



www.lsc.ohio.gov

# OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research  
and Drafting

Legislative Budget  
Office

H.B. 68  
135<sup>th</sup> General Assembly

## Fiscal Note & Local Impact Statement

[Click here for H.B. 68's Bill Analysis](#)

**Version:** As Introduced

**Primary Sponsor:** Rep. Click

**Local Impact Statement Procedure Required:** No

Ryan Sherrock, Economist

### Highlights

- There may be costs to licensing boards, regulating specified medical professionals, to investigate complaints and violations of the bill's provisions. The costs will depend on the scope and number of investigations.
- The Ohio Department of Health (ODH) will realize costs to receive and compile information from a mental health professional who diagnoses or treats a minor for a gender-related condition. The costs will depend largely on how the information is received (e.g., will a database or website be developed, etc.) and how much information is gathered.
- There could be costs to local courts if an individual brings any cases forward regarding the bill's provisions. These costs will depend on the number and scope of cases. Additionally, the Ohio Attorney General's Office may realize an increase in costs if any actions are taken to enforce compliance with the bill's provisions.
- The bill prohibits Medicaid coverage of gender transition services for minors.

### Detailed Analysis

#### Medical and mental health care professionals

The bill regulates the provision of gender transition services to minors by addressing several facets of gender transition. Specifically, the bill prohibits physicians from knowingly performing genital or nongenital reassignment surgery on a minor, prescribing a cross-sex hormone or puberty blocking drug for a minor for the purpose of assisting the minor with gender transition, and from engaging in conduct that aids or abets the performance of gender reassignment surgery on a minor or the prescription of a cross-sex hormone or puberty blocking

drug for a minor for the purpose of gender transition. Also, the bill prohibits a mental health professional from diagnosing or treating a minor for a gender-related condition without first obtaining the consent of the minor's residential parent and legal custodian or the minor's guardian. These professionals must screen the minor individual for comorbidities that may be influencing the minor individual's gender-related condition and for physical, sexual, mental, and emotional abuse and other traumas. Additionally, the bill requires any mental health professional who diagnoses or treats a minor for a gender-related condition to annually report to the Ohio Department of Health (ODH) specified information regarding minors diagnosed or treated for a gender-related condition. The bill requires ODH to submit an annual report compiling this information. ODH will realize costs to receive and compile information from a mental health professional who diagnoses or treats a minor for a gender-related condition and possibly to promulgate rules. The costs will depend largely on how the information is received (e.g., will a database or website be developed, etc.) and how much information is gathered, as well as the level of technical assistance provided. Under the bill, a medical health care or mental health care professional who violates these provisions is engaging in unprofessional conduct and is subject to discipline by the appropriate licensing board. As a result, occupational licensing boards regulating these professionals could realize an increase in costs to address licensee questions or to respond and investigate any potential complaints or violations.

The bill bans political subdivisions from prohibiting the use of watchful waiting, treatment and therapies similar to those provided for in the treatment of body dysmorphia and eating disorders, or other models of care that attempt to help a minor reconcile their gender identity with their biological sex. If there are any administrative or enforcement costs associated with these bans, those costs would be eliminated.

## **Medicaid**

The bill prohibits Medicaid from covering gender transition services for minors. However, the prohibition does not include mental health services provided for a minor's gender-related condition, any services that are not gender transition services, or certain permissible medical services addressed in the bill. If any of the services prohibited by the bill are currently provided to minors (enrolled onto Medicaid), then Medicaid could no longer provide any reimbursements. The majority of Medicaid enrollees receive services through a Medicaid managed care organization (MCO), which are paid a capitated rate for providing services. Thus, any impact associated with this provision will reflect in the capitation rates that Medicaid pays to the MCOs.

## **Enforcement**

The bill allows an individual to bring a claim for a violation of the bill's provisions within two years of the date the cause of action accrues. A minor may bring an action through a parent or guardian, or after turning 18, may do so independently within 20 years. These provisions could lead to increased court costs. The cost will depend on the number and scope of claims brought forward. Court fines could also be received. Finally, the bill allows the Ohio Attorney General to bring an action to enforce compliance with the bill's provisions, which could result in costs if any action is taken.

## **Parental rights and responsibilities**

The bill prohibits a judge, when allocating parental rights and responsibilities, from considering a parent's decision to refer to and raise their child in a manner consistent with the

child's biological sex, to decline to consent to their child receiving gender transition services, or to decline to consent to their child receiving mental health services that affirm the child's self-perception as transgender. This should not have a direct fiscal effect on courts. However, if any cases were conducted previously and these things were considered, it is possible that a parent may seek to have the decision reevaluated.

### **Effective date**

The bill takes effect six months after its effective date.