
SENATE CONCURRENT RESOLUTION

REQUESTING THE AUDITOR TO ASSESS THE SOCIAL AND FINANCIAL
EFFECTS OF REQUIRING HEALTH INSURERS TO PROVIDE COVERAGE
FOR HEALTH CARE SERVICES RELATED TO GENDER TRANSITION
TREATMENTS.

1 WHEREAS, according to the American Medical Association,
2 approximately 1.4 million adults and one hundred fifty thousand
3 youth ages thirteen to seventeen in the United States identify
4 as transgender, meaning those individuals' gender identity
5 and/or expression is different from cultural expectations based
6 on the sex they were assigned at birth, or identify as gender
7 expansive, meaning they identify with neither a traditional
8 binary gender role nor a single gender narrative or experience;
9 and

10
11 WHEREAS, many but not all transgender people experience
12 gender dysphoria, a medical condition defined by the American
13 Medical Association as a "conflict between a person's physical
14 or assigned gender and the gender with which he/she/they
15 identify"; and

16
17 WHEREAS, standards of care and accepted medically necessary
18 services that affirm gender or treat gender dysphoria may
19 include but are not limited to mental health counseling, non-
20 medical social transition, gender-affirming hormone therapy, and
21 gender-affirming surgeries; and

22
23 WHEREAS, every major medical association in the United
24 States recognizes the medical necessity of transition-related
25 care for improving the physical and mental health of transgender
26 people and has called for health insurance coverage for
27 treatment of gender dysphoria; and

28



1 WHEREAS, as a population, transgender individuals are
2 frequently subject to bias and discrimination in many aspects of
3 their lives, including the provision of health care; and
4

5 WHEREAS, the transgender population is less likely to be
6 insured than the lesbian, gay, and bisexual (LGB) and general
7 populations and often faces challenges in accessing needed
8 health care services; and
9

10 WHEREAS, a 2016 report by the National Center for
11 Transgender Equality found that:

- 12
- 13 (1) Twenty-five percent of surveyed respondents
14 experienced a problem with their insurance in the past
15 year related to being transgender, such as being
16 denied coverage for care related to gender transition;
17
 - 18 (2) Twenty-five percent of those who sought coverage for
19 hormones in the past year were denied;
20
 - 21 (3) Fifty-five percent of those who sought coverage for
22 transition-related surgery in the past year were
23 denied;
24
 - 25 (4) Seventy-eight percent of respondents wanted hormone
26 therapy related to gender transition, but only forty-
27 nine percent had ever received it;
28
 - 29 (5) Forty-two percent reported that insurance covered only
30 some of the surgical care needed for transition; and
31
 - 32 (6) Twenty-one percent reported that insurance covered
33 transition-related surgery, but had no in-network
34 providers; and
35

36 WHEREAS, according to the American Medical Association,
37 transgender individuals in the United States are three times
38 more likely than the general population to report or be
39 diagnosed with mental health disorders, with as many as 41.5
40 percent reporting at least one diagnosis of a mental health or
41 substance abuse disorder; and
42



1 WHEREAS, the increased prevalence of these mental health
2 conditions is widely thought to be a consequence of minority
3 stress, which is the chronic stress from coping with societal
4 stigma and discrimination because of one's gender identity and
5 expression; and

6
7 WHEREAS, gender-based discrimination affecting access to
8 services is a strong predictor of suicide risk among transgender
9 persons; and

10
11 WHEREAS, lack of access to gender-affirming care may
12 directly contribute to poor mental health, and individuals with
13 gender dysphoria who have undergone no gender confirmation
14 treatment are twice as likely to experience moderate to severe
15 depression and four times more likely to experience anxiety than
16 their surgically-affirmed peers; and

17
18 WHEREAS, improving access to gender-affirming care is an
19 important means of improving health outcomes for the transgender
20 population; and

21
22 WHEREAS, patients who receive gender-affirming care,
23 including surgical care, feel more congruent in their bodies and
24 report improved mental health; and

25
26 WHEREAS, studies suggest that improved body satisfaction
27 and self-esteem following medical and surgical therapies is
28 protective against poorer mental health and also supports
29 healthy relationships with parents and peers; and

30
31 WHEREAS, positive health effects from gender-affirming care
32 extend to children and adolescents as well, and recent research
33 demonstrates that integrated affirmative models of care for
34 youths, which include access to medications and surgeries,
35 result in fewer mental health concerns than have been
36 historically seen among transgender populations; and

37
38 WHEREAS, this body supports health insurance coverage for
39 specific types of health care treatments and services for gender
40 transition, as medically necessary; and

41



1 WHEREAS, section 23-51, Hawaii Revised Statutes, requires
2 that "[b]efore any legislative measure that mandates health
3 insurance coverage for specific health services, specific
4 diseases, or certain providers of health care services as part
5 of individual or group health insurance policies, can be
6 considered, there shall be concurrent resolutions passed
7 requesting the auditor to prepare and submit to the legislature
8 a report that assesses both the social and financial effects of
9 the proposed mandated coverage" and that the concurrent
10 resolutions designate a specific legislative bill that has been
11 introduced identifying certain coverage information; and
12

13 WHEREAS, section 23-52, Hawaii Revised Statutes, further
14 specifies minimum information required for assessing the social
15 and financial impact of the proposed health coverage mandate in
16 the Auditor's report; and
17

18 WHEREAS, S.B. No. 752 has been introduced during the
19 Regular Session of 2021, which prohibits health insurance
20 companies from denying coverage on the basis of gender identity
21 if the policy covers the same treatment for purposes other than
22 gender transition and requires insurance companies to provide
23 certain information about the coverage of gender transition
24 services, including the process for appealing a claim denied on
25 the basis of medical necessity; and
26

27 WHEREAS, S.B. No. 752, requires, in part, that "[a]ll
28 health care services related to gender transition treatments
29 shall be considered medically necessary and not cosmetic"; and
30

31 WHEREAS, the Legislature believes that an analysis of the
32 social and financial impacts of the insurance coverage mandated
33 in S.B. No. 752 is warranted; now, therefore,
34

35 BE IT RESOLVED by the Senate of the Thirty-first
36 Legislature of the State of Hawaii, Regular Session of 2021, the
37 House of Representatives concurring, that the Auditor is
38 requested to conduct an assessment, pursuant to sections 23-51
39 and 23-52, Hawaii Revised Statutes, of the social and financial
40 effects of mandating health insurers to provide certain health
41 care services, as provided in S.B. No. 752, Regular Session of
42 2021; and



1
2 BE IT FURTHER RESOLVED that the Auditor is requested to
3 submit a report of its findings and recommendations, including
4 any proposed legislation, to the Legislature, no later than
5 twenty days prior to the convening of the Regular Session of
6 2022; and

7
8 BE IT FURTHER RESOLVED that certified copies of this
9 Concurrent Resolution be transmitted to the Auditor, Director of
10 Health, Director of Commerce and Consumer Affairs, and the
11 Insurance Commissioner, who in turn is requested to transmit
12 copies to each insurer in the State that issues health insurance
13 policies, contracts, plans, or agreements.

