August 7, 2019

Alex M. Azar II, Secretary
U.S. Department of Health and Human Services
Office for Civil Rights
Attention: Section 1557 NPRM, RIN 0945–AA11
Hubert H. Humphrey Building, Room 509F
200 Independence Avenue SW
Washington, DC 20201

Dear Secretary Azar:

On behalf of the American Academy of Family Physicians (AAFP), which represents 134,600 family physicians and medical students across the country, I write in response to the proposed rule titled, “Nondiscrimination in Health and Health Education Programs or Activities” as published by the Department of Health and Human Services (HHS) in the June 14, 2019 Federal Register.

Section 1557 prohibits discrimination in health coverage and care on the basis of race, color, national origin, sex, age, and disability in health programs and activities that receive federal funding. This includes most health care facilities, including hospitals and physicians’ offices, and most health insurance companies.

The AAFP has concerns that these proposals weaken nondiscrimination protections for lesbian, gay, bisexual, transgender, and questioning (LGBTQ) individuals under Section 1557 of the Affordable Care Act. The rule also allows for religious exemptions that could restrict patients’ access to legal and evidence-based treatments and eliminates requirements that have enabled millions of patients with disabilities and limited English proficiency to access services. Furthermore, the proposal would limit the applicability of Section 1557’s nondiscrimination protections to only those programs receiving federal funding, as opposed to all health care and programs more broadly.

The AAFP opposes efforts by the Administration to weaken these critical protections for any of our patients, including those who are transgender, those with limited English proficiency, those with disabilities, and those who are seeking access to reproductive health care.

Rolling back gender discrimination protections as the rule proposes would impede access to care and sanction discrimination against already vulnerable patient populations. Nearly one in four transgender patients report avoiding needed medical care due to fear of stigma and discrimination, leading to higher health care costs and poorer outcomes.
In addition, permitting health care entities that receive federal funding to refuse care to patients who have had a pregnancy termination would have a dangerous effect on access to care. Allowing religious exemptions as the rule proposes discriminates against women seeking necessary reproductive health care services. Any such exemption is contrary to Congressional intent and the express purpose of Section 1557 and has the potential to cause great harm to our patients.

The AAFP strongly urges the Administration to withdraw this change in policy and instead work to ensure all patients have access to the quality care they need.

We appreciate the opportunity to comment. Please contact Robert Bennett, Federal Regulatory Manager, at 202-655-4908 rbennett@aafp.org with any questions.

Sincerely,

Michael Munger, MD, FAAFP
Board Chair