorders associated with
 6 puberty suppression or cross-sex hormone use;

7 “(H) cardiovascular disease,
 8 thromboembolic disease, hypertension, stroke,
 9 myocardial infarction, metabolic syndrome, dia-
 10 betes, or other cardiovascular or metabolic com-
 11 plications associated with such procedures;

12 “(I) surgical complications, including infec-
 13 tion, fistula formation, stenosis, tissue necrosis,
 14 chronic pain, nerve damage, graft failure, im-
 15 plant complications, wound complications, or
 16 the need for revision surgery;

17 “(J) loss, removal, alteration, or impair-
 18 ment of healthy reproductive organs, breasts,
 19 genital structures, or other healthy tissues;

20 “(K) reconstructive, regenerative, pros-
 21 thetic, plastic, or other surgical interventions
 22 intended to restore healthy anatomy, appear-
 23 ance, or physiological function;

24 “(L) rehabilitation services, including
 25 speech therapy, physical therapy, occupational

1 therapy, pelvic floor therapy, sexual health
 2 counseling, and other therapies intended to re-
 3 store healthy functioning;

4 “(M) psychiatric or psychological condi-
 5 tions associated with or exacerbated by such
 6 procedures, including depression, anxiety, trau-
 7 ma, suicidality, grief, regret, identity distress,
 8 body-image disturbance, or dissociation;

9 “(N) diagnostic testing, specialist evalua-
 10 tions, fertility assessments, hormone moni-
 11 toring, cancer screening, and long-term medical
 12 surveillance necessitated by altered anatomy or
 13 prior exposure to puberty blockers, cross-sex
 14 hormones, or sex-rejecting surgeries;

15 “(O) fertility services that seek to cooper-
 16 ate with, or restore the healthy physiology and
 17 anatomy of, the human reproductive system,
 18 without the use of methods that circumvent
 19 natural human functions, such as any treat-
 20 ments or procedures that involve the handling
 21 of a human egg or embryo outside the body;

22 “(P) breast cancer in men on estrogen and
 23 certain cancers in women on testosterone; and

24 “(Q) any other physical, psychological, re-
 25 productive, endocrine, neurologic, cardio-

1 vascular, musculoskeletal, or metabolic injury,
 2 impairment, complication, or condition resulting
 3 from or associated with a sex-rejecting proce-
 4 dure.

5 “(5) SEX.—The term ‘sex’, when referring to
 6 an individual’s sex, means to refer to either male or
 7 female, as genetically determined at fertilization.

8 “(6) SEX-REJECTING PROCEDURE.—

9 “(A) IN GENERAL.—The term ‘sex-reject-
 10 ing procedure’ means any medical or surgical
 11 intervention for the purpose of attempting to
 12 align an individual’s physical appearance or
 13 body with an asserted identity that differs from
 14 the individual’s sex, including—

15 “(i) gonadotropin-releasing hormone
 16 (GnRH) agonists or any other puberty-
 17 blocking or suppressing drugs to stop or
 18 delay normal puberty;

19 “(ii) testosterone, dihydrotestosterone
 20 (DHT), or other androgens, estrogen, pro-
 21 gesterone, to an individual at doses that
 22 are supraphysiologic to what would nor-
 23 mally be produced endogenously in a
 24 healthy individual of the same age and sex,
 25 as well as anti-androgen medications;

- 1 “(iii) castration;
- 2 “(iv) orchiectomy;
- 3 “(v) scrotoplasty;
- 4 “(vi) implantation of erection or tes-
- 5 ticular prostheses;
- 6 “(vii) vasectomy;
- 7 “(viii) hysterectomy;
- 8 “(ix) oophorectomy;
- 9 “(x) ovariectomy;
- 10 “(xi) reconstruction of the fixed part
- 11 of the urethra with or without a
- 12 metoidioplasty or a phalloplasty;
- 13 “(xii) metoidioplasty;
- 14 “(xiii) penectomy;
- 15 “(xiv) phalloplasty;
- 16 “(xv) vaginoplasty;
- 17 “(xvi) clitoroplasty;
- 18 “(xvii) vaginectomy;
- 19 “(xviii) vulvoplasty;
- 20 “(xix) reduction thyrochondroplasty;
- 21 “(xx) chondrolaryngoplasty;
- 22 “(xxi) mastectomy;
- 23 “(xxii) tubal ligation;
- 24 “(xxiii) sterilization;

1 “(xxiv) any plastic, cosmetic, or aes-
 2 thetic surgery that feminizes or
 3 masculinizes the facial or other physio-
 4 logical features of an individual;

5 “(xxv) any placement of chest im-
 6 plants to create feminine breasts;

7 “(xxvi) any placement of fat or artifi-
 8 cial implants in the gluteal region;

9 “(xxvii) augmentation mammoplasty;

10 “(xxviii) liposuction;

11 “(xxix) lipofilling;

12 “(xxx) voice surgery;

13 “(xxxi) hair reconstruction;

14 “(xxxii) pectoral implants; and

15 “(xxxiii) the removal of any otherwise
 16 healthy or non-diseased body part or tis-
 17 sue.

18 “(B) EXCEPTIONS.—The term ‘sex-reject-
 19 ing procedure’ does not include the following
 20 when furnished by a health care professional
 21 with the consent of such individual or, if appli-
 22 cable, such individual’s parents or legal guard-
 23 ian:

24 “(i) Services to individuals born with
 25 a medically verifiable disorder of sex devel-

1 opment, including an individual with exter-
2 nal sex characteristics that are irresolvably
3 ambiguous, such as an individual born with
4 46,XX chromosomes with virilization, an
5 individual born with 46,XY chromosomes
6 with undervirilization, or an individual
7 born having both ovarian and testicular
8 tissue.

9 “(ii) Services provided when a physi-
10 cian has otherwise diagnosed a disorder of
11 sex development in which the physician has
12 determined through genetic or biochemical
13 testing that the individual does not have
14 healthy sex chromosome structure, sex
15 steroid hormone production, or sex steroid
16 hormone action for a healthy individual of
17 the same sex and age.

18 “(iii) The treatment of any infection,
19 injury, disease, or disorder that has been
20 caused by or exacerbated by the perform-
21 ance of sex-rejecting procedures, whether
22 or not the sex-rejecting procedure was per-
23 formed in accordance with State and Fed-
24 eral law and whether or not funding for

1 the procedure is permissible under this sec-
2 tion.

3 “(iv) Any procedure undertaken be-
4 cause the individual suffers from a physical
5 disorder, physical injury, or physical illness
6 (but not claimed mental distress) that
7 would, as certified by a physician, place
8 the individual in imminent danger of death
9 or impairment of major bodily function,
10 unless the procedure is performed.

11 “(v) Puberty suppression or blocking
12 prescription drugs for the purpose of nor-
13 malizing puberty for a minor experiencing
14 precocious puberty.

15 “(vi) Male circumcision.”.

16 (b) ERISA.—

17 (1) IN GENERAL.—Subpart B of part 7 of sub-
18 title B of title I of the Employee Retirement Income
19 Security Act of 1974 (29 U.S.C. 1185 et seq.) is
20 amended by adding at the end the following new sec-
21 tion:

1 **“SEC. 727. REQUIRED COVERAGE OF ITEMS AND SERVICES**
2 **TO ADDRESS THE HARMS OF SEX-REJECTING**
3 **PROCEDURES.**

4 “(a) IN GENERAL.—A group health plan and a health
5 insurance issuer offering group health insurance coverage
6 shall, in the case such plan or coverage provides benefits
7 with respect to any sex-rejecting procedure, also provide
8 benefits for items and services furnished to an individual
9 who has received any such procedure to address the harms
10 of such procedure (including restorative care), regardless
11 of whether—

12 “(1) such individual received benefits with re-
13 spect to the sex-rejecting procedure under the indi-
14 vidual’s plan or coverage; or

15 “(2) such plan or issuer provides benefits under
16 the individual’s plan or coverage for the sex-rejecting
17 procedure.

18 “(b) APPLICATION OF FINANCIAL REQUIREMENTS
19 AND TREATMENT LIMITATIONS.—A group health plan
20 and a health insurance issuer offering group health insur-
21 ance coverage shall ensure that, with respect to items and
22 services for which benefits to address the harms of sex-
23 rejecting procedures are required to be provided under
24 such plan or coverage under subsection (a)—

25 “(1) the financial requirements applicable to
26 such items and services are no more restrictive than

1 the predominant financial requirements applied to
2 substantially all medical and surgical benefits cov-
3 ered by the plan or coverage and there are no sepa-
4 rate cost-sharing requirements that are applicable
5 only with respect to such items and services; and

6 “(2) the treatment limitations applicable to
7 such items and services are no more restrictive than
8 the predominant treatment limitations applied to
9 substantially all medical and surgical benefits cov-
10 ered by the plan or coverage and there are no sepa-
11 rate treatment limitations that are applicable only
12 with respect to such items and services.

13 “(c) DEFINITIONS.—In this section:

14 “(1) FEMALE.—Referring to a natural person,
15 the term ‘female’ means an individual characterized
16 by a reproductive system naturally organized to
17 produce (at maturity, absent disruption or con-
18 genital anomaly) large gametes (ova).

19 “(2) FINANCIAL REQUIREMENT; PREDOMINANT;
20 TREATMENT LIMITATION.—The terms ‘financial re-
21 quirement’, ‘predominant’, and ‘treatment limitation’
22 have the meaning given such terms in clauses (i)
23 through (iii), respectively, of section 712(a)(3)(B),
24 except that the term ‘financial requirement’ shall in-
25 clude aggregate lifetime limits and annual limits.

1 “(3) MALE.—Referring to a natural person, the
 2 term ‘male’ means an individual characterized by a
 3 reproductive system naturally organized to produce
 4 (at maturity, absent disruption or congenital anom-
 5 aly) small gametes (sperm).

6 “(4) RESTORATIVE CARE.—The term ‘restora-
 7 tive care’ means items and services furnished to an
 8 individual who has received any sex-rejecting proce-
 9 dure at any point during the individual’s lifetime to
 10 address, mitigate, monitor, treat, or reverse the
 11 harms, complications, and adverse effects of such
 12 procedure, including interventions intended to re-
 13 store, to the greatest extent practicable, healthy
 14 human form and functioning. Such care includes
 15 items and services furnished to address—

16 “(A) impaired reproductive capacity, di-
 17 minished ovarian reserve, impaired spermatog-
 18 genesis, or other reproductive-system injury;

19 “(B) endocrine dysfunction, hormonal im-
 20 balance, hypogonadism, dependence on exoge-
 21 nous hormones, or other disruption of healthy
 22 endocrine function;

23 “(C) impaired sexual function, including
 24 loss of sexual sensation, anorgasmia, erectile

1 dysfunction, genital pain, vaginal stenosis, di-
 2 minished libido, or other sexual dysfunction;

3 “(D) urinary dysfunction, including uri-
 4 nary incontinence, urinary retention, urethral
 5 complications, recurrent urinary tract infec-
 6 tions, or other genitourinary injury;

7 “(E) resultant vocal cord damage, perma-
 8 nent voice changes, vocal dysfunction, or im-
 9 paired speech;

10 “(F) female hirsutism, male-pattern
 11 baldness, breast atrophy, breast development, or
 12 other secondary-sex-characteristic changes
 13 caused by cross-sex hormones;

14 “(G) osteoporosis, osteopenia, impaired
 15 bone development, fractures, reduced bone den-
 16 sity, or other skeletal disorders associated with
 17 puberty suppression or cross-sex hormone use;

18 “(H) cardiovascular disease,
 19 thromboembolic disease, hypertension, stroke,
 20 myocardial infarction, metabolic syndrome, dia-
 21 betes, or other cardiovascular or metabolic com-
 22 plications associated with such procedures;

23 “(I) surgical complications, including infec-
 24 tion, fistula formation, stenosis, tissue necrosis,
 25 chronic pain, nerve damage, graft failure, im-

1 plant complications, wound complications, or
2 the need for revision surgery;

3 “(J) loss, removal, alteration, or impair-
4 ment of healthy reproductive organs, breasts,
5 genital structures, or other healthy tissues;

6 “(K) reconstructive, regenerative, pros-
7 thetic, plastic, or other surgical interventions
8 intended to restore healthy anatomy, appear-
9 ance, or physiological function;

10 “(L) rehabilitation services, including
11 speech therapy, physical therapy, occupational
12 therapy, pelvic floor therapy, sexual health
13 counseling, and other therapies intended to re-
14 store healthy functioning;

15 “(M) psychiatric or psychological condi-
16 tions associated with or exacerbated by such
17 procedures, including depression, anxiety, trau-
18 ma, suicidality, grief, regret, identity distress,
19 body-image disturbance, or dissociation;

20 “(N) diagnostic testing, specialist evalua-
21 tions, fertility assessments, hormone moni-
22 toring, cancer screening, and long-term medical
23 surveillance necessitated by altered anatomy or
24 prior exposure to puberty blockers, cross-sex
25 hormones, or sex-rejecting surgeries;

“(O) fertility services that seek to cooperate with, or restore the healthy physiology and anatomy of, the human reproductive system, without the use of methods that circumvent natural human functions, such as any treatments or procedures that involve the handling of a human egg or embryo outside the body;

“(P) breast cancer in men on estrogen and certain cancers in women on testosterone; and

“(Q) any other physical, psychological, reproductive, endocrine, neurologic, cardiovascular, musculoskeletal, or metabolic injury, impairment, complication, or condition resulting from or associated with a sex-rejecting procedure.

“(5) SEX.—The term ‘sex’, when referring to an individual’s sex, means to refer to either male or female, as genetically determined at fertilization.

“(6) SEX-REJECTING PROCEDURE.—

“(A) IN GENERAL.—The term ‘sex-rejecting procedure’ means any medical or surgical intervention for the purpose of attempting to align an individual’s physical appearance or body with an asserted identity that differs from the individual’s sex, including—

- 1 “(i) gonadotropin-releasing hormone
- 2 (GnRH) agonists or any other puberty-
- 3 blocking or suppressing drugs to stop or
- 4 delay normal puberty;
- 5 “(ii) testosterone, dihydrotestosterone
- 6 (DHT), or other androgens, estrogen, pro-
- 7 gesterone, to an individual at doses that
- 8 are supraphysiologic to what would be pro-
- 9 duced endogenously in a healthy individual
- 10 of the same age and sex, as well as anti-
- 11 androgen medications;
- 12 “(iii) castration;
- 13 “(iv) orchiectomy;
- 14 “(v) scrotoplasty;
- 15 “(vi) implantation of erection or tes-
- 16 ticular prostheses;
- 17 “(vii) vasectomy;
- 18 “(viii) hysterectomy;
- 19 “(ix) oophorectomy;
- 20 “(x) ovariectomy;
- 21 “(xi) reconstruction of the fixed part
- 22 of the urethra with or without a
- 23 metoidioplasty or a phalloplasty;
- 24 “(xii) metoidioplasty;
- 25 “(xiii) penectomy;

- 1 “(xiv) phalloplasty;
- 2 “(xv) vaginoplasty;
- 3 “(xvi) clitoroplasty;
- 4 “(xvii) vaginectomy;
- 5 “(xviii) vulvoplasty;
- 6 “(xix) reduction thyrochondroplasty;
- 7 “(xx) chondrolaryngoplasty;
- 8 “(xxi) mastectomy;
- 9 “(xxii) tubal ligation;
- 10 “(xxiii) sterilization;
- 11 “(xxiv) any plastic, cosmetic, or aes-
- 12 thetic surgery that feminizes or
- 13 masculinizes the facial or other physio-
- 14 logical features of an individual;
- 15 “(xxv) any placement of chest im-
- 16 plants to create feminine breasts;
- 17 “(xxvi) any placement of fat or artifi-
- 18 cial implants in the gluteal region;
- 19 “(xxvii) augmentation mammoplasty;
- 20 “(xxviii) liposuction;
- 21 “(xxix) lipofilling;
- 22 “(xxx) voice surgery;
- 23 “(xxxi) hair reconstruction;
- 24 “(xxxii) pectoral implants; and

1 “(xxxiii) the removal of any otherwise
 2 healthy or non-diseased body part or tis-
 3 sue.

4 “(B) EXCEPTIONS.—The term ‘sex-reject-
 5 ing procedure’ does not include the following
 6 when furnished by a health care professional
 7 with the consent of such individual or, if appli-
 8 cable, such individual’s parents or legal guard-
 9 ian:

10 “(i) Services to individuals born with
 11 a medically verifiable disorder of sex devel-
 12 opment, including an individual with exter-
 13 nal sex characteristics that are irresolvably
 14 ambiguous, such as an individual born with
 15 46,XX chromosomes with virilization, an
 16 individual born with 46,XY chromosomes
 17 with undervirilization, or an individual
 18 born having both ovarian and testicular
 19 tissue.

20 “(ii) Services provided when a physi-
 21 cian has otherwise diagnosed a disorder of
 22 sex development in which the physician has
 23 determined through genetic or biochemical
 24 testing that the individual does not have
 25 healthy sex chromosome structure, sex

steroid hormone production, or sex steroid hormone action for a healthy individual of the same sex and age.

“(iii) The treatment of any infection, injury, disease, or disorder that has been caused by or exacerbated by the performance of sex-rejecting procedures, whether or not the sex-rejecting procedure was performed in accordance with State and Federal law and whether or not funding for the procedure is permissible under this section.

“(iv) Any procedure undertaken because the individual suffers from a physical disorder, physical injury, or physical illness (but not claimed mental distress) that would, as certified by a physician, place the individual in imminent danger of death or impairment of major bodily function, unless the procedure is performed.

“(v) Puberty suppression or blocking prescription drugs for the purpose of normalizing puberty for a minor experiencing precocious puberty.

“(vi) Male circumcision.”.

1 (2) CLERICAL AMENDMENT.—The table of con-
 2 tents in section 1 of the Employee Retirement In-
 3 come Security Act of 1974 (29 U.S.C. 1001 note) is
 4 amended by inserting after the item relating to sec-
 5 tion 726 the following new item:

“Sec. 727. Required coverage of items and services to address the harms of sex-
 rejecting procedures.”.

6 (c) IRC.—

7 (1) IN GENERAL.—Subchapter B of chapter
 8 100 of the Internal Revenue Code of 1986 is amend-
 9 ed by adding at the end the following new section:

10 **“SEC. 9827. REQUIRED COVERAGE OF ITEMS AND SERVICES**
 11 **TO ADDRESS THE HARMS OF SEX-REJECTING**
 12 **PROCEDURES.**

13 “(a) IN GENERAL.—A group health plan shall, in the
 14 case such plan provides benefits with respect to any sex-
 15 rejecting procedure, also provide benefits for items and
 16 services furnished to an individual who has received any
 17 such procedure to address the harms of such procedure
 18 (including restorative care), regardless of whether—

19 “(1) such individual received benefits with re-
 20 spect to the sex-rejecting procedure under the indi-
 21 vidual’s plan; or

22 “(2) such plan provides benefits under the indi-
 23 vidual’s plan for the sex-rejecting procedure.

1 “(b) APPLICATION OF FINANCIAL REQUIREMENTS
2 AND TREATMENT LIMITATIONS.—A group health plan
3 shall ensure that, with respect to items and services for
4 which benefits to address the harms of sex-rejecting proce-
5 dures are required to be provided under such plan under
6 subsection (a)—

7 “(1) the financial requirements applicable to
8 such items and services are no more restrictive than
9 the predominant financial requirements applied to
10 substantially all medical and surgical benefits cov-
11 ered by the plan and there are no separate cost-
12 sharing requirements that are applicable only with
13 respect to such items and services; and

14 “(2) the treatment limitations applicable to
15 such items and services are no more restrictive than
16 the predominant treatment limitations applied to
17 substantially all medical and surgical benefits cov-
18 ered by the plan and there are no separate treat-
19 ment limitations that are applicable only with re-
20 spect to such items and services.

21 “(c) DEFINITIONS.—In this section:

22 “(1) FEMALE.—Referring to a natural person,
23 the term ‘female’ means an individual characterized
24 by a reproductive system naturally organized to

1 produce (at maturity, absent disruption or con-
2 genital anomaly) large gametes (ova).

3 “(2) FINANCIAL REQUIREMENT; PREDOMINANT;
4 TREATMENT LIMITATION.—The terms ‘financial re-
5 quirement’, ‘predominant’, and ‘treatment limitation’
6 have the meaning given such terms in clauses (i)
7 through (iii), respectively, of section 9812(a)(3)(B),
8 except that the term ‘financial requirement’ shall in-
9 clude aggregate lifetime limits and annual limits.

10 “(3) MALE.—Referring to a natural person, the
11 term ‘male’ means an individual characterized by a
12 reproductive system naturally organized to produce
13 (at maturity, absent disruption or congenital anom-
14 ally) small gametes (sperm).

15 “(4) RESTORATIVE CARE.—The term ‘restora-
16 tive care’ means items and services furnished to an
17 individual who has received any sex-rejecting proce-
18 dure at any point during the individual’s lifetime to
19 address, mitigate, monitor, treat, or reverse the
20 harms, complications, and adverse effects of such
21 procedure, including interventions intended to re-
22 store, to the greatest extent practicable, healthy
23 human form and functioning. Such care includes
24 items and services furnished to address—

1 “(A) impaired reproductive capacity, di-
2 minished ovarian reserve, impaired spermatogenesis,
3 or other reproductive-system injury;

4 “(B) endocrine dysfunction, hormonal imbalance,
5 hypogonadism, dependence on exogenous hormones,
6 or other disruption of healthy endocrine function;

8 “(C) impaired sexual function, including
9 loss of sexual sensation, anorgasmia, erectile
10 dysfunction, genital pain, vaginal stenosis, diminished
11 libido, or other sexual dysfunction;

12 “(D) urinary dysfunction, including urinary
13 incontinence, urinary retention, urethral complications,
14 recurrent urinary tract infections, or other genitourinary injury;

16 “(E) resultant vocal cord damage, permanent voice
17 changes, vocal dysfunction, or impaired speech;

19 “(F) female hirsutism, male-pattern baldness,
20 breast atrophy, breast development, or other secondary-sex-
21 characteristic changes caused by cross-sex hormones;

23 “(G) osteoporosis, osteopenia, impaired bone
24 development, fractures, reduced bone den-

1 sity, or other skeletal disorders associated with
2 puberty suppression or cross-sex hormone use;

3 “(H) cardiovascular disease,
4 thromboembolic disease, hypertension, stroke,
5 myocardial infarction, metabolic syndrome, dia-
6 betes, or other cardiovascular or metabolic com-
7 plications associated with such procedures;

8 “(I) surgical complications, including infec-
9 tion, fistula formation, stenosis, tissue necrosis,
10 chronic pain, nerve damage, graft failure, im-
11 plant complications, wound complications, or
12 the need for revision surgery;

13 “(J) loss, removal, alteration, or impair-
14 ment of healthy reproductive organs, breasts,
15 genital structures, or other healthy tissues;

16 “(K) reconstructive, regenerative, pros-
17 thetic, plastic, or other surgical interventions
18 intended to restore healthy anatomy, appear-
19 ance, or physiological function;

20 “(L) rehabilitation services, including
21 speech therapy, physical therapy, occupational
22 therapy, pelvic floor therapy, sexual health
23 counseling, and other therapies intended to re-
24 store healthy functioning;

1 “(M) psychiatric or psychological condi-
 2 tions associated with or exacerbated by such
 3 procedures, including depression, anxiety, trau-
 4 ma, suicidality, grief, regret, identity distress,
 5 body-image disturbance, or dissociation;

6 “(N) diagnostic testing, specialist evalua-
 7 tions, fertility assessments, hormone moni-
 8 toring, cancer screening, and long-term medical
 9 surveillance necessitated by altered anatomy or
 10 prior exposure to puberty blockers, cross-sex
 11 hormones, or sex-rejecting surgeries;

12 “(O) fertility services that seek to cooper-
 13 ate with, or restore the healthy physiology and
 14 anatomy of, the human reproductive system,
 15 without the use of methods that circumvent
 16 natural human functions, such as any treat-
 17 ments or procedures that involve the handling
 18 of a human egg or embryo outside the body;

19 “(P) breast cancer in men on estrogen and
 20 certain cancers in women on testosterone; and

21 “(Q) any other physical, psychological, re-
 22 productive, endocrine, neurologic, cardio-
 23 vascular, musculoskeletal, or metabolic injury,
 24 impairment, complication, or condition resulting

1 from or associated with a sex-rejecting proce-
 2 dure.

3 “(5) SEX.—The term ‘sex’, when referring to
 4 an individual’s sex, means to refer to either male or
 5 female, as genetically determined at fertilization.

6 “(6) SEX-REJECTING PROCEDURE.—

7 “(A) IN GENERAL.—The term ‘sex-reject-
 8 ing procedure’ means any medical or surgical
 9 intervention for the purpose of attempting to
 10 align an individual’s physical appearance or
 11 body with an asserted identity that differs from
 12 the individual’s sex, including—

13 “(i) gonadotropin-releasing hormone
 14 (GnRH) agonists or any other puberty-
 15 blocking or suppressing drugs to stop or
 16 delay normal puberty;

17 “(ii) testosterone, dihydrotestosterone
 18 (DHT), or other androgens, estrogen, pro-
 19 gesterone, to an individual at doses that
 20 are supraphysiologic to what would nor-
 21 mally be produced endogenously in a
 22 healthy individual of the same age and sex,
 23 as well as anti-androgen medications;

24 “(iii) castration;

25 “(iv) orchiectomy;

- 1 “(v) scrotoplasty;
- 2 “(vi) implantation of erection or tes-
- 3 ticular prostheses;
- 4 “(vii) vasectomy;
- 5 “(viii) hysterectomy;
- 6 “(ix) oophorectomy;
- 7 “(x) ovariectomy;
- 8 “(xi) reconstruction of the fixed part
- 9 of the urethra with or without a
- 10 metoidioplasty or a phalloplasty;
- 11 “(xii) metoidioplasty;
- 12 “(xiii) penectomy;
- 13 “(xiv) phalloplasty;
- 14 “(xv) vaginoplasty;
- 15 “(xvi) clitoroplasty;
- 16 “(xvii) vaginectomy;
- 17 “(xviii) vulvoplasty;
- 18 “(xix) reduction thyrochondroplasty;
- 19 “(xx) chondrolaryngoplasty;
- 20 “(xxi) mastectomy;
- 21 “(xxii) tubal ligation;
- 22 “(xxiii) sterilization;
- 23 “(xxiv) any plastic, cosmetic, or aes-
- 24 thetic surgery that feminizes or

1 masculinizes the facial or other physio-
 2 logical features of an individual;

3 “(xxv) any placement of chest im-
 4 plants to create feminine breasts;

5 “(xxvi) any placement of fat or artifi-
 6 cial implants in the gluteal region;

7 “(xxvii) augmentation mammoplasty;

8 “(xxviii) liposuction;

9 “(xxix) lipofilling;

10 “(xxx) voice surgery;

11 “(xxxi) hair reconstruction;

12 “(xxxii) pectoral implants; and

13 “(xxxiii) the removal of any otherwise
 14 healthy or non-diseased body part or tis-
 15 sue.

16 “(B) EXCEPTIONS.—The term ‘sex-reject-
 17 ing procedure’ does not include the following
 18 when furnished by a health care professional
 19 with the consent of such individual or, if appli-
 20 cable, such individual’s parents or legal guard-
 21 ian:

22 “(i) Services to individuals born with
 23 a medically verifiable disorder of sex devel-
 24 opment, including an individual with exter-
 25 nal sex characteristics that are irresolvably

1 ambiguous, such as an individual born with
2 46,XX chromosomes with virilization, an
3 individual born with 46,XY chromosomes
4 with undervirilization, or an individual
5 born having both ovarian and testicular
6 tissue.

7 “(ii) Services provided when a physi-
8 cian has otherwise diagnosed a disorder of
9 sex development in which the physician has
10 determined through genetic or biochemical
11 testing that the individual does not have
12 healthy sex chromosome structure, sex
13 steroid hormone production, or sex steroid
14 hormone action for a healthy individual of
15 the same sex and age.

16 “(iii) The treatment of any infection,
17 injury, disease, or disorder that has been
18 caused by or exacerbated by the perform-
19 ance of sex-rejecting procedures, whether
20 or not the sex-rejecting procedure was per-
21 formed in accordance with State and Fed-
22 eral law and whether or not funding for
23 the procedure is permissible under this sec-
24 tion.

1 “(iv) Any procedure undertaken be-
 2 cause the individual suffers from a physical
 3 disorder, physical injury, or physical illness
 4 (but not claimed mental distress) that
 5 would, as certified by a physician, place
 6 the individual in imminent danger of death
 7 or impairment of major bodily function,
 8 unless the procedure is performed.

9 “(v) Puberty suppression or blocking
 10 prescription drugs for the purpose of nor-
 11 malizing puberty for a minor experiencing
 12 precocious puberty.

13 “(vi) Male circumcision.”.

14 (2) CLERICAL AMENDMENT.—The table of sec-
 15 tions for subchapter B of chapter 100 of the Inter-
 16 nal Revenue Code of 1986 is amended by adding at
 17 the end the following new item:

“Sec. 9827. Required coverage of items and services to address the harms of
 sex-rejecting procedures.”.

18 (d) EFFECTIVE DATE.—The amendments made by
 19 this section shall apply with respect to plan years begin-
 20 ning on or after January 1, 2027.

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