; STATE OF

GEORGIA; STATE OF INDIANA; STATE OF KANSAS; COMMONWEALTH OF KENTUCKY; STATE OF LOUISIANA; STATE OF NEBRASKA; STATE OF OHIO; STATE OF OKLAHOMA; STATE OF SOUTH CAROLINA; STATE OF SOUTH DAKOTA; COMMONWEALTH OF VIRGINIA; STATE OF WEST VIRGINIA, Plaintiffs-Appellees

XAVIER BECERRA, Secretary U.S. Department Health and Human Services
UNITED STATES DEPARTMENT OFHEALTH AND HUMAN SERVICES, MELANIE FONTES
RAINER, in her official capacity as the Director of the Office for Civil Rights
Centers for Medicare and Medicaid Services, Chiquita Brooks-Lasure, in
her official capacity as Administrator of the Centers for Medicare and Medicaid
Services Defendants-Appellants.

On Appeal from the United States District Court for the Southern District of Mississippi

AMIC US CURIAE BRIEF IN SUPPORT OF APPELLANTS FOR AMERICAN CANCER SOCIETY, AMERICAN CANCER SOCIETY CANCER ACTION NETWORK, THE AIDS INSTITUTE, AMERICAN ACADEMY OF FAMILY PHYSICIANS, AMERICAN ACADEMY OF PEDIATRICS, AMERICAN COLLEGE OF CHEST PHYSICIANS, AMERICAN COLLEGE OF OBSTETRICIANS AND GYNECOLOGISTS, AMERICAN COLLEGE OF PHYSICIANS. AMERICAN GERIATRICS

AMERICAN NURSES ASSOCIATION, AMERICAN PSYCHIATRIC ASSOCIATING HEALTH PROFESSIONALS ADVANCING

LGBTQ+ EQUALITY, HEMOPHILIA FEDERATION OF AMERICA, INFECTIOUS DISEASES SOCIETY OF AMERICA, THE LEUKEMIA & LYMPHOMA SOCIETY, MUSCULAR DYSTROPHY ASSOCIATION, NATIONAL LGBTQI+ CANCER NETWORK, NATIONAL MULTIPLE SCLEROSIS SOCIETY, NATIONAL ORGANIZATION FOR RARE DISORDERS, NATIONAL PATIENT ADVOCATE FOUNDATION

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NOVEMBER 26, 2024

SUPPLEMENTAL STATEMENT OF INTERESTED PARTIES

the following listed persons and entities as described in the fourth sentence of Rule 28.2.1 have an interest

The undersigned counsel of record certifieder Fifth Circuit Rule 29.that

in the outcome of this case. hese representations are made in order that the judges of this court may evaluate possible disqualification or recusal.

Amici Curiae:

The AIDS Institute

American Academy of Family Physicians

American Academy of Pediatrics

American Cancer Society

American Cancer Society Cancer Action Network

American College of Chest Physicians

American College of Obstetricians and Gynecologists

American College of Physicians

American Geriatrics Society

Association

American Nurses Association American Psychiatric Association American Society of Clinical Oncology CanceCare

Epilepsy Foundation

GLMA: Health Professionals Advancing LGBTQ+ Equality

Hemophilia Federtion of America

Infectious Diseases Society of America The Leukemia & Lymphoma Society

Muscular Dystrophy Association

National LGTBQI+ Cancer Network

Counsel for Amici Curiae:	
Deanne E. Maynard Seth W. Lloyd Morrison& FoersterLLP	
	Respectfully submitted,
Dated: November26, 2024	/s/DeanneE. Maynard
	Deanne F Maynard

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IDENTITY AND INTEREST OF AMICI CURIAE 1

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INTRODUCTION AND SUMMARY OF ARGUMENT

Discrimination on the basis of sex, gender identity, transgender status, sexual orientation and similar characteristics has no place in our health care system. Such discrimination can be particularly harmful for people suffering from chronic conflitions and conflitions and similar characteristics has no place in our health care system. Such discrimination can be particularly harmful for people suffering from chronic conflitions and conflitions and conflitions are particularly harmful for people suffering from chronic conflitions and conflictions are particularly harmful for people suffering from chronic conflitions and conflictions are particularly harmful for people suffering from chronic conflitions are particularly and conflictions are particularly from the conflictions are particularly from the conflictions are proposed to the conflictions ar

guaranteeshould be restored

ARGUMENT

A. LGBTQ People With Chronic DiseasesAnd Disabilities Face Distinct ChallengesAccessing HealthCare

Nearly everyone will require health care at some point in their lives.

Fed. of Indep. Bus. v. Sebelita 7 U.S. 519, 547 (2012). That fact is apparent from looking at even just a subset of the diseases on which Amici focus:

More than 2 million new cancer cases are expected to be diagnosed in the United States in 242 while more than 8

Another \$3.5 million Americans have arthritis; 36 million have some form of chronic lung disease; and anillion suffer from autoimmune diseases, including nearly one million with multiple sclerosis (MS). Ctrs. for Disease Control & Preventidmproving the Quality of Life for People With Arthritis, Ctrs. for Disease Control & Preventide (17), National Health Interview Survey(2018) (analysis by ALA)

Transgender, Queer (LGBTQ) Peopled Cancer Fact She (2024). 10 Indeed, the

Multiple studies have also found thatsbian and gay individuals face discrimination in health care, including finding that nearly half (46%) of heterosexual firstyear medical students in one report expressed at least some explicit bias against these individuals. Sara E. Burke @aContact and Empathy Mitigate Bias Against Gay and Lesbian People Among Heterosexual Yearst Medical Students? Acad Med. (May 2015)? In one survey, 8% of LGBQ respondents who had visited a health care provider in the past year said that a doctor or health care provider had refused to see them because of their actual or perceived sexual orientation. Shabab A. Mirza & Caitlin Roon Discrimination Prevents LGBTQ People from Accessing Health Cater. for Am. Progressian. 18, 2018). Nine percent said that a doctor or health care provider used harsh or abusive language while treating then d. Other studies report similar results, including that 12% of LGBTQ people reported that some health care professionals blai5bl. (s)4.003 patients and survivors surveyed are concerned they may face discrimination in a health care setting, and oirefive arevery concerned?

And the reported discrimination was even higher anticangs gender people 29% reported that a doctor or health care provider had refused to see them because of their actual or perceived gender identity; 23% had been intentioned to by the wrong name outsing a pronoun that does not reflect their gender identity 21% said a doctor or provider had used harsh or abusive language. Mirza & Rooney supra. Discrimination by health care professionals, or lack of awareness of or experience with LGBTQ patient care, can negatively impact health care outstoom for these patients.

There is good reason to expect that LGBTQ people with chronic diseases disabilities are even more likely to experience discrimination than the sesse reported for LGBTQ people generally. Those with a chronic disease is ability often must interact with more health care quitioners on a more frequent basis. A 2016 study found that 55.5% of all doctor visits in the United States related to one or more chronic conditions. Rui P. Okeyode, Ctrs. for Disease Control & Prevention, National Ambulatory Medical Care Survey: 2016 National Summary

²² https://www.fightcancer.org/policresources/surviveriews-discriminationamonglgbtq-cancerpatients

Tables Table 18 (2016)²³ For example, even long after diagnosis and initial treatment, individuals with a previous cancer diagnosis are more likelyqtore hospitalizations, ER visits, ambulatory surgeries, and provider visits than those without. They thus spend on average more than twice as long receiving health care in a year compared to individuals without a previous cancer diagnosis. K. Robin Yabroff et al., Annual Patient Time Costs Associated with Medical Care Among Cancer Survivors in the United States 2:7 MED CAR. 594, 59799 (2014)²⁴ Similarly, individuals living with HIV must receive lifelong treatment from medical providers to suppress the virus, treatment that helps maintain a healthy immune Ith & Human Servs. Evidence of HIV

treatment and viral suppression in preventing the sexual transmission of HIV (2022).²⁵ For an LGBTQ person with one of these chronic conditionesquent health care visit come with a risk of suffering discrimination from health care providers Mirza & Ro599 (n)4.i006 ()-.004 (i)-45 Td [(c)7.999 (o)4.003 (me)4.003 (o[2])

В.

identity. Id. Because of fears of discrimination from medical personnel, 8% of LGBTQ people in another survey avoided or postponed medical care. Mirza & Rooney supra That number increased to 14% for those who had experienced discrimination due to their sexual orientation or gender identity in the pastlylear. In general, LGBTQ adults are fmore likely than others not to seek health

FDA-approved disease odifying therapy is the best way to manage the MS disease course, prevent accumulation of disability, and protect the brain from damage due to MSeeDaniel M. Hartung et al.Trends In Coverage for Disease Modifying Therapies in Multiple Sclerosis in Medicare Part D 38 HEALTH AFFAIRS 303 (2019)²⁷ MS patients face a reduction in survival of between 8 to 12 years if they do not receive proper treatmentId.

Timely treatment for epilepsy is also critical to reduce the risk of accident, injury, or sudden unexpected death. C.E Belgley & T.L. Durgin, The direct costs of epilepsy in the United States: A systemic review of estimates 6 Epilepsia 137687 (2015).

Early detection and treatment of HIV is not only essential for people

80% of new HIV infections are the result of someone unaware of their status or not receiving treatment. Zihao Li Let Vaital Signs: HIV Transmission Along the Continuum of CareUnited States, 201668 Morbidity & Mortality Weekly Report 267 (2019).

C. Preventing Discrimination Is Integral To Improving Health Outcomes, Providing Better Preventive Care, And Increasing Patient Satisfaction With Care

Discrimination in health care also harms LGBTQ people because tetrs them from disclosing their sexual orientation or gender identity to health care providers leading to worse health outcomes for those with chronic diseases and disabilities. Multiple studies eport that the threat of discrimination pressures LGBTQ people . Institute of Medicine, The Health of Lesbian, Gay, Bisexual, and Transgender People: Building a Foundation for Better Undersonding 63 (2011); UC Davis Comprehensive Cancer Center GBT Task Force Finds Disparities in Cancer Screening and Car(2012)^{§1}; Liz Hamel et al.,

and Intersex Individuals and the Cancer Continuted CANCER 1160, 116462 (2015).34 These risks and concerns are well documented Eractitioners have

LGBTQ individuals also have several risk factors for chronic illness, making preventive care and frequent screenings essential example, lesbian women have multiple higher risk factors for breast cancer than heterosexual women, such as higher smoking and obesity rates, greater alcohol use, and never having completed a pregnancy; compared treaterosexualmen, gaymen have a higher prevalence of human papillomavirus, which is associ999 (eat)4.003 (er)24.984 Td (90]s)-2.999 ((c

they account for the overwhelming majority (70%) of new cases. Liz Hamel et al., supra at 16; Ctrs. for Disease Control & Preventioniagnoses of HIV Infection supra LGBTQ people also experience higher rates of mental health disorders, rates that are at least partly attributable to the excess stress they experience because of discrimination. Wendy B. Bostwick et alDiscrimination and Mental Health Among Lesbian, Gay and Bisexual Adults in the United \$taxesAM. J. Orthopsychiatry35-45 (2014)39

patient satisfaction. Patient satisfaction is an important metric for health care providers that depends on many factors, including effective and clear communication between health care viders and patients, a safe environment of mutual respect that lets patients disclose information, and support by providers that empowers patients to participate in their own treatment, such as by choosing among different treatment options. Jennifer Jabs & Charlie S. Kamer Sexual Minority 34:1-2 J. PSYCHOSOC ONCOL. 28, 2830

(2016).⁴⁰ Patient satisfaction positively correlates with better health outcomes patients who report better satisfaction with their overall experience are more likely

³⁹ https://doi.apa.org/doiLanding?doi=10.1037%2Fh0098851.

⁴⁰ https://doi.org/10.1080/07347332.2015.1118717.

people with chronic conditionand disabilities Provider groups welcome and recommend strong neodiscrimination standards, promote culturally responsive training for clinicians as critical to closing gaps in outcomes and patient satisfaction for LGBTQ patients. Kamers, upra The alternative of elling LGBTQ patients to avoid the harm by finding another provider is not an adequate answer. Many chronic conditions and disabilities require specialized care, and in some region the countrythere may be rely one or two providers with the necessary expertises the

LGBTQIA+ health in rural America, National Rural Health Policy

Brief (Feb 2022).43 percent of LGBTQ people said

community health center or clinic. Mirza & Roonsylpra Even if an alternative provider exists, finding one can delay critical treatment for chronic conditions disabilities or deter LGBTQ people from receiving or completing the treatment they need. Supraat pp.13-19.

Given the discrimination that many LGBTQ people face in healthe settings, it is critical that the protections Congress adopted in Setting in place.

⁴³ https://www.ruralhealth.us/getmedia/6589dfatfi9-494eb0e8 749f8b60ff68/2022NRHA-LGBTQ-Policy-PaperFinal-(1).pdf.

CONCLUSION

For these reasons the Court should vacate the

preliminary

injunction and stay order

Dated: November 26, 2024 Respectfully submitted,

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ADDENDUM

American Cancer Society(ACS) missionis to save lives, celebrate lives, and lead the fight for a world without cance merican Cancer Society Cancer Action Networkis the nonpartisan advocacy affiliate of ACS king cancer a top priority for policy9 (i)-3.0107.999 (a)-107.ic792 re W* n BT/TT6af3.996 (o)0 0 612 792

strives to improve health care access and eliminate disparities for all children, including those who identify as lesbian, gay, bisexual, transgender, or questioning of their sexual or gender identity. Pediatricians know that discrimination in health

development, and AAP strongly opposes any attempt to limit access to comprehensive, developmentally appropriate care fo adolescents.

The American College of Chest Physicians (CHEST) is a global leader in pulmonary, critical care, and sleep medicificatablished in 1935, CHEST supports more than 21,000 clinicians through education, research, and advocation of health believes best patient outcomes cannot be achieved without eradication of health disparities that currently impact specific populations, including disproportionate health risks and barriers to health care access faced by LGBTQ+ patients.

Representing more than 90% of boardtified OB/GYNs in the United States, American College of Obstetricians and Gynecologists QG) is the

-

gynecologists dedicated to access to evidenced, highquality, safe, and equitable obstetric and gynecologic care. ACOG maintains the highest standards of clinical practice and continuing education of its members, promotes patient education, and increases awareness among its members and the public of the

for all people to the full spectrum of eviderhozesed quality reproductive health care, including abortion care, and is a leader in the effort to confront the maternal mortality crisis in the United States.

The American College of Physician (P) is the largest medical specialty organization and the second largest physician membership society in the United States. ACP members include 161,000 internal medicine physicians, related subspecialists, and medical students ternal medicine physicians are specialists who apply scientific knowledge, clinical expertise, and compassion to the preventive, diagnostic, and therapeutic care of adults across the spectrum from health to complex illness ACP has a longstanding commitment to improving the health of all Americans and opposes any form of discrimination in the delivery of health care service CP is dedicated to eliminating disparities in the quality of or access to health care and is committed to working toward fully understanding the unique needs of the LGBTQ community and eliminating health disparities for LGBTQ persons.

The American Geriatrics Society (AGS) is a national-poofit organization of geriatrics healthcare professionals dedicated to improving the health, independence, and quality of life of all older Americans. Its more than 6,000 members include geriatricia, geriatrics nurse practitioners and advanced practice

nurses, social workers, family practitioners, physician assistants, pharmacists, and internists, all of whom are pioneers in advanced illness care for older individuals.

CanceCare is the leading national organization providing free, professional support services and information to help people manage the emotional, practical, and financial challenges of cancer.

is a nonprofit, volunteerfueled organization dedicated to finding cures for Crolsndisease and ulcerative colitis, and improving the quality of life of children and adults affected by these diseases.

The mission of the Epilepsy Foundation is to improve the lives of people affected by epilepsy through education, advocacy, research, and connection.

GLMA: Health Professionals Advancing LGBTQ+ Equality a national organization committed to ensuring health equity for lesbian, gay, bisexual, transgender, and queer (LGBTQ+) communities and equality for LGBTQ+ health professionals in their work and learning environments. To achieve this mission, GLMA utilizes the scientific expertise of its diverse multidisciplinary membership to inform and drive advocacy, education, and research.

Hemophilia Federation of Americal (FA) is a community based, grassroots advocacy organization that assists, educates, and advocates for people with hemophilia, von Willebrand disease, and other rare bleeding disords works for patient access to quality and affordable care and coverparities that reflect the nature of bleeding disorders as serious, lowing, and expensive health conditions.

curiosity, compassion and knowledge of our members to strengthen the field of infectious diseases, advance science and advocate for health equity.

health agency dedicated to fighting blood cancer and ensuring that the more than 1.3 million blood cancer patients and survivors in the United States have access to the care they need.

disease, and myeloma, and to improve the quality of life of patients and their families. LLS advances that mission by advocating that blood cancer patients have sustainable access to quality, affdrites coordinated health care, regardless of the source of their coverage.

The Muscular Dystrophy Association (MDA) is the number one voluntary health organization in the United States for people living with muscular dystrophy, ALS, and related neuromuscular diseases: over 70 years, MDA has led the way in accelerating research, advancing care, and advocating for the support of our families.

independent lives.

The mission of the National LGBQ+ Cancer Networks to improve the lives of LGBTQ+ individuals on the cancer journey and those at risk through educational, training, and advocacy initiatives.

CERTIFICATE OF SERVICE

I certify that I electronically filed the foregoing with the Clerk of the Court

for the United States Court of Appeals for the Fifth Circuit by using the CM/ECF

system or November 26, 2024.

I certify that all participants in this case are registered CM/ECF users and that

service will be accomplished by the CM/ECF system.

Dated: November26, 202

CERTIFICATE OF COMPLIANCE

This brief complies with the typeolume limitation of Fed. R. App. P.

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