

Department of Planning and Budget 2023 Fiscal Impact Statement

1. **Bill Number:** SB 1203

House of Origin ☒ Introduced ☐ Substitute ☐ Engrossed

Second House ☐ In Committee ☐ Substitute ☐ Enrolled

2. **Patron:** Reeves

3. **Committee:** Education and Health

4. **Title:** Children Deserve Help Not Harm Act established, health benefit plans, etc.

5. **Summary:** The proposed legislation creates the Children Deserve Help Not Harm Act (the Act), which prohibits gender transition procedures, defined in the bill, for individuals under 18 years of age and prohibits the use of public funds for gender transition procedures for individuals under 18 years of age. The bill establishes enforcement procedures for violation of the Act. The bill provides that a health benefit plan providing health care coverage in the Commonwealth is prohibited from providing coverage for gender transition procedures for individuals younger than 18 years of age and is not required to provide coverage for gender transition procedures for individuals 18 years of age or older.

6. **Budget Amendment Necessary:** No

7. **Fiscal Impact Estimates:** Preliminary, See Item 8

Expenditure Impact:

<i>Fiscal Year</i>	<i>Dollars</i>	<i>Fund</i>
2024	(\$423,344)	General
2024	(\$513,297)	Nongeneral
2025	(\$469,920)	General
2025	(\$551,870)	Nongeneral
2026	(\$469,920)	General
2026	(\$551,870)	Nongeneral
2027	(\$469,920)	General
2027	(\$551,870)	Nongeneral
2028	(\$469,920)	General
2028	(\$551,870)	Nongeneral
2029	(\$469,920)	General
2029	(\$551,870)	Nongeneral
2030	(\$469,920)	General
2030	(\$551,870)	Nongeneral

8. **Fiscal Implications:** The Department of Medical Assistance Services (DMAS) reports that during FY 2022, the total expenditure for claims associated with gender dysphoria care was

\$1,021,790 (\$423,344 general fund). This figure pertains to Medicaid enrollees under the age of 18 with a primary diagnosis of gender dysphoria. Expenditures mainly reflect managed care payments, with fee-for-service payments representing less than one percent of total expenditures. DMAS assumes that the bill would reduce fee-for-service expenditures and managed care rates by this amount with one month of payment lag.

According to the Department of Human Resource Management, the proposed legislation is not expected to have a fiscal impact on the state health insurance program.

According to the State Corporation Commission, the proposed legislation is not expected to have a fiscal impact on the Virginia Health Benefit Exchange.

According to the Attorney General and Department of Law, the proposed legislation is not expected to have a fiscal impact.

9. Specific Agency or Political Subdivisions Affected:
Department of Medical Assistance Services

10. Technical Amendment Necessary: No

11. Other Comments: None