

June 16, 2023

Xavier Becerra
Secretary, U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Melanie Fontes Rainer
Director, Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, D.C. 20201

Re: HIPAA Privacy Rule to Support Reproductive Health Care Privacy (RIN 0945-AA20)

Dear Secretary Becerra and Director Fontes Rainer,

Thank you for the opportunity to comment in response to the Notice of Proposed Rulemaking (Proposed Rule or NPRM), "HIPAA Privacy Rule To Support Reproductive Health Care Privacy," published in the Federal Register on April 17, 2023.¹

The undersigned organizations, many of which represent the interests of the lesbian, gay, bisexual, transgender and queer (LGBTQ) community, recognize the heightened need for privacy protections for health information following the ruling in *Dobbs v. Jackson Women's Health Organization (Dobbs)*² and support the Proposed Rule. While state legislative attacks on abortion access are not new, the landscape that has emerged since the *Dobbs* decision renders those attacks all the more devastating. It is outrageous and unacceptable that in many instances, those seeking to end a pregnancy must travel out of their home state to get the abortion care they need. This burden is compounded when law enforcement authorities in a patient's home state try to apply that state's draconian abortion ban extraterritorially and seek personal health information in an effort to criminalize reproductive health care providers and/or their patients.

Unfortunately, we are seeing the same dire situation with respect to health care for transgender people, both children and adults.³ Despite the clear consensus from medical

¹ 88 Fed Reg 73 (April 17, 2023), available at <https://www.federalregister.gov/documents/2023/04/17/2023-07517/hipaa-privacy-rule-to-support-reproductive-health-care-privacy>.

² 597 U.S. __ (2022).

³ Movement Advancement Project. "Equality Maps: Bans on Best Practice Medical Care for Transgender Youth." https://www.mapresearch.org/equality-maps/healthcare/youth_medical_care_bans. Accessed 06/07/2023;

organizations that medical care for transgender youth can be life-saving,⁴ these states are enacting bans that criminalize doctors and even parents who try to get their children the care they need. Penalties may range from revoking a provider's medical license and other disciplinary action by a medical licensing board to fines, lawsuits against providers for provision of transition-related care, criminal felony charges, and charges of child abuse or neglect.⁵ While some of these laws have been enjoined,⁶ they are proliferating quickly, leaving many families frightened and confused about their options.

Many of the concerns that the preamble identifies as a consequence of *Dobbs* and state laws banning reproductive health care are also applicable to state laws banning medically necessary care for transgender people. As of this date, twenty states have enacted legislation to prohibit medically-necessary and clinically-appropriate medical care for transgender adolescents,⁷ with

Movement Advancement Project. April 2023. LGBTQ Policy Spotlight: Bans on Medical Care for Transgender People. www.mapresearch.org/2023-medical-care-bans-report.

⁴ See, e.g., Facts on Established Medical Care for Transgender Adolescents, available at <https://www.glad.org/wp-content/uploads/2023/04/Facts-About-Medical-Care-for-Transgender-Youth.pdf>.

⁵ Movement Advancement Project. "Equality Maps: Bans on Best Practice Medical Care for Transgender Youth." https://www.mapresearch.org/equality-maps/healthcare/youth_medical_care_bans. Accessed 06/07/2023.

⁶ See, e.g., June 6, 2023 order granting preliminary injunction in *Doe v. Ladapo*, Case 4:23-cv-00114-RH-MAF (N.D. Florida), available at <https://www.glad.org/wp-content/uploads/2023/06/doe-v-ladapo-order-granting-pi.pdf>.

⁷ See Alabama Vulnerable Child Compassion and Protection Act, S.B. 184 (Ala. 2022), available at <http://alisondb.legislature.state.al.us/ALISON/SearchableInstruments/2022RS/PrintFiles/SB184-enr.pdf>; An Act Relating to Health Care, S.B. 1138 (Ariz. 2022), available at <https://www.azleg.gov/legtext/55leg/2R/laws/0104.pdf>; An Act Concerning Medical Malpractice and Gender Transition in Minors, 2023 Ark. Act 274, available at <https://www.arkleg.state.ar.us/Home/FTPDocument?path=%2FACTS%2F2023R%2FPublic%2FACT274.pdf>; An Act Relating to Treatments for Sex Reassignment, 2023 Fla. Laws ch. 223-90, available at <http://laws.flrules.org/2023/90>; An Act Relating to Regulation of Hospitals and Related Institutions, so as to Prohibit Certain Surgical Procedures for the Treatment of Gender Dysphoria in Minors from Being Performed in Hospitals and Other Licensed Healthcare Facilities, S.B. 140 (Ga. 2023), available at <https://www.legis.ga.gov/legislation/64231>; An Act Relating to the Vulnerable Child Protection Act, H.B. 71 (Idaho 2023), available at <https://legislature.idaho.gov/wp-content/uploads/sessioninfo/2023/legislation/H0071E1.pdf>; An Act to Amend the Indiana Code Concerning Professions and Occupations, S.B. 480 (Ind. 2023), available at <https://iga.in.gov/legislative/2023/bills/senate/480/#document-c139e764>; An Act Relating to Prohibited Activities regarding Gender Transition Procedures relative to Minors, S.F. 538 (Iowa 2023), available at <https://www.legis.iowa.gov/legislation/BillBook?ga=90&ba=SF538>; An Act related to Children, S.B. 150 (Ky. 2023) codified at Ky. Rev. Stat. § 158, available at <https://apps.legislature.ky.gov/recorddocuments/bill/23RS/sb150/bill.pdf>; Regulate Experimental Adolescent Procedures (REAP) Act, H.B. 1125 (Miss. 2023), available at <http://billstatus.ls.state.ms.us/documents/2023/pdf/HB/1100-1199/HB1125SG.pdf>; Missouri Save Adolescents from Experimentation (SAFE) Act, S.B. 49 (Mo. 2023), available at <https://senate.mo.gov/23info/pdf-bill/tat/SB49.pdf>; Youth Health Protection Act, S.B. 99 (Mont. 2023), available at <https://leg.mt.gov/bills/2023/billpdf/SB0099.pdf>; Let Them Grow Act, L.B. 574 (Neb. 2023), available at <https://nebraskalegislature.gov/FloorDocs/108/PDF/Final/LB574.pdf>; An Act Relating to the Prohibition of Certain Practices against a Minor, H.B. 1254 (N.D. 2023), available at <https://www.ndlegis.gov/assembly/68-2023/regular/documents/23-0869-04000.pdf>; An Act Relating to Health Care; Defining Terms; Prohibiting Gender Transition Procedures for Children, S.B. 613 (Okla. 2023), available at

at least five states treating provision of such care as a felony.⁸ An additional three states punish providing transition-related care to minors as a misdemeanor or otherwise impose fines.⁹ In other words, two-fifths (40%) of the states that have imposed bans on best practice medical care for transgender people allow for criminal sanctions for violations, significantly raising concerns about extraterritorial subpoenas of medical records.

While the state medical care bans are primarily focused on health care providers, many of these laws are drafted so as to permit prosecution of third parties, including parents. The Alabama Vulnerable Child Compassion and Protection Act, for instance, provides that “[N]o person shall engage in or cause any of the following practices to be performed upon a minor if the practice is performed for the purpose of attempting to alter the appearance of or affirm the minor's perception of his or her gender or sex, if that appearance or perception is inconsistent with the minor's sex as defined in this act.”¹⁰ Violation is punishable as a Class C felony.¹¹ Because the class of individuals covered is not limited (“no person”), the prohibited conduct includes not merely providing care but also causing care to be provided, and the law does not exempt care

http://webserver1.lsb.state.ok.us/cf_pdf/2023-24%20ENR/SB/SB613%20ENR.PDF; An Act to Prohibit Certain Medical and Surgical Interventions on Minor Patients, H.B. 1080 (S.D. 2023), *available at* <https://mylrc.sdlegislature.gov/api/Documents/249156.pdf>; An Act to amend Tennessee Code . . . Relative to Medical Care of the Young, 2023 Tenn. Pub. Acts. ch. 1, *available at* <https://publications.tnsosfiles.com/acts/113/pub/pc0001.pdf>; An Act Relating to Prohibitions on the Provision to Certain Children of Procedures and Treatments for Gender Transitioning, Gender Reassignment, or Gender Dysphoria, S.B. 14 (Tex. 2023), *available at* <https://capitol.texas.gov/tlodocs/88R/billtext/pdf/SB00014F.pdf>; Transgender Medical Treatments and Procedures Amendments, S.B. 16 (Utah 2023), *available at* <https://le.utah.gov/~2023/bills/sbillenr/SB0016.pdf>; An Act . . . Relating to Prohibiting Certain Medical Practices; Defining Terms; Prohibiting Irreversible Gender Reassignment Surgery to a Minor; Prohibiting the Providing of Gender Altering Medication to a Minor, H.B. 2007 (W. Va. 2023), *available at* https://www.wvlegislature.gov/Bill_Status/bills_text.cfm?billdoc=hb2007%20sub%20enr.htm&yr=2023&sesstype=RS&i=2007.

⁸ See Alabama Vulnerable Child Compassion and Protection Act, S.B. 184 (Ala. 2022), *available at* <http://alisondb.legislature.state.al.us/ALISON/SearchableInstruments/2022RS/PrintFiles/SB184-enr.pdf>; An Act Relating to Treatments for Sex Reassignment, 2023 Fla. Laws ch. 223-90, *available at* <http://laws.flrules.org/2023/90>; An Act Relating to the Vulnerable Child Protection Act, H.B. 71 (Idaho 2023), *available at* <https://legislature.idaho.gov/wp-content/uploads/sessioninfo/2023/legislation/H0071E1.pdf>; An Act Relating to the Prohibition of Certain Practices against a Minor, H.B. 1254 (N.D. 2023), *available at* <https://www.ndlegis.gov/assembly/68-2023/regular/documents/23-0869-04000.pdf>; An Act Relating to Health Care; Defining Terms; Prohibiting Gender Transition Procedures for Children, S.B. 613 (Okla. 2023), *available at* http://webserver1.lsb.state.ok.us/cf_pdf/2023-24%20ENR/SB/SB613%20ENR.PDF.

⁹ See An Act to Amend the Indiana Code Concerning Professions and Occupations, S.B. 480 (Ind. 2023), *available at* <https://iga.in.gov/legislative/2023/bills/senate/480/#document-c139e764>; An Act to amend Tennessee Code . . . Relative to Medical Care of the Young, 2023 Tenn. Pub. Acts. ch. 1, *available at* <https://publications.tnsosfiles.com/acts/113/pub/pc0001.pdf>; Transgender Medical Treatments and Procedures Amendments, S.B. 16 (Utah 2023), *available at* <https://le.utah.gov/~2023/bills/sbillenr/SB0016.pdf>.

¹⁰ Alabama Vulnerable Child Compassion and Protection Act, S.B. 184 at § 4(a) (Ala. 2022), *available at* <http://alisondb.legislature.state.al.us/ALISON/SearchableInstruments/2022RS/PrintFiles/SB184-enr.pdf>.

¹¹ *Id.* at § 4(c).

provided outside of the state, the Alabama law could be used to punish affirming parents who seek care for their transgender children outside of their home state.

Alabama is not alone in potentially imposing criminal penalties or excessive fines on affirming parents. Tennessee, for instance, permits fines of up to \$25,000 to be imposed on “a person” who “knowingly provide[s] a hormone or puberty blocker by any means to a minor,”¹² with only the minors themselves immune from legal liability.¹³

Other states, including Florida and Texas, have adopted laws or policies that treat the provision of transgender health care to minors as grounds for opening a child protective services investigation or even taking physical custody of the minor away from their parents.¹⁴ Like the criminal provisions discussed above, such investigations could be opened regardless of where the care in question was provided. As such, expanding the proposed rule to also cover medically necessary care is critical for protecting parents of transgender children from criminal sanctions, civil fines, or even having their children stripped away from them by the state simply because they have provided a loving and affirming home environment to their child.

It is thus clear that the legislative attacks on health care for transgender people parallel those on abortion care, leading to similar concerns with respect to the misuse of health data for law enforcement purposes. In many instances, one could replace the preamble’s phrase “reproductive health care” with “transgender health care” and the preamble text would remain fully accurate. For example:

[T]he Department believes that developments in the legal environment have disrupted the balance.¹⁵ ...Those developments have made information related to reproductive health care, which has long been considered highly sensitive, more likely to be of interest for punitive non-health care purposes, and thus more likely to be disclosed if sought for a purpose permitted under the Privacy Rule today. The interest in this sensitive health information is likely to remain high, even where the reproductive health care has been provided under circumstances in which it was lawful to do so. The

¹² An Act to amend Tennessee Code . . . Relative to Medical Care of the Young, 2023 Tenn. Pub. Acts. ch. 1 at §§ 68-33-104, -106, available at <https://publications.tnsosfiles.com/acts/113/pub/pc0001.pdf>.

¹³ *Id.* at § 68-33-108.

¹⁴ See An Act Relating to Treatments for Sex Reassignment, 2023 Fla. Laws ch. 223-90, available at <http://laws.flrules.org/2023/90>; Ken Paxton, Texas Att’y Gen. Op. No. KP-0401, Re: Whether certain medical procedures performed on children constitute child abuse (Feb. 18, 2022), available at <https://texasattorneygeneral.gov/sites/default/files/global/KP-0401.pdf>.

¹⁵ This balance was described earlier in the text of the NPRM at 23516: “The Privacy Rule is balanced to protect an individual’s privacy while allowing the use or disclosure of PHI for certain non-health care purposes, including in certain criminal, civil, and administrative investigations and proceedings.”

Department believes PHI will be increasingly targeted by those seeking evidence for criminal, civil, or administrative investigations into or proceedings against persons in connection with seeking, obtaining, providing, or facilitating reproductive health care—or identifying persons for such purposes, thereby jeopardizing the relationships between individuals and their health care providers, even when such health care is lawfully obtained.¹⁶

This further description of the concerns around improper law enforcement requests for information about lawfully-obtained health care is also strikingly similar to what is happening with medically necessary care for transgender people:

Following the Supreme Court's decision [in *Dobbs*], states have taken actions, some tacitly and some explicitly, that could interfere with individuals' longstanding expectations created by HIPAA and the Privacy Rule with respect to the privacy of their PHI. The Department is aware of reports that persons or authorities have reached or intend to reach beyond their own states' borders to investigate reproductive health care that has been performed in other states where that health care is legal. These actions present new concerns nationwide for the protection of health information privacy mandated by HIPAA. Because the Privacy Rule currently permits uses and disclosures of PHI for certain purposes, including when another law requires a regulated entity to make the use or disclosure, regulated entities after *Dobbs* might be compelled to use or disclose PHI to law enforcement or other persons who may use that health information against an individual, a regulated entity, or another person who has sought, obtained, provided, or facilitated reproductive health care, even when such health care is lawful in the circumstances in which the health care is obtained (emphasis added).¹⁷

And this description of the chilling effect on both patients and providers is equally apt in the transgender health care context:

[I]t would be contrary to the Congressional intent of protecting the privacy of an individual's PHI and access to health care if the Privacy Rule were to permit a regulated entity to use or disclose PHI to investigate and bring proceedings against persons for seeking, obtaining, providing or facilitating reproductive health care, or to identify any person for such purposes, where such health care is lawful under state or Federal law. Permitting such uses and disclosures would also be inconsistent with longstanding individual privacy expectations and could especially chill access to lawful health care ...

¹⁶ 88 Fed Reg at 23516.

¹⁷ 88 Fed Reg at 23519.

If such uses and disclosures are permitted, individuals may delay obtaining lawful health care or withhold information about their condition or medical history because they may not trust their health care providers to use the information only to provide appropriate health care, rather than report them to law enforcement authorities or others. Delaying health care may negatively affect an individual's health, including increasing the risk of death. ... Similarly, if such uses and disclosures are permitted, a health care provider might leave gaps in or include inaccuracies in the individual's medical records, creating a risk that ongoing or future health care would be compromised, because they may not trust that the information would not be obtained by law enforcement authorities or others.¹⁸

The preamble to the NPRM notes that “impingements on health information privacy related to reproductive health care are likely to have a disproportionately greater effect on women, individuals of reproductive age, and individuals from communities that have been historically underserved, marginalized, or subject to discrimination or systemic disadvantage by virtue of their race, disability, social or economic status, geographic location, or environment.”¹⁹ Transgender individuals also have often had great difficulty in obtaining medically needed care and continue to experience pervasive mistreatment and discrimination in the health care system,²⁰ and there are already far too few providers to render appropriate and culturally competent care to this community. The chilling effect on patients and providers that the NPRM describes with respect to reproductive health care applies equally to what is happening for transgender health care.

Finally, it is not a coincidence that the assault on transgender health care has worsened considerably after the Supreme Court’s decision in *Dobbs*. Of the twenty states that have imposed bans on medically necessary care for transgender people, seventeen (85%) adopted those bans during the 2023 legislative session. By undermining decades-old constitutional

¹⁸ 88 Fed Reg at 23529.

¹⁹ 88 Fed Reg at 23520.

²⁰ Center for American Progress, “Advancing Health Care Nondiscrimination Protections for LGBTQI+ Communities,” Sep. 8, 2022, available at <https://www.americanprogress.org/article/advancing-health-care-nondiscrimination-protections-for-lgbtqi-communities/>; National Academies of Sciences, Engineering, and Medicine. 2020. *Understanding the Well-Being of LGBTQI+ Populations*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/25877>; What We Know Project, Cornell University, “What Does the Scholarly Research Say about the Effects of Discrimination on the Health of LGBT People” (online literature review), 2019, available at <https://whatweknow.inequality.cornell.edu/topics/lgbt-equality/what-does-scholarly-research-say-about-the-effects-of-discrimination-on-the-health-of-lgbt-people/>; Hsieh N and Ruther M, Despite Increased Insurance Coverage, Nonwhite Sexual Minorities Still Experience Disparities In Access To Care, *Health Affairs*, Vol. 36, No. 10 (Oct. 2017), available at <https://www.healthaffairs.org/doi/10.1377/hlthaff.2017.0455>; see also U.S. Dept. of Health & Human Services, *Healthy People 2030 (LGBT Objectives)*, available at <https://health.gov/healthypeople/objectives-and-data/browse-objectives/lgbt>.

expectations about bodily autonomy, *Dobbs* has opened the floodgates for states to criminalize and restrict access to transgender health care at the same time they are moving to do the same to access to abortion. Indeed, in a particularly instructive case, Nebraska passed a single statute, Legislative Bill 574, to restrict access to both abortion and transgender healthcare in a single swoop.²¹ Insofar as the *Dobbs* decision justifies swift action to protect sensitive health information regarding reproductive health, it also justifies similarly swift action to protect equally-sensitive information relating to transgender health care.

Proposed Expansion of the Proposed Rule to Encompass Transgender Health Care

While the potential for investigations and proceedings related to the provision of reproductive health care and transgender health care is similar, the types of health care at issue are, while somewhat overlapping, distinct. We therefore encourage OCR to recognize the sensitivity of this additional category of PHI and bring such information within the ambit of this rule. Such an expansion is contemplated in the Request for Comment with respect to “highly sensitive PHI” in the NPRM at IV.B.4.I.²² This could be done in various ways.

One approach would be to create a distinct category of transgender health care, similar to how the NPRM creates the category of reproductive health care, in order to afford it special protections. This would be added as a new definition in 45 CFR § 160.103. The remaining provisions in the Proposed Rule would add “transgender health care” where appropriate alongside “reproductive health care.”

Another option would follow the 2010 recommendation²³ from the National Committee on Vital and Health Statistics (NCVHS) and create a category of “Sexuality and Reproductive Health Information” or something similar that would include information related to: sexual activity; sexual orientation; gender dysphoria and related treatment; abortion, miscarriage, or past pregnancy; infertility and the use of assisted reproduction; sexual dysfunction; and having adopted children. This category would be formally defined within the final rule and subsume within it both reproductive health care and transgender health care, as well as the other related types of care listed.

²¹ L.B. 574 (Neb. 2023), available at <https://nebraskalegislature.gov/FloorDocs/108/PDF/Final/LB574.pdf>

²² 88 Fed Reg at 23534.

²³ See Letter from NCVHS Chair Justine M. Carr to HHS Secretary Kathleen Sebelius (Nov. 10, 2010) (forwarding NCVHS recommendations).

There may also be other pathways to the express inclusion of transgender health care in the final rule. Because transgender health care is a category distinct from and broader than reproductive health care, it should be addressed explicitly and separately in the rule text.

Additional Suggestions to Strengthen the Proposed Rule

The Proposed Rule explains that it would not alter existing exceptions to HIPAA for the reporting of known or suspected child abuse, while clarifying that those exceptions do not apply where the alleged victim does not meet the definition of “person.”²⁴ We support the inclusion of this provision so that it is clear that the exception does not apply to the reporting of abortion or other reproductive health care information. If the Department decides to broaden the final rule to explicitly encompass transgender health care, some additional clarifications will likely be necessary because of the fact that Texas has sought to deem medically necessary care for transgender youth to constitute child abuse,²⁵ and it is conceivable that other states might do the same. If the final rule expressly covers transgender health care, it should state that as long as one of the three sets of criteria in proposed 45 CFR § 164.502(a)(5)(iii) are met - the care is legal in the destination state or the home state, or is federally protected - a categorization of transgender health care as “child abuse” in a home state does not render the new rule inapplicable.

We support the new attestation requirement in the Proposed Rule, and believe it would be helpful to covered entities and business associates for the Department to create a model attestation, as suggested in the NPRM at IV.C.3.u. We also believe that requesters of this type of PHI should, as suggested in IV.C.3.y., be required to include a signed declaration made under penalty of perjury that the requester is not making the request for a prohibited purpose. Given the fear and chilling effects being caused by proliferating bans on abortion and transgender health care, as described extensively in the preamble, it is imperative that overzealous law enforcement officials not be able to easily evade the requirements of this new rule.

²⁴ 88 Fed Reg at 23526.

²⁵ Ken Paxton et al., Re: Whether Certain Medical Procedures Performed on Children Constitute Child Abuse (RQ-0426-KP), Opinion No. KP-0401, at 1 (Feb. 18, 2022), <https://texasattorneygeneral.gov/sites/default/files/global/KP-0401.pdf>; Greg Abbott, Letter to Hon. Jaime Masters, Commissioner, Tex. Dep’t of Fam. & Protective Servs. (Feb. 22, 2022), <https://gov.texas.gov/uploads/files/press/O-MastersJaime202202221358.pdf>.

Thank you for the opportunity to provide comments on this Proposed Rule. If you require additional information, please contact Julie Gonen, NCLR's federal policy director, at jgonen@nclrights.org or 202-734-3547.

Sincerely,

National Center for Lesbian Rights
National Center for Transgender Equality

Joined by

ABCD Therapy & Consulting, LLC
Academy LGBTQ
Advocates for Youth
Affinity Community Services
Allentown Women's Center
Aunt Rita's Foundation
Autistic Self Advocacy Network
Baltimore Safe Haven
bklyn boihood
Black and Latino LGBTQ Coalition
Center for Psychological Growth
CenterLink: The Community of LGBTQ Centers
COLAGE
Colors+
Community Catalyst
Connecticut College - Gender & Sexuality Programs
DC Abortion Fund
Denver Area Trans-Autistic Peer Support
Empire Justice Center
Equality California
Equality Federation
EqualityMaine
Fair Wisconsin
Fairness Campaign
Family Equality
Feminist Women's Health Center
Fenway Health
Florida Access Network
FORGE, Inc.
Free to Be Youth Project
GLMA: Health Professionals Advancing LGBTQ+ Equality
Grand Rapids Trans Foundation

GSAFE
HealthHIV
Human Rights Clinic, University of Miami School of Law
Indiana Legal Services
Institute for LGBT Health and Wellbeing
interACT: Advocates for Intersex Youth
Interior AIDS Association
Jackson (MI) Pride Center
Juxtaposed Center for Transformation Inc
Kentucky Youth Law Project, Inc.
Legal Momentum, The Women's Legal Defense and Education Fund
LGBT Life Center
LGBTQ+ Allies Lake County
Los Angeles LGBT Center
Lyon-Martin Community Health Services
Maine Family Planning
Massachusetts Transgender Political Coalition
Mazzoni Center
Movement Advancement Project
NASW - ME Chapter
National Black Trans Advocacy Coalition
National Coalition for LGBTQ Health
National Disability Rights Network (NDRN)
National Education Association
National Health Law Program
National LGBTQ Task Force
National Network to End Domestic Violence
National Partnership for Women & Families
National Trans Bar Association
New Haven Pride Center
One Colorado
Oregon LGBTQ+ Aging Coalition
oSTEM at Rutgers University
OUT in STEM at UT Austin
OutFront Minnesota
OutNebraska
ParivarBayArea
Pennsylvania Youth Congress
Persad Center
Pflag Athens Area, Georgia
Philly Trans March
Planned Parenthood Federation of America
Plume
PRISM FL, Inc

Pro-Choice Connecticut
PROMO
QMed, LLC
QueerDoc
Rainbow Families DC
Rainbow Health Minnesota
Reframe Health and Justice
SAGE
Sam & Devorah Foundation for Trans Youth
San Diego Black LGBTQ Coalition
Serotiny Counseling
Silver State Equality
Sioux Falls Pride
SistersPGH
Someone Cares, Inc of Atlanta
Southern Arizona Senior Pride
SQSH (St. Louis Queer+ Support Helpline)
Tennessee Equality Project
The Alliance for LGBTQ Youth
The Hite Law Group
The LGBTQ Youth Space
The LIAM Foundation
The Milwaukee LGBT Community Center
The Spahr Center
The Spectrum Center
The Transformation Project
The Transology Association
TRACTION
Trans Maryland
Trans Youth Equality Foundation
Trans(forming)
TransActive Gender Project
Transathlete.com
TransFamily Support Services
Transformation Project Advocacy Network
Transgender Assistance Program of Virginia
Transgender Legal Defense & Education Fund
Transgender Michigan
Transgender Strategy Center
Transhealth
Transinclusive Group
TransVisible Montana
True Colors United
UCSF

Unitarian Universalist Association
University of Iowa Law and Policy in Action Clinic
Watke, Polk & Sena, LLP
Waves Ahead Puerto Rico Corp
West County Health Centers Inc.
Whitman-Walker Institute
Youth MOVE National
Youth Outlook