Do No Harm
ACTION

February 4, 2026

Testimony in Opposition to HB 4088

To the Chair and Members of the Committee,

Thank you for the opportunity to submit this written testimony. My name is Dr. Kurt Miceli, and I serve as Do No Harm Action's Chief Medical Officer.

Do No Harm Action's mission is to ensure that the practice of medicine is driven by scientific evidence. We work to defend the timeless standards of medical excellence against outside influences that would undermine patient trust and public health.

To that end, we write in opposition to HB 4088. We are concerned that the bill, as drafted, undermines transparency, will inevitably limit research, and ultimately places children at risk.

HB 4088 grants protections to pediatric medical transition far beyond those afforded to nearly any other medical service. It extends extraordinary safeguards to an area of medicine where the risks outweigh the benefits, as shown by various systematic reviews, and acknowledged most recently by the American Society of Plastic Surgeons. This is an area where transparency, not secrecy, is sorely needed.

Furthermore, Section 3 is drafted so broadly that it would bar public bodies from providing information or assistance not only to federal or interstate law enforcement, but also to any private citizen seeking information related to reproductive or "gender-affirming" healthcare.

This could inadvertently impede research related to prenatal care, miscarriages, prevention of sexually transmitted infections (STIs), and other healthcare activities. None of these activities are related to interstate investigations into "gender-affirming care," yet all would be swept within the bill's prohibitions. Such valuable work should not be constrained.

Additionally, Section 9 creates a new confidentiality rule for individually identifiable information held by the Oregon Health Authority. Protecting patient privacy is essential, and both federal and state law already impose strict safeguards on protected health information (PHI). However, Section 9 goes further than existing law.

Under the Health Insurance Portability and Accountability Act or HIPAA, 45 C.F.R. § 164.514 allows the release of "limited datasets" for research, public health, and healthcare operations. These datasets never include names, Social Security numbers, addresses, or other direct identifiers. They do, however, permit the release of certain elements — such as dates of service or limited geographic information — that are essential for evaluating the safety and effectiveness of medications, treatments, and public health interventions.

As a result of this bill, Oregon researchers would lose access to crucial data that could be used to study maternal health outcomes, STI trends, medication safety, and other critical healthcare matters. This would place Oregon far outside national norms and would impede evidence-based policymaking. Research consistent with HIPAA's de-identification standards and federal law should not be hindered.

Lastly, the broad language of HB 4088 may impair parents' ability to safeguard their children across state lines. The bill could inadvertently shield adults who facilitate a minor's travel without parental consent, provided that such actions were undertaken for the purpose of assisting the minor in obtaining "gender-affirming care."

Moreover, the bill could limit parents' ability to obtain crucial information if they believe their child is being harmed. The bill would limit access to medical records, curtail cooperation with outside investigations, and block civil actions brought under other states' laws.

This could have the impact of hindering a child harmed in the process of obtaining "gender-affirming care" from seeking justice

For these reasons, we oppose HB 4088. Thank you for your time and consideration.

Sincerely,

Kurt Miceli, MD
CHIEF MEDICAL OFFICER
Do No Harm Action