# Reviewed As To Form By Legislative Service Commission

# I\_135\_0096-2

# 135th General Assembly Regular Session 2023-2024

. B. No.

#### A BILL

То	enact sections 3109.054, 3129.01, 3129.02,	1
	3129.03, 3129.04, 3129.05, 3129.06, and 3129.07	2
	of the Revised Code regarding gender transition	3
	services for minors and to name this act the	4
	Ohio Saving Adolescents from Experimentation	5
	(SAFE) Act	6

#### BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 3109.054, 3129.01, 3129.02,	7
3129.03, 3129.04, 3129.05, 3129.06, and 3129.07 of the Revised	8
Code be enacted to read as follows:	9
Sec. 3109.054. When allocating parental rights and	1(
responsibilities or parenting time, a court shall not consider a	11
parent's decision to do any of the following:	12
(A) Refer to and raise the child in a manner consistent	13
with the child's biological sex;	14
(B) Decline to consent to the child receiving gender	15
transition services as defined in section 3129.01 of the Revised	16
Code;	17

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(C) Decline to consent to the child receiving counseling	18
or other mental health services for the purpose of affirming the	19
child's perception of the child's gender or sex, if the child's	20
perception is inconsistent with the child's biological sex.	21
Sec. 3129.01. As used in this chapter:	22
(A) "Biological sex," "birth sex," and "sex" mean the	23
biological indication of male and female, including sex	24
chromosomes, naturally occurring sex hormones, gonads, and	25
nonambiguous internal and external genitalia present at birth,	26
without regard to an individual's psychological, chosen, or	27
subjective experience of gender.	28
(B) "Cross-sex hormone" means testosterone, estrogen, or	29
progesterone given to a minor individual in an amount greater	30
than would normally be produced endogenously in a healthy	31
individual of the minor individual's age and sex.	32
(C) "Gender" means the psychological, behavioral, social,	33
and cultural aspects of being male or female.	34
(D) "Gender reassignment surgery" means any surgery	35
performed for the purpose of assisting an individual with gender	36
transition that seeks to surgically alter or remove healthy	37
physical or anatomical characteristics or features that are	38
typical for the individual's biological sex, in order to instill	39
or create physiological or anatomical characteristics that	40
resemble a sex different from the individual's birth sex,	41
including genital or non-genital gender reassignment surgery.	42
(E) "Gender-related condition" means any condition where	43
an individual feels an incongruence between the individual's	44
gender identity and biological sex. "Gender-related condition"	45
includes gender dysphoria.	46

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(F) "Gender transition" means the process in which an	47
individual goes from identifying with and living as a gender	48
that corresponds to his or her biological sex to identifying	49
with and living as a gender different from his or her biological	50
sex, including social, legal, or physical changes.	51
(G) "Gender transition services" means any medical or	52
surgical service (including physician services, inpatient and	53
outpatient hospital services, or prescription drugs or hormones)	54
provided for the purpose of assisting an individual with gender	55
transition that seeks to alter or remove physical or anatomical	56
characteristics or features that are typical for the	57
individual's biological sex, or to instill or create	58
physiological or anatomical characteristics that resemble a sex	59
different from the individual's birth sex, including medical	60
services that provide puberty blocking drugs, cross-sex	61
hormones, or other mechanisms to promote the development of	62
feminizing or masculinizing features in the opposite sex, or	63
genital or non-genital gender reassignment surgery.	64
(H) "Genital gender reassignment surgery" means surgery	65
performed for the purpose of assisting an individual with gender	66
transition and includes both of the following:	67
(1) Surgeries that sterilize, such as castration,	68
vasectomy, hysterectomy, oophorectomy, orchiectomy, and	69
<pre>penectomy;</pre>	70
(2) Surgeries that artificially construct tissue with the	71
appearance of genitalia that differs from the individual's	72
biological sex, such as metoidiplasty, phalloplasty, and	73
vaginoplasty.	74

(I) "Health benefit plan" has the same meaning as in

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and a 2020 of the Posterd Gods	76
section 3922.01 of the Revised Code.	10
(J) "Mental health professional" means all of the	77
following:	78
(1) Either of the following advanced practice registered	79
nurses who holds a current, valid license issued under Chapter	80
4723. of the Revised Code that authorizes the practice of	81
nursing as an advanced practice registered nurse:	82
(a) A clinical nurse specialist who is certified as a	83
psychiatric-mental health CNS by the American nurses	84
<pre>credentialing center;</pre>	85
(b) A certified nurse practitioner who is certified as a	86
psychiatric-mental health NP by the American nurses	. 87
credentialing center.	88
(2) A physician specializing in psychiatry;	89
(3) A psychologist, school psychologist, or independent	90
school psychologist licensed under Chapter 4732, of the Revised	91
Code or under rules adopted in accordance with sections 3301.07	92
and 3319.22 of the Revised Code;	93
(4) An independent social worker, social worker, licensed	94
professional clinical counselor, licensed professional	95
counselor, independent marriage and family therapist, or	96
marriage and family therapist licensed under Chapter 4757. of	97
the Revised Code.	98
(K) "Minor individual" means an individual under eighteen	99
years of age.	100
(L) "Non-genital gender reassignment surgery" means	101
surgery performed for the purpose of assisting an individual	102
with gender transition such as augmentation mammoplasty, facial	103

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feminization surgery, liposuction, lipofilling, voice surgery,	104
thyroid cartilage reduction, gluteal augmentation, pectoral	105
implants, or other aesthetic procedures.	106
(M) "Physician" means an individual authorized under	107
Chapter 4731. of the Revised Code to practice medicine and	108
surgery or osteopathic medicine and surgery.	109
(N) "Puberty-blocking drugs" means Gonadotropin-releasing	110
hormone analogs or other synthetic drugs used to stop	111
luteinizing hormone and follicle stimulating hormone secretion,	112
synthetic antiandrogen drugs used to block the androgen	113
receptor, or any drug to delay or suppress normal puberty.	114
Sec. 3129.02. A physician shall not knowingly do any of	115
the following:	116
(A) Perform gender reassignment surgery on a minor	117
<u>individual;</u>	
(B) Prescribe a cross-sex hormone or puberty-blocking drug	119
for a minor individual for the purpose of assisting the minor	120
individual with gender transition;	121
(C) Engage in conduct that aids or abets in the practices	122
described in division (A) or (B) of this section, provided that	123
this section may not be construed to impose liability on any	124
speech protected by federal or state law.	125
Sec. 3129.03. (A) No mental health professional shall	126
diagnose or treat a minor individual who presents for the	127
diagnosis or treatment of a gender-related condition without	128
first doing both of the following:	129
(1) Notwithstanding section 5122.04 of the Revised Code,	130
obtaining the consent of the minor individual's residential	131

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parent and legal custodian or the minor individual's guardian;	132
(2) Screening the minor individual for both of the	133
<pre>following:</pre>	134
(a) Other comorbidities that may be influencing the minor	135
individual's gender-related condition, including depression,	136
anxiety, attention deficit hyperactivity disorder, autism	137
spectrum disorder, and other mental health conditions;	138
(b) Physical, sexual, mental, and emotional abuse and	139
other traumas.	140
(B) No political subdivision may prohibit the use of	141
watchful waiting, treatment and therapies similar to those	142
provided for the treatment of body dysmorphia and eating	143
disorders, or other models of care that assist minor individuals	144
experiencing a gender-related condition in reconciling their	145
gender identity with their biological sex.	146
Sec. 3129.04. This chapter does not prohibit a physician	147
from treating, including by performing surgery on or prescribing	148
drugs or hormones for, a minor individual who meets any of the	149
<pre>following:</pre>	150
(A) Was born with a medically verifiable disorder of sex_	151
development, including an individual with external biological	152
sex characteristics that are irresolvably ambiguous, such an as	153
individual born with forty-six XX chromosomes with virilization,	154
forty-six XY chromosomes with undervirilization, or having both	155
ovarian and testicular tissue;	156
(B) Received a diagnosis of a disorder of sexual	157
development, in which a physician has determined through genetic	158
or biochemical testing that the individual does not have normal	159
sex chromosome structure, sex steroid hormone production, or sex	160

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steroid hormone action for a biological male or biological	161	
<pre>female;</pre>	162	
(C) Needs treatment for any infection, injury, disease, or	163	
disorder that has been caused or exacerbated by the performance	164	
of gender transition services, whether or not the services were	165	
performed in accordance with state or federal law.	166	
Sec. 3129.05. (A) Any violation of section 3129.02,	167	
section 3129.03, or section 3129.06 of the Revised Code shall be	168	
considered unprofessional conduct and subject to discipline by	169	
the applicable professional licensing board.	170	
(B) An individual may bring a claim for a violation of	171	
this chapter not later than two years after the date the cause	172	
of action accrues. A minor individual may bring an action before	173 -	
reaching eighteen years of age through a parent or guardian, and	174	
may bring an action in the minor individual's own name upon	175	
reaching eighteen years of age at any time from that date until	176	
twenty years after that date. Nothing in this chapter shall be	177	
construed to preempt any other private cause of action arising	178	
under the common law of this state.	179	
(C) The attorney general may bring an action to enforce	180	
compliance with section 3129.02 or 3129.03 of the Revised Code.	181	
Nothing in this chapter shall be construed to deny, impair, or	182	
otherwise affect any right or authority of the attorney general,	183	
the state, or any agency, officer, or employee of the state,	184	
acting under any provision of the Revised Code, to institute or	185	
intervene in any proceeding.	186	
Sec. 3129.06. (A) Each mental health professional who	187	
diagnoses or treats a minor individual for a gender-related	188	
condition shall report to the department of health not later	189	

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than the first day of March of each year all of the following	190
information:	191
(1) The number of minor individuals the mental health	192
professional diagnosed or treated for a gender-related condition	193
in the previous year;	194
(2) The biological sex of the minor individuals the mental	195
health professional diagnosed or treated for a gender-related	196
condition in the previous year;	197
(3) The age at which the minor individual's diagnosis or	198
treatment for a gender-related condition began;	199
(4) The number of minor individuals diagnosed or treated	200
for a gender-related condition who also presented with any of	201
the comorbidities, abuse, or other trauma described in division	202
(A) of section 3129.03 of the Revised Code;	203
(5) The number of minor individuals who resumed	204
identification with their biological sex;	205
(6) The number of minor individuals the mental health	206
professional previously diagnosed or treated for a gender-	207
related condition who have not been treated by the mental health	208
professional for six months or more and who were not included in	209
a previous report;	210
(7) Any other information required by the department by	211
rule.	212
(B) In reporting the information required by this section,	213
both of the following apply:	214
(1) Where appropriate, the mental health professional	215
shall organize the previous year's information by month.	216

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(2) The mental health professional shall not report	217
information that identifies or would tend to identify any	218
specific individual.	219
(C) Not later than three months after the annual deadline	220
described in division (A) of this section, the department of	221
health shall compile that information in a report to the general	222
assembly. The department shall submit the report in accordance	223
with division (B) of section 101.68 of the Revised Code.	224
(D) The director of health may adopt rules as necessary to	225
implement this section, including by adding other information to	226
be reported in accordance with division (A) of this section. Any	227
such rules shall be adopted pursuant to section 111.15 of the	228
Revised Code, but the requirement in division (C) of this	229
section is not contingent on the adoption of any such rules.	230
Notwithstanding any provision of section 121.95 of the Revised	231
Code to the contrary, a regulatory restriction contained in a	232
rule adopted under this section is not subject to sections	233
121.95 to 121.953 of the Revised Code.	234
Sec. 3129.07. (A) Medical assistance provided under the	235
medicaid program shall not include coverage for gender	236
transition services for minor, individuals.	237
(B) This section does not apply to any of the following:	238
(1) The circumstances described in section 3129.04 of the	239
Revised Code;	240
(2) Mental health services provided for a gender-related	241
<pre>condition;</pre>	242
(3) Any services that are not gender transition services.	243
Section 2. The General Assembly hereby finds and declares	244

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all of the following:	245
(A) This state has a compelling government interest in	246
protecting the health and safety of its citizens, especially	247
vulnerable children.	248
(B) Only a tiny percentage of the American population	249
experiences distress at identifying with their biological sex.	250
According to the American Psychiatric Association, prevalence	251
ranges from 0.005 to 0.014 per cent for natal adult males and	252
from 0.002 to 0.003 per cent for natal females.	253
(C) Studies consistently demonstrate that the vast	254
majority of children who are gender nonconforming or experience	255
distress at identifying with their biological sex come to	256
identify with their biological sex in adolescence or adulthood,	257
thereby rendering most medical health care interventions	258
unnecessary.	259
(D) Scientific studies show that individuals struggling	260
with distress at identifying with their biological sex often	261
have already experienced psychopathology, which indicates these	262
individuals should be encouraged to seek mental health care	263
services before undertaking any hormonal or surgical	264
intervention.	265
(E) Suicide rates, psychiatric morbidities, and mortality	266
rates remain markedly elevated above the background population	267
after inpatient gender reassignment surgery has been performed.	268
(F) Some health care providers are prescribing puberty-	269
blocking drugs in order to delay the onset or progression of	270
normally timed puberty in children who experience distress at	271
identifying with their biological sex. This is being done	272
despite the lack of any long-term longitudinal studies	273

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evaluating the risks and benefits of using these drugs for the	274
treatment of such distress or gender transition.	275
(G) Health care providers are also prescribing cross-sex	276
hormones for children who experience distress at identifying	277
with their biological sex, despite the fact that no randomized	278
clinical trials have been conducted on the efficacy or safety of	279
the use of cross-sex hormones in adults or children for the	280
purpose of treating such distress or gender transition.	281
(H) The use of cross-sex hormones comes with the following	282
serious known risks:	283
(1) For biological females, erythrocytosis, severe liver	284
dysfunction, coronary artery disease, cerebrovascular disease,	285
hypertension, increased risk of breast and uterine cancers, and	286
irreversible infertility;	287
(2) For biological males, thromboembolic disease,	288
cholelithiasis, coronary artery disease, macroprolactinoma,	289
cerebrovascular disease, hypertriglyceridemia, breast cancer,	290
and irreversible infertility.	291
(I) Genital and non-genital gender reassignment surgeries	292
are generally not recommended for children, although evidence	293
indicates referrals for children to have such surgeries are	294
becoming more frequent.	295
(J) Genital gender reassignment surgery includes several	296
irreversible invasive procedures for males and females and	297
involves the following alterations of biologically normal and	298
functional body parts:	299
(1) For biological males, surgery may involve genital	300
reconstruction including penectomy, orchiectomy, vaginoplasty,	301
clitoroplasty, and vulvoplasty.	302

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(2) For biological females, surgery may involve a	303
hysterectomy or oophorectomy, reconstruction of the urethra,	304
genital reconstruction including metoidioplasty or phalloplasty,	305
vaginectomy, scrotoplasty, and implantation of erection or	306
testicular prostheses.	307
(K) The complications, risks, and long-term care concerns	308
associated with genital gender reassignment surgery for both	309
males and females are numerous and complex.	310
(L) Non-genital gender reassignment surgery includes	311
various invasive procedures for males and females and also	312
involves the alteration or removal of biologically normal and	313
functional body parts:	314
(1) For biological males, procedures may include	315
augmentation mammoplasty, facial feminization surgery,	316
liposuction, lipofilling, voice surgery, thyroid cartilage	317
reduction, gluteal augmentation, hair reconstruction, and other	318
aesthetic procedures.	319
(2) For biological females, procedures may include	320
subcutaneous mastectomy, voice surgery, liposuction,	321
lipofilling, pectoral implants, and other aesthetic procedures.	322
(M) It is an accepted principle of economics and public	323
policy that when a service or product is subsidized or paid for,	324
demand for that service or product increases. Just between 2015	325
and 2016, gender reassignment surgeries increased by twenty per	326
cent.	327
(N) It is of grave concern to the General Assembly that	328
the medical community is allowing individuals who experience	329
distress at identifying with their biological sex to be subjects	330
of irreversible and drastic non-genital gender reassignment	331

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surgery and irreversible, permanently sterilizing genital gender	332
reassignment surgery, despite the lack of studies showing that	333
the benefits of such extreme interventions outweigh the risks.	334
(O) The risks of gender transition services far outweigh	335
any benefit at this stage of clinical study on these services.	336
Section 3. Section 1 of this act takes effect six months	337
after the effective date of this section.	338
Section 4. This act shall be known as the Ohio Saving	339
Adolescents from Experimentation (SAFE) Act.	340