SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure as introduced. The statement includes a measure digest written in compliance with applicable readability standards.

Digest: The Act says that health care workers may not alter a minor's sex or refer the minor to another health care worker to alter the minor's sex. The Act says that public funds may not be used to alter a minor's sex. The Act says that health insurance policies may not pay to alter a minor's sex. The Act allows a health care worker licensing board to punish a health care worker who alters a minor's sex. The Act allows a person whose sex was altered when the person was a minor to sue the health care worker who altered the minor's sex or who referred the minor to the health care worker who altered the minor's sex. The Act goes into effect when the Governor signs it. (Flesch Readability Score: 71.5).

Prohibits a medical health care professional from referring a minor for, or performing on a minor, a sex alteration procedure. Defines the term "sex alteration procedure." Provides that the performance of a sex alteration procedure on a minor is unprofessional conduct subject to discipline by the appropriate health professional licensing board. Allows an individual to bring a claim for a violation and to recover specified damages.

Declares an emergency, effective on passage.

NOTE: Matter in boldfaced type in an amended section is new; matter [italic and bracketed] is existing law to be omitted. New sections are in boldfaced type.
rience distress related to a fixation on the reality of their sex, despite the fact that no randomized 
clinical trials have been conducted on the efficacy or safety of the use of cross-sex hormones in 
adults or children for the purpose of treating such distress; and

Whereas the use of cross-sex hormones comes with serious known risks, including, for female 
individuals, erythrocytosis, severe liver dysfunction, coronary artery disease, cerebrovascular dis-
ease, hypertension, increased risk of breast and uterine cancers and irreversible infertility, and for 
male individuals, thromboembolic disease, cholelithiasis, coronary artery disease, 
macroprolactinoma, cerebrovascular disease, hypertriglyceridemia, breast cancer and irreversible 
infertility; and

Whereas genital and nongenital modification, amputation and mutilation surgeries are generally 
not recommended for children, although evidence indicates referrals for children to undergo such 
surgeries are becoming more frequent; and

Whereas genital modification, amputation and mutilation surgeries include several irreversible 
invasive procedures for both male and female individuals and involve alterations of biologically 
normal and functional body parts, including, for male individuals, surgery that may involve genital 
validation including penectomy, orchiectomy, vaginoplasty, clitoroplasty and vulvoplasty, and for 
female individuals, surgery that may involve a hysterectomy or oophorectomy, reconstruction of the 
urethra, genital mutilation including metoidioplasty or phalloplasty, vaginectomy, scrotoplasty and 
implantation of erection or testicular prostheses; and

Whereas the complications, risks and long-term care concerns associated with genital modifica-
tion, amputation and mutilation surgeries for both male and female individuals are numerous and 
complex; and

Whereas nongenital surgeries include various invasive procedures for male and female individ-
uals and also involve the modification, amputation and mutilation of biologically normal and func-
tional body parts, including, for male individuals, procedures such as augmentation mammoplasty, 
facial feminization surgery, liposuction, lipofilling, voice surgery, thyroid cartilage reduction, gluteal 
augmentation, hair reconstruction and other aesthetic procedures, and for female individuals, pro-
ductions such as subcutaneous mastectomy, voice surgery, liposuction, lipofilling, pectoral implants 
and other aesthetic procedures; and

Whereas it is an accepted principle of economics and public policy that when a service or 
product is subsidized or paid for, demand for that service or product increases, and just between 
2015 and 2016, sex alteration surgeries increased by 20 percent; and

Whereas it is of grave concern to Oregonians that the medical community is allowing individ-
uals who experience distress related to a fixation on the reality of their sex to be subject to irre-
versible and drastic nongenital surgery and irreversible, permanently sterilizing genital modification, 
amputation and mutilation surgeries, despite the lack of studies showing that the benefits of such 
extreme interventions outweigh the risks; and

Whereas the risks of these procedures far outweigh any benefit at this stage of clinical study 
on these procedures; now, therefore,

Be It Enacted by the People of the State of Oregon:

SECTION 1. As used in sections 1 to 4 of this 2024 Act:

(1) “Female” means the sex that typically has the capacity to bear young or produce 
eggs.

(2) “Male” means the sex that typically has the capacity to produce relatively small, 
usually motile, gametes that fertilize the eggs of a female individual.
(3) “Medical health care professional” means the following individuals:

(a) A nurse licensed under ORS 678.010 to 678.410;
(b) A physician licensed under ORS chapter 677;
(c) A physician assistant licensed under ORS 677.505 to 677.525;
(d) A psychologist licensed under ORS 675.010 to 675.150;
(e) A pharmacist licensed under ORS chapter 689; or
(f) Other individual licensed to provide medical health care services.

(4) “Minor” means an individual who is under 18 years of age.

(5) “Sex” means the biological indication of male and female, such as sex chromosomes, naturally occurring sex hormones, gonads and nonambiguous internal and external genitalia present at birth, without regard to an individual’s psychological, chosen or subjective experience.

(6)(a) “Sex alteration procedure” means, when performed or used for the purpose of approximating the secondary sex characteristics of the opposite sex, a medical or surgical service, physician service, inpatient or outpatient hospital service or prescription drug intended to alter or remove physical or anatomical characteristics or features that are typical for the individual’s sex or to cosmetically create physiological or anatomical characteristics that resemble a sex different from the individual’s sex.

(b) “Sex alteration procedure” does not include:

(A) A service provided to an individual born with a medically verifiable disorder of sex development;
(B) A service provided to an individual diagnosed, through genetic or biochemical testing, with a disorder of sexual development resulting from not having typical sex chromosome structure, sex steroid hormone production or sex steroid hormone action; or
(C) The treatment of an infection, injury, disease or disorder caused or exacerbated by the performance of a sex alteration procedure.

SECTION 2. (1) A medical health care professional may not, for an individual who is a minor:

(a) Perform a sex alteration procedure on the minor; or
(b) Refer the minor to another medical health care professional for the purpose of obtaining a sex alteration procedure.

(2) A mental health professional may not refer a minor to a medical health care professional for the purpose of obtaining a sex alteration procedure.

(3) An employee or contractor of a public or private school may not, for an individual who is a minor:

(a) Encourage or coerce the minor to withhold from the minor's parent or legal guardian the fact that the minor's self-perception is inconsistent with the minor's sex; or
(b) Withhold from the minor's parent or legal guardian information related to the minor's self-perception being inconsistent with the minor's sex.

SECTION 3. (1) Public funds may not be directly or indirectly used for or granted, paid or distributed to an entity, organization or individual that provides or performs a sex alteration procedure to or for a minor.

(2) The health care services provided by or in a health care facility owned or operated by the state or a county or local government, or by a physician or other individual employed by the state or a county or local government, may not include sex alteration procedures
provided to minors.

(3) Any amount paid by an individual or an entity for the provision of sex alteration procedures for minors, or as premiums for a policy for health insurance that includes coverage for sex alteration procedures for minors, is not tax deductible.

(4) Medical assistance may not include sex alteration procedures provided to minors.

(5) A policy for health insurance may not provide payment or reimbursement for sex alteration procedures provided to minors.

SECTION 4. The provision of a sex alteration procedure to a minor shall be considered unprofessional conduct by a medical health care professional for which the medical health care professional may be subject to disciplinary action by the appropriate health professional licensing board.

SECTION 5. (1) A person may bring a claim for a violation of section 2 or 3 of this Act and recover economic and noneconomic damages, injunctive relief or declaratory relief.

(2) (a) Except as provided in paragraph (b) of this subsection, an action under this section must be commenced not later than two years after the action accrues.

(b) An individual subjected as a minor to a violation of section 2 or 3 of this Act may bring a claim under this section at any time before the individual reaches 38 years of age.

(3) The court shall award reasonable attorney fees to a prevailing plaintiff in a civil action under this section.

(4) The Attorney General may bring an action to enforce compliance with section 2 or 3 of this Act.

SECTION 6. ORS 435.225 is amended to read:

435.225. (1) An officer, employee or agent of a public body may refuse to accept the duty of offering reproductive health care information and services to the extent that such duty is contrary to the personal or religious beliefs of the officer, employee or agent. However, such officer, employee or agent shall notify the immediate supervisor in writing of such refusal in order that arrangements may be made for eligible individuals to obtain such information and services from another officer, employee or agent.

(2) (a) If an officer, employee or agent of a public body refuses to provide reproductive health care information and services as provided in subsection (1) of this section, the public body shall immediately make arrangements for an individual to receive reproductive health care information and services from another officer, employee or agent of the public body.

(b) A public body is not required to make the arrangements described in paragraph (a) of this subsection if the arrangements would constitute an impermissible referral of a minor for a sex alteration procedure under section 2 of this Act.

(3) The refusal of an officer, employee or agent of a public body to provide reproductive health care information and services under subsection (1) of this section may not be grounds for any disciplinary action, for dismissal, for any interdepartmental transfer, for any other discrimination in employment, or for suspension from employment, or for any loss in pay or other benefits.

SECTION 7. ORS 435.240 is amended to read:

435.240. (1) Except as provided in ORS 435.225 and sections 2 and 3 of this Act, a public body or, except as provided in ORS 435.225, an officer, employee or agent of a public body may not:

(a) Deprive a consenting individual of the choice of exercising the individual's reproductive
health rights under ORS 435.210;
(b) Interfere with or restrict, in the regulation of benefits, facilities, services or information, the choice of a consenting individual to exercise the individual's reproductive health rights under ORS 435.210;
(c) Prohibit a health care provider, who is acting within the scope of the health care provider's license, from providing reproductive health care information and services to a consenting individual;
(d) Interfere with or restrict, in the regulation of benefits, facilities, services or information, the choice of a health care provider, who is acting within the scope of the health care provider's license, to provide reproductive health care information and services to a consenting individual;
(e) Subject an individual to criminal or civil liability or penalty, or otherwise deprive the individual of any rights, based on the individual's actions or omissions in exercising the individual's reproductive health rights under ORS 435.210, including any action or omission affecting an actual, potential or alleged pregnancy outcome; or
(f) Subject any person to criminal or civil liability or penalty, or otherwise deprive any person of the person's rights, based solely on the person's actions in the provision of aid, assistance, resources or support to an individual in the exercise of the individual's reproductive health rights, provided that the person's actions do not otherwise violate the laws of this state.
(2)(a) Nothing in this section is intended to prevent the application of laws, rules, ordinances or taxes that affect the method or manner of sales or distribution of contraceptive devices or the provision of reproductive health care, provided that the laws, rules, ordinances or taxes are designed to promote public health and safety and do not unreasonably burden public access to contraception or other reproductive health care.
(b) Nothing in this section requires a public body to provide or pay for reproductive health care.
SECTION 8. This 2024 Act being necessary for the immediate preservation of the public peace, health and safety, an emergency is declared to exist, and this 2024 Act takes effect on its passage.