

**Missouri State Medical Association
House of Delegates**

Resolution # 1
(A-23)

Introduced by: Charles Adams, Kansas City University College of Osteopathic Medicine and Alex Shimony, Washington University in St. Louis School of Medicine

Subject: Access to Gender-Affirming Surgery and Hormone Replacement Therapy for Transgender and Gender-Diverse Individuals

Referred to: Reference Committee A

1 **WHEREAS**, gender-affirming healthcare for gender diverse adults has been deemed medically necessary
2 by every major medical association, including but not limited to: the American Academy of Family
3 Physicians, American College of Obstetricians and Gynecologists, American College of Physicians,
4 American Heart Association, American Medical Association, American Osteopathic Association,
5 American Medical Student Association, American Psychiatric Association, American Psychological
6 Association, American Public Health Association, American Society of Plastic Surgeons, Endocrine
7 Society, World Medical Association, and World Professional Association for Transgender Health^{1,2}; and,
8

9 **WHEREAS**, the largest trans survey of all time found that forty percent of transgender and gender
10 diverse (TGD) people attempt suicide within their lifetime, a rate nine times higher than that of the
11 general American population³; and,
12

13 **WHEREAS**, gender affirming healthcare has been shown to decrease psychological distress and suicidal
14 ideation in transgender individuals^{4,5}; and,
15

16 **WHEREAS**, studies do not demonstrate an increase in cardiovascular events, cancer or mortality in
17 people treated with long term testosterone or estrogen therapy^{6,7}; and,
18

19 **WHEREAS**, one in four transgender people seeking hormone replacement therapy are denied insurance
20 coverage, and over half of transgender people seeking transition-related surgery are denied insurance
21 coverage³; and,
22

23 **WHEREAS**, access to medical transition facilitates social transition and improves safety in public⁸; and,
24

25 **WHEREAS**, multiple states have recently proposed legislation attempting to limit gender-affirming care
26 for adults over the age of 18, including but not limited to Florida, South Carolina, Mississippi, Oklahoma,
27 Alabama, Arkansas, Kansas, and Missouri^{9,10}; and,
28

29 **WHEREAS**, Missouri lawmakers recently proposed a bill to legalize state insurance plans deny coverage
30 of gender-affirming care without specifying age requirements making this applicable to adults^{11,12};
31 therefore, be it,
32

33 **RESOLVED**, that our MSMA recognizes that policies and legislation that limit access to gender-affirming
34 care have broad negative repercussions for Missouri residents; and be it further,
35

36 **RESOLVED**, that our MSMA supports the codification of protections for gender-affirming care into state
37 law; and be it further,

38
39 **RESOLVED**, that our MSMA supports broad and equitable access to gender-affirming healthcare, public
40 and private coverage of gender-affirming healthcare as an essential health benefit, and funding of
41 gender-affirming healthcare in public programs; and be it further,

42
43 **RESOLVED**, that our MSMA oppose limitations on government funding for gender-affirming care.

Fiscal Note: None

Current Policy: None

References:

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