CONCERNED WOMEN for AMERICA

February 17, 2026

TO: Centers for Medicare & Medicaid Services, U.S. Department of Health and Human Services

RE: Medicare and Medicaid Programs; Hospital Condition of Participation: Prohibiting Sex-Rejecting Procedures for Children, CMS-3481-P, RIN 0938-AV87

Concerned Women for America (CWA) strongly supports the Department of Health and Human Services (HHS) proposed rule, Medicare and Medicaid Programs; Hospital Condition of Participation: Prohibiting Sex-Rejecting Procedures for Children, (CMS-3481-P), prohibiting hospitals from administering chemical and surgical procedures that seek to suppress or modify a minor's immutable sex and normal development as male or female. We agree these changes are necessary to protect the health and well-being of children.

CWA is the largest public policy organization for women in the nation. The hundreds of thousands of women we represent believe it is unconscionable that the medical profession is exploiting youth by lying to them about their sex and promoting transgenderism. This reckless trend in medicalization is leading to countless tragedies affecting youth, families, and communities.

For years, CWA has been on the front line taking a powerful stand against the travesty of the deceptive claims of so-called "gender-affirming care" (GAC). In Washington, D.C., and across the states, CWA leaders have been educating and advocating for recognition of harm, medical restrictions, and legal protections against activist-prescribed protocols instigated by the self-anointed World Professional Association for Transgender Health (WPATH). The so-called "standards of care" recommended by WPATH and its network of collaborators are experimental, unethical, and erroneous. They ignore the underlying traumas and mental health conditions contributing to a crisis of identity.

A rigorous and peer-reviewed comprehensive review of evidence released by HHS concluded these medical practices show weak to no evidence of benefiting youth suffering from gender dysphoria. Within the scope of its mandate, the Federal Trade Commission is currently investigating health care organizations that advocate these deceptive and unproven procedures, including the American Academy of Pediatrics (AAP) and WPATH.

Sadly, the unethical malpractice being performed on children who cannot ethically consent to radical, irreversible, and life-long harm to their bodies is reflective of the greed and depravity driving the U.S. medical establishment.

"Gender-affirming care" is not healthcare

CWA strongly supports HHS's replacement of the misleading label "gender-affirming care" with the accurate term "sex-rejecting procedures." It is high time that the truth about GAC's deception be accurately acknowledged under federal law for what it is.

Healthcare, broadly defined, is the field concerned with the maintenance or restoration of the health of the body and mind. GAC is not healthcare. Puberty blockers, cross sex hormones, and surgeries aim to recreate the physical body to conform to a self-derived identity that rejects a person's natal sex. This is not a treatment to maintain or restore the health of the body or mind. It is, on its face, a deceptive medical practice that deconstructs and damages the body and mind. These treatments never seek to restore a person's physical health.

There is also no proof that these interventions resolve gender dysphoria. They certainly do not constitute "medically necessary healthcare for trans youth" as proponents claim. In fact, tragically, two troubled youth who were participating in a federal National Institutes of Health study committed suicide while receiving sex-rejecting drugs.

Sex-rejecting procedures should never be practiced on youth to affirm a fantasy that a person can change sex or become the opposite sex. No male taking estrogen will ever menstruate or bear children. This deceptive, unethical practice should not be performed in hospitals receiving federal Medicare and Medicaid funding.

There is good reason why entities complicit in the industry would be wise to put the brakes on their practices. In the first of its kind verdict, a court in New York recently awarded a young woman $2 million for the pain, suffering, and future medical costs associated with the mutilation of her body by a psychiatrist and plastic surgeon who convinced her as a teenager that she was a boy. Such doctors claim they are following professional "standards of care." Those "standards" are being worn as scars by young women like Fox Varian, Chloe Cole, Prisha Mosley, Luka Hein, Soren Aldaco, and, sadly, many sisters to follow.

This jury got it right. Fox Varian was a teen with serious mental health conditions. She needed truth and direction, not deception and escape. Rejecting her body as the solution to her problems was a path pushed by medical elitism that adheres to a destructive ideology, not compassionate, evidence-based care. The stain on professional medical associations fanning the scandal is only getting bloodier. Youth struggling with identity have been deceived and their bodies mutilated. They need the clear-eyed integrity of mental

health treatment that seeks their wholeness in alignment with their sex, not abusive affirmation of their confusion.

CWA encourages reconsideration of the age of application for this rule

Soren Aldaco's case is a key example of why extending the age range for this rule is important. Aldaco's mutilating mastectomy was performed at age 19. She soon realized she had been gaslit by the medical industry and left with serious bruising and seeping wounds. College-aged women are being captured in a queer identity culture and encouraged to "masculinize" their bodies. GoFundMe pages can be found through campus networks, fundraising for these mutilating surgeries. College-aged men seeking breast augmentation are another cash cow for hospitals. No hospital should be green-lighting sex-rejecting procedures on women or men in their late teens and twenties. The age for pediatric care generally extends through the early twenties in recognition of this critical phase of development into early adulthood.

Gender dysphoric youth and adults require the care and compassion of health care professionals who should be committed to the Hippocratic oath. Instead, vulnerable adolescents experiencing a crisis of identity have been misled by self-anointed "experts" driving them to treatments motivated by personal ideologies and agendas, not the protection of adolescents.

The ticking time bomb of regret

No child is born in the wrong body. Suggesting to a child that he could be is a vicious, abusive lie. It is the underlying evil of a medical practice using today's youth as pawns in a destructive social experiment. The time bomb of regret is ticking. Full reckoning must start now.

This proposed rule can help stem the destruction and provide a key tool of restraint to encourage a return to ethical practice that upholds the principle of do no harm. States with laws protecting children from sex-rejecting procedures consistent with this rule have been affirmed in their judgment by the U.S. Supreme Court in *United States v. Skrmetti*.

The aggressive GAC industry has been controlled and driven by an activist class within medical professional organizations that has allowed ideology to overrule evidence. Hospitals are complicit in promoting procedures that should never be medically indicated. The staggering rise in demand and harm to youth and families caught in a web of deception should come as no surprise.

The veil of trans insanity is finally being lifted. Regret is the new frontier, with its own challenges, for a medical industry unprepared to undo the damage it has wrought.

CWA applauds HHS for acting to protect youth from the appalling advice of medical institutions that have chosen to motivate, accommodate, and profit from the fluid feelings of vulnerable boys and girls who need time and healthy influences to grow up into the men and women they are created to be.

The level of sickness in American medicine today over treatment for gender dysphoria can only be managed with a straitjacket. HHS proposed rules are a necessary part of the solution, requiring federal funding recipients to follow strict constraints on treatment. Americans must be protected from participating in the destruction of our children by unethical medical practice being driven by an obsession with queer identity.