

May 12, 2025

Via Federal eRulemaking Portal
Director Russell T. Vought
Office of Management and Budget
725 17th St. NW
Washington, DC 20503

Re: OMB “Request for Information: Deregulation,” Notice 2025-06316

Dear Director Vought:

We are scholars at the Ethics and Public Policy Center (EPPC). Eric Kniffin is an EPPC Fellow, member of EPPC’s Administrative State Accountability Project (ASAP), and a former attorney in the U.S. Department of Justice’s (DOJ) Civil Rights Division. Natale Dodson is a Policy Analyst at EPPC and likewise a member of ASAP.

We write to offer public comment in response to the Office of Management and Budget’s (OMB) “Request for Information: Deregulation” (RFI).¹ In the RFI, OMB “solicits ideas for deregulation” and asks commenters to “identify rules to be rescinded and provide detailed reasons for their rescission. OMB invites comments about any and all regulations currently in effect.”

Your Request for Information is an excellent fit for our project’s mission. EPPC’s HHS Accountability Project, now called the Administrative State Accountability Project (ASAP), was launched in February 2021 in response to the Biden Department of Health and Human Services’ hostility to good medicine and the rights of conscience.² Our project is part of the EPPC’s broader project to advocate for laws and public policies that reflect the truth of the human person.³ Since 2021 our project has focused on regulations from HHS and other federal agencies that promote abortion, gender ideology, and other causes that were priorities for the Biden administration but not for the American people and their representatives in Congress. We also sounded the alarm on the Biden administration’s efforts to restrict religious freedom and conscience rights when these constitutional and statutorily protected rights conflicted with the Biden administration’s objectives.

We are grateful for yours and the Trump administration’s efforts to stop and to reverse harmful and unlawful Biden regulatory actions. Below we bring to your attention publications where we have summarized some of the Biden administration’s most egregious actions in the areas where we focus. We also outline in more detail the regulatory actions that we believe are most in need of your attention, directing your attention to our public comments and other documents where we have described the problems with these actions.

¹ 90 Fed. Reg. 15481 (Apr. 11, 2025).

² EPPC, Administrative State Accountability Project, <https://eppc.org/program/asap/>.

³ EPPC, About Us, <https://eppc.org/about/>.

We hope that this comment helps equip you to carry out President Trump’s policy priorities and protect the rule of law. In many instances, that may involve rescinding regulations, in whole or in part. In other instances where the Biden administration’s actions have been challenged in court, the Trump administration should consider conceding in court that the challenged regulations are unlawful.

Again, we thank you for this invitation to submit public comment and on our work on behalf of the American people to promote human flourishing and the rule of law.

I. We encourage OMB to review ASAP publications that document the Biden administration’s illegal actions.

At the outset, we believe it may be helpful for OMB to refer to publications from ASAP scholars that document the Biden administration’s illegal actions.

A. EPPC’s website and the attached appendix collect ASAP scholars’ public comments and commentary on regulatory proposals.

The most comprehensive collection of ASAP’s comments on the Biden’s administration’s regulations is on EPPC’s webpage, EPPC Engagement on Agency Actions.⁴ This website provides a comprehensive collection of ASAP scholars’ public comments, Executive Order 12866 meetings with government officials, and related commentary over regulatory proposals. The website is organized chronologically with the proposals we have commented on most recently at the top.

We have also attached an appendix listing agency actions—including regulations and memoranda—that we recommend you review. Unlike our website, this appendix is organized by federal agency. This appendix includes an “issue key” indicating the reason why each listed agency action is of concern to EPPC and ASAP. Where relevant, we have provided links to EPPC comments on the agency action, as well to comments from other interested groups.

ASAP has continued to submit public comments in the months since President Trump took office. These comments have generally brought to the administration’s attention aspects of Biden administration proposals that are contrary to the President’s stated policy goals and executive orders. The most recent from comment from ASAP⁵ communicated our support for the Department of Housing and Urban Development’s (HUD) interim final rule revising “Affirmatively Furthering Fair Housing Revisions.”⁶ This IFR replaces 2021 housing regulations that EPPC Senior Fellow Stanley Kurtz criticized as “classic regulatory activism.”⁷ As noted in our comment, we support the IDF’s stated goals of promoting affordable, fair, decent, safe, and better housing for Americans by means of deregulation and providing states and localities with more flexibility. Furthermore, the IFR’s replacement of the term “gender” with “sex” and removal of racial preferences in the housing regulations aligns with the text of the Fair Housing Act and Supreme Court decisions.

⁴ EPPC, EPPC Engagement on Agency Actions, <https://eppc.org/engagement-on-agency-actions/>.

⁵ EPPC Scholar Comment on HUD IFR “Affirmatively Affirming Fair Housing Revisions Rule,” RIN 2529-AB08 (Apr. 28, 2025), <https://eppc.org/wp-content/uploads/2025/04/EPPC-Comment-HUD-AFFH-IFR.pdf>.

⁶ 90 Fed. Reg. 11020 (Mar. 3, 2025).

⁷ Stanley Kurtz, *Trump Kills an Intrusive Housing Rule, Again*, National Review (Mar. 6, 2025), <https://www.nationalreview.com/corner/trump-kills-affh-again/>.

B. ASAP scholars’ amicus brief in *Tennessee v. Becerra* provides an overview of the Biden administration’s unlawful efforts to promote abortion.

Aside from our public comments, ASAP scholars have submitted amicus brief and articles that have collected examples of unlawful regulations.

In April 2024, ASAP scholars Eric Kniffin and Rachel N. Morrison submitted an amicus brief in support of Tennessee’s lawsuit challenging HHS’s attempt to rescind Tennessee’s Title X funding solely because the state would not counsel and refer for abortions that are illegal under state law.⁸ As you are aware, Title X is a federal program that funds state and private health care organizations offering voluntary family planning services. Congress explicitly prohibited Title X funds from being used “in programs where abortion is a method of family planning.” Public Health Services Act, 42 U.S.C. §300a-6. In March 2022, HHS awarded Tennessee a five-year grant of Title X funds.

Our amicus brief noted that the Supreme Court in *Dobbs v. Jackson Women’s Health Organization* returned the issue of abortion “to the people and their elected representatives.” 597 U.S. 215, 259 (2022). However, instead listening to the American people, President Biden “committed to doing everything in his power” to “protect access” to abortion.⁹ Our brief described the following Biden administration actions, all of which we are worthy of OMB’s attention:

- The Biden administration turned Title X into an abortion counseling and referral mandate. *Id.* at 7-10.
- The Biden administration turned taxpayer dollars into abortion funds. *Id.* at 10-14.
- The Biden administration turned hospital emergency rooms into abortion clinics. *Id.* at 14-16.
- The Biden administration turned VA hospitals into abortion clinics. *Id.* at 17-20.
- The Biden administration turned the U.S. postal service into a delivery service for abortion drugs. *Id.* at 20-24.
- The Biden administration turned pharmacies into abortion drug dispensaries. *Id.* at 24-27.
- The Biden administration turned HIPAA’s privacy protections into a shield against laws regulating abortion. *Id.* at 28-32.
- The Biden administration turned workplace pregnancy accommodations into an abortion mandate. *Id.* at 32-33.

C. ASAP director Rachel N. Morrison’s article provides an overview of the Biden administration’s efforts to promote gender ideology.

Similarly, in January 2024, Rachel N. Morrison published an article in *The Federalist* outlining “How Democrats set the stage in 2023 for an LGBT onslaught in 2024.”¹⁰ As with the amicus brief above, Morrison’s article addresses many different regulations that were poised to be finalized in the last year of the administration:

⁸ Br. of *Amicus Curiae* EPPC in support of Plaintiff-Appellant in *Tennessee v. Becerra*, No. 3:23-cv-384 (Apr. 12, 2024), available at <https://eppc.org/wp-content/uploads/2024/04/6th-Cir-brief-TN-v.pdf>.

⁹ White House, FACT SHEET: President Biden to Sign Executive Order Protecting Access to Reproductive Health Care Services (July 8, 2022), <https://perma.cc/F5ZZ-XGL8>.

¹⁰ Rachel N. Morrison, *How Democrats Set the Stage in 2023 for an LGBT Onslaught in 2024*, *The Federalist* (Jan. 9, 2024), <https://thefederalist.com/2024/01/09/how-democrats-set-the-stage-in-2023-for-an-lgbt-onslaught-in-2024/>.

- The Department of Education’s Title IX rule would decimate women’s sports.
- EEOC’s Pregnant Workers Fairness Act regulations erased women.
- HHS rule would unlawfully prohibit discrimination based on gender dysphoria.
- HHS rule called “non-affirming” foster parents abusive.
- EEOC’s harassment guidance would impose workplace pronoun and bathroom mandates.

Some of these agency actions are described in more detail below. However, we suggest that these overviews may be helpful in helping OMB staff and others in leadership understand the scope and the pattern of unlawful conduct the Biden administration engaged in on issues that are central to our mission at EPPC’s Administrative State Accountability Project.

II. EPPC’s Administrative State Accountability Project submits that the following Biden-era regulations are especially harmful to the common good and in need of rescission.

Because we know that OMB’s time and attention is limited, we draw OMB’s attention to the following Biden administration actions, which we believe are particularly harmful to the common good. These regulations are organized chronologically based on when each was finalized in the federal register.

As requested, we provide detailed reasons why each should be rescinded, drawing upon our public comments and commentary on these proposals. As noted above, we encourage the administration to consider whether these arguments also provide grounds for the administration to concede in court that these regulations are unlawful. We indicate below where we are aware that each rule is the subject of ongoing litigation.

A. HHS should rescind *Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services*, 86 Fed. Reg. 56144 (Oct. 7, 2021).

On April 15, 2021, HHS proposed a rule to repeal Title X regulations issued under the first Trump administration and replace them with a rule that would readopt most of the Title X regulations finalized in 2000 with some additional requirements, including the requirement of abortion counseling and referrals.¹¹ On May 17, 2021, our project submitted a public comment opposing the proposed rule on several grounds, including:

The proposed rule runs afoul of Title X’s abortion prohibition and federal conscience protections, does not support Title X’s purposes, undermines Title X project accountability and transparency, and provides a flawed analysis of the impact of the 2019 Rule and the projected impact of the proposed regulations.¹²

We urged the department to withdraw the proposed rule.

On October 7, 2021, HHS published its final rule. The 2021 rule rescinded physical and financial separation requirements and largely readopts the Clinton-era regulations with some additional requirements, such as “advancing health equity through the Title X program.” The new

¹¹ 86 Fed. Reg. 19812 (April 15, 2021).

¹² EPPC Scholar Comment Opposing Proposed Rule “Ensuring Access to Equitable, Affordable, Client-Centered, Quality Family Planning Services,” RIN 0937-AA11 (May 17, 2021), <https://eppc.org/wp-content/uploads/2021/05/EPPC-Comment-Opposing-Title-X-Proposed-Rule.pdf>.

rule also requires Title X providers to make abortion referrals upon request, thereby jeopardizing conscience rights of providers who object to abortion being used as a method of family planning.

These regulations are contrary to the express terms of Title X and federal conscience protections. The Biden HHS's pro-abortion extremism is also contrary to the Supreme Court's direction in *Dobbs*, which—as President Trump has rightly noted—stated that matters of abortion policy should be determined by the people's elected representatives, not by deep state bureaucrats. We urge HHS to rescind these regulations.

B. HHS should rescind *Safeguarding the Rights of Conscience as Protected by Federal Statutes*, 89 Fed. Reg. 2078 (Jan. 11, 2024).

On January 5, 2023, HHS issued a proposed rule¹³ that would rescind conscience regulations promulgated under President Trump in 2019.¹⁴

On March 3, 2023, we filed our public comment opposing HHS's proposed rule.¹⁵ We noted that while HHS *claimed* that its proposed rule would “safeguard rights of conscience,” “strengthen conscience and religious nondiscrimination,” and “prevent discrimination,” the proposed rule told a very different story. Among the many points we raised in our public comment, we pointed out that HHS had failed to establish a need for the rule. Our comment argued that it would be arbitrary and capricious for HHS to excise provisions from the 2019 Rule that provided needed clarity, even as HHS claimed its new rule was needed to reduce “confusion.” We took issue with HHS's claim that new rules were needed to reflect the “balance” that Congress had allegedly struck in conscience protection laws between competing interests, demonstrating that these laws say nothing about any such “balance.” We also asked HHS to acknowledge that conscience protection laws apply to sterilizing “gender transition” procedures. “In short,” we said, “HHS's proposed rule—coupled with the Biden-Becerra HHS's abysmal track record on protecting conscience and religious freedom rights—undercuts the Department's assertions that it takes these rights seriously.”¹⁶

HHS's January 9, 2024, final rule made some good changes over its 2023 proposal, clarifying some terms and confirming that OCR would receive complaints about alleged violations of federal conscience protection statutes.¹⁷ However, HHS doubled down on its claim that it had authority to “balance” conscience rights with the Biden administration's policy priorities, especially its interests in abortion. The final rule mentioned “balance” thirty-six times, even while HHS acknowledged that “the text of the conscience statutes themselves generally does not contain balancing tests.” The final rule also mentioned fourteen times that HHS would be applying these laws on a “case-by-basis,” an approach that we do not believe is legally required and which deprives covered entities of the

¹³ 88 Fed. Reg. 820 (Jan. 5, 2023).

¹⁴ 84 Fed. Reg. 23170 (May 21, 2019). For an overview of the 2023 proposed rule, see Rachel N. Morrison, *HHS Proposes Rule Modifying Healthcare Conscience Regulations*, The Federalist Society (Feb. 16, 2023), <https://fedsoc.org/commentary/fedsoc-blog/hhs-proposes-rule-modifying-healthcare-conscience-regulations>.

¹⁵ EPPC Scholars Comment Opposing HHS's Proposed Rule “Safeguarding the Rights of Conscience as Protected by Federal Statutes,” RIN 0945-AA18 (Mar. 6, 2025), <https://eppc.org/wp-content/uploads/2023/03/EPPC-Scholars-Comment-Opposing-HHS-Proposed-Conscience-Rule.pdf>.

¹⁶ Public comments from other groups collected at <https://eppc.org/news/eppc-scholars-and-others-respond-to-hhss-proposed-rule-on-conscience-rights-in-health-care/>.

¹⁷ 89 Fed. Reg. 2078 (Jan. 9, 2024).

guidance they need to follow federal law—especially in light of HHS’s opaque and unlawful “balancing” approach.

On the whole, we believe that HHS’s 2024 conscience regulations were unnecessary, make conscience protection laws harder for covered entities to understand and follow, and illegally introduced “balancing” standards that even HHS admits are not found in the laws HHS has authority to enforce. For all these reasons, and for the additional reasons spelled out in our public comment, we ask HHS to rescind HHS’s 2024 conscience regulations and reinstitute the 2019 final rule.

C. VA should rescind *Reproductive Health Services*, 89 Fed. Reg. 15451 (March 4, 2024).

On September 9, 2022, VA issued an interim final rule (IFR) claiming “good cause” to remove abortion and abortion counseling exclusions from medical benefits packages for veterans and CHAMPVA beneficiaries.¹⁸ On October 11, 2022, our project submitted a public comment opposing the proposed rule on several grounds:

Without demonstrating “good cause,” the VA immediately and unlawfully amended its regulations to remove the statutorily required exclusions on abortion and abortion counseling in veterans’ medical benefits packages and for Civilian Health and Medical Program of the Department of Veterans Affairs (CHAMPVA) beneficiaries, which include “certain spouses, children, survivors, and caregivers of veterans.” 87 Fed. Reg. 55287; Regulatory Impact Analysis (RIA). . . . The VA’s claim that abortion under the IFR is “needed” and “medically necessary and appropriate” is arbitrary and capricious. Abortion is not healthcare, abortion harms women, and women do not need abortion to succeed. The VA further claims, contrary to law, that the IFR can preempt state laws protecting the innocent lives of unborn children. In short, the IFR is contrary [to] Congressional direction, violates the VA’s statutory authority, and should be rescinded immediately.¹⁹

On February 7, 2024, we met with federal officials to discuss concerns with the rule and reiterated the concerns we raised in our proposed rule.²⁰ On March 4, the VA finalized its IFR without change.²¹

On March 17, 2025, we met with government officials to discuss the VA’s forthcoming interim final rule (IFR) “Reproductive Health Services.”²² The IFR has the same name as the Biden Administration’s VA rule. We urged the rescission of the Final Rule. We noted in our comments that the Biden administration’s 2024 final rule was a political response to the Supreme Court’s Dobbs decision and state laws protecting unborn children. We also reiterated our concern that this 2024 rule

¹⁸ 87 Fed. Reg. 55287 (Sept. 9, 2022).

¹⁹ EPPC Scholars Comment Opposing Department of Veterans Affairs’ “Reproductive Health Services” Interim Final Rule, RIN 2900-AR57 (Oct. 11, 2022), <https://eppc.org/wp-content/uploads/2022/10/VA-IFR-Ethics-and-Public-Policy-Center.pdf>. Public comments from other groups collected at <https://eppc.org/news/eppc-scholars-and-others-oppose-department-of-veterans-affairs-rule-requiring-taxpayer-funded-abortion-benefits/>.

²⁰ EPPC Scholars Meet with Federal Officials to Discuss Concerns with Department of Veterans Affairs’ Abortion Benefits Rule (Feb. 9, 2024), <https://eppc.org/news/eppc-scholars-meet-with-federal-officials-to-discuss-concerns-with-department-of-veterans-affairs-abortion-benefits-rule/>.

²¹ 89 Fed. Reg. 15451 (March 4, 2024).

²² EPPC Scholars Urge Government Officials to Rescind Department of Veterans Affairs Rule Mandating Taxpayer-Funded Abortion Benefits (Mar. 17, 2025), <https://eppc.org/publication/eppc-scholars-urge-government-officials-to-rescind-department-of-veterans-affairs-rule-mandating-taxpayer-funded-abortion-benefits/>.

violates federal law, which explicitly prohibits the VA from providing abortion benefits. The comment also pointed out that rescinding the final rule aligns with President Trump’s policy priorities and executive actions, including stopping taxpayer funding of abortion, protecting conscience and religious freedom rights, and eliminating unlawful regulations.

For all the reasons documented in our comments, the VA should rescind the 2024 final rule and has “good cause” to do so through an interim final rule.

D. The EEOC should rescind *Implementation of the Pregnant Workers Fairness Act*, 89 Fed. Reg. 29096 (April 19, 2024).

While we recognize that the Equal Employment Opportunity Commission is an independent agency and that it does not currently have enough members to form a quorum, we still find it relevant to bring to your attention the EEOC’s final rules under the Pregnant Workers Fairness Act both because they should be rescinded and because they fit with the pattern of activity identified throughout this public comment.

On August 11, 2023, HHS issued a proposed rule purporting to implement the Pregnant Workers Fairness Act (PWFA).²³ Congress passed the PWFA in 2022 to require employers to give “qualified employees” “reasonable accommodations” for their “known limitations related to the pregnancy, childbirth, or related medical conditions” unless the accommodation would “impose an undue hardship” on the operation of the employer’s business. However, EEOC’s proposed rule claimed the authority to turn the PWFA into an abortion accommodation mandate, even though the bipartisan law did not mention abortion.

As Morrison notes in her article summarizing the proposed rule,²⁴ when concerns over abortion accommodations were raised in the Senate, PWFA cosponsor and Democrat Senator Bob Casey stated on the floor that the EEOC “could not . . . issue any regulation that requires abortion leave, nor does the act permit the EEOC to require employers to provide abortion leave in violation of State law.” After the EEOC issued its proposed regulations, Republican cosponsor Senator Bill Cassidy called out the EEOC for “go[ing] rogue” and “completely disregard[ing] legislative intent and attempt[ing] to rewrite the law by regulation.”

On October 10, 2023, ASAP scholars submitted a public comment in opposition to the proposed rule.²⁵ As we wrote in our comment,

We are deeply committed to supporting pregnant women, mothers, and their unborn children, including in the workplace. We celebrate the long overdue employment accommodation protections in law that women now have as a result of the passage of the PWFA. We are concerned, however, that EEOC’s expansive proposed regulations implementing the PWFA have turned the pro-woman, pro-mother, and pro-baby law on its head. The EEOC’s proposed regulations erase the very class of women the law is meant to protect: pregnant workers. The proposed regulations are far broader than those the pro-pregnancy and pro-childbirth PWFA

²³ 89 Fed. Reg. 29096 (April 19, 2024).

²⁴ For an overview of the proposed rule, see Rachel N. Morrison, *EEOC Proposes Expansive Pregnant Workers Fairness Act Regulations*, The Federalist Society (Sept. 14, 2023), <https://fedsoc.org/commentary/fedsoc-blog/eecoc-proposes-expansive-pregnant-workers-fairness-act-regulations>.

²⁵ <https://eppc.org/wp-content/uploads/2023/10/EPPC-Scholar-Comment-EEOC-Regulations-to-Implement-the-Pregnant-Workers-Fairness-Act.pdf>

would require. The EEOC’s expansive proposal raises serious religious freedom and free speech concerns for religious organizations and pro-life employers. Indeed, the Commission is trying to use the PWFA to regulate way beyond pregnancy, childbirth, and related medical conditions to mandate accommodations for even the opposite—abortion. This proposed abortion mandate is contrary to the statutory text and congressional intent of the PWFA.

We urged the EEOC to “drop its abortion mandate, fully recognize employers’ statutory and constitutional protections for religious freedom and free speech, and keep the PWFA pro-woman, pro-pregnancy, and pro-childbirth.”²⁶ We reiterated our concerns in our February 2024 EO 12866 meeting with federal government officials.²⁷

However, on April 19, 2024, the EEOC finalized its PWFA regulations, maintaining its abortion accommodation mandate.²⁸ The EEOC approved these regulations along party lines. Republican Commissioner Andrea Lucas issued a statement with her vote against the final rule, accusing the Commission of using “linguistic gymnastics and a simple sleight of hand” to make the law “considerably more complicated and controversial.” Lucas’s statement focused primarily on her disagreement with the Commission’s broad interpretation of the phrase “pregnancy, childbirth, or related medical conditions.”²⁹ The final rule also reflected the Biden administration’s pattern of dismissing religious liberty concerns. *Id.*

Soon after the PWFA rule was finalized, Tennessee and Arkansas led a coalition of 17 states in a lawsuit against the EEOC, focusing particularly on the rule’s abortion mandate. *Id.* In conjunction with the PWFA-specific claims, the states also challenged EEOC’s status as an “independent federal agency,” arguing that its independent structure violates Article II and the separation of powers. *Id.*

We encourage President Trump to appoint, and encourage the Senate to confirm, EEOC commissioners who will respect the rule of law. We are confident that such a commitment would be reflected in the EEOC abandoning the effort to turn the bipartisan PWFA into a weapon to advance the Biden administration’s abortion-at-all-costs agenda.

E. HHS should rescind *HIPAA Privacy Rule To Support Reproductive Health Care Privacy*, 89 Fed. Reg. 32976 (April 26, 2024).

On April 17, 2023, HHS issued a proposed rule that would change the longstanding HIPAA Privacy Rule to create a new set of rules that only applied to protected health information (PHI) tangentially related to “reproductive health care.”³⁰ On June 16, 2023, our project submitted a public comment opposing the proposed rule on several grounds:

²⁶ Public comments from other groups collected at <https://eppc.org/news/eppc-scholars-and-others-submit-comments-on-eeoc-proposed-pregnant-workers-fairness-act-regulations/>.

²⁷ <https://eppc.org/publication/eppc-scholars-meet-with-federal-officials-to-discuss-concerns-in-expansive-eeoc-pregnant-workers-fairness-act-regulations/>.

²⁸ 89 Fed. Reg. 29096 (April 19, 2024).

²⁹ Commissioner Lucas’ comments are quoted and linked to as part of ASAP scholar Rachel N. Morrison’s analysis of the final rule in *PWFA Rule Keeps Abortion Accommodations and Fulfills EEOC Wish List*, The Federalist Society (May 23, 2024), <https://fedsoc.org/commentary/fedsoc-blog/pwfa-rule-keeps-abortion-accommodations-and-fulfills-eeoc-wish-list>.

³⁰ 88 Fed. Reg. 23506 (April 17, 2023).

First, the Department has failed to establish a need for the Proposed Rule: its self-serving conjectures and its reliance on reaction pieces [after the Supreme Court’s *Dobbs* decision] do not establish that the current Privacy Rule is causing “confusion.” Second, even if the current rule causes “confusion,” the Proposed Rule makes the Privacy Rule worse by introducing a number of critical terms that are either poorly defined or not defined at all. Third, the Proposed Rule will also create more confusion by greatly complicating the decision-making process a covered entity must undergo when deciding whether to use or disclose PHI.³¹

We also expressed our concern “that the Privacy Rule would chill health care professionals from cooperating with legal and legitimate state activities that stem from their traditional police powers, which include promoting the public health, morals, or safety, and the general well-being of the community.” *Id.*³² On February 28, 2024, we met with federal officials to reiterate our serious concerns regarding HHS’s proposal.³³

On April 26, 2024, HHS issued its final rule.³⁴ HHS did narrow the rule in response to public comments. HHS also added a new “presumption” provision that requires that, if a covered entity is asked for “reproductive health care”-related PHI regarding a procedure performed by another person, that entity must presume the procedure was performed legally and must refuse to release the PHI unless they are convinced otherwise.

We share the concerns raised by Roger Severino, our former colleague at EPPC and the former head of HHS’ Office of Civil Rights, who noted that HHS’s rule puts health care providers “in an impossible situation.”³⁵ The vague rule makes providers choose between risking contempt for refusing a lawful subpoena for PHI or risking a finding by HHS that it had violated the HIPAA Privacy Rule. Severino rightly noted that the final rule also makes it substantially harder for law enforcement to investigate unlawful activity.

As we predicted in our public comment and our EO 12866 comment, not long after the rule was finalized, several lawsuits were filed by states and private entities against HHS’s new HIPAA privacy rule regulations. One was filed in Texas by a family physician.³⁶ The district court in that matter issued a preliminary injunction against the HIPAA rule last December.³⁷

³¹ EPPC Scholars Comment Opposing “HIPAA Privacy Rule To Support Reproductive Health Care Privacy,” RIN 0945-AA20 (June 16, 2023), <https://eppc.org/wp-content/uploads/2023/07/EPPC-Scholars-Comment-Opposing-the-HIPAA-Privacy-Reproductive-Health-Care-NPRM.pdf>.

³² Public comments from other groups collected at <https://eppc.org/news/eppc-scholars-and-others-submit-comments-opposing-hipaa-privacy-reproductive-health-care-privacy-rule/>.

³³ EPPC Scholars EO 12866 Meeting “Proposed Modifications to the HIPAA Privacy Rule to Support Reproductive Health Care Privacy” RIN 0945-AA20 (Feb. 28, 2024), <https://eppc.org/wp-content/uploads/2024/03/EPPC-Scholars-Comments-for-EO-12866-Meeting-HIPAA-Privacy-Rule-2024-02-28.pdf>.

³⁴ 89 Fed. Reg. 32976 (April 26, 2024).

³⁵ Roger Severino, *Biden Admin Threatens To Jail Doctors Who Assist Law Enforcement Investigating Abortions*, The Federalist (April 23, 2024), <https://thefederalist.com/2024/04/23/biden-admin-threatens-to-jail-doctors-who-assist-law-enforcement-investigating-abortions/>.

³⁶ Alliance Defending Freedom, *Texas doctor sues Biden-Harris admin over unlawful changes to federal health privacy laws* (Oct. 21, 2024), <https://adflegal.org/press-release/texas-doctor-sues-biden-harris-admin-over-unlawful-changes-federal-health-privacy/>.

³⁷ *Purl v. HHS*, No. 24-228 (N.D. Tex. Dec. 22, 2024), <https://www.bakerdonelson.com/webfiles/Publications/17711735008071938795.pdf>.

The following month, more than a dozen states filed suit against the same regulations because they recognized that the HIPAA rule interferes with its ability to carry out legitimate law enforcement investigations.³⁸ The States' motion for preliminary injunction, filed in February, attached EPPC's public comment in opposition to the HIPAA proposed rule as an exhibit.³⁹

HHS should rescind the 2024 HIPAA Privacy Rule in total. HHS did not demonstrate any need for this rulemaking. It is arbitrary and capricious for HHS to create a separate set of rules that only applies to PHI tangentially related to reproductive health care. The rule is vague and appears designed to intimidate covered entities out of cooperating with legitimate law enforcement activities related to advancing important interests recognized by the Supreme Court in *Dobbs*. We urge HHS to make rescinding this rule a priority and to concede the rule's illegality in court.

F. IHS should rescind *Removal of Outdated Regulations*, 89 Fed. Reg. 34144 (April 30, 2024).

On January 8, 2024, HHS's Indian Health Service (IHS) issued a proposed rule to eliminate regulations that prevented Indian Health Service funds from paying for any abortion except those necessary to save the life of the mother.⁴⁰ IHS claimed in its proposal these regulations were outdated and conflicted with the Hyde Amendment. The proposed regulations did not merely attempt to authorize payments for abortions in the case of rape or incest; it proposed to *eliminate all abortion regulations* including record keeping requirements. No rationale was given for the removal of all the regulations.

Consistent with its 2022 circular,⁴¹ issued days after the Supreme Court's *Dobbs* decision, IHS claimed that federal law preempted state law on this matter and that IHS thus had legal grounds to require its health care facilities to perform abortions even where such procedures were illegal under state law.⁴²

On March 8, 2024, our project filed a public comment opposing the rule. We stated:

The Hyde Amendment merely permits federal funding for limited abortions; it does not mandate IHS fund abortion. Further, the Hyde Amendment does not support removing regulations on definitions, ectopic pregnancy, recordkeeping, and confidentiality, making the IHS's proposal arbitrary and capricious. IHS fails to address the federalism impacts of its proposal that could preempt state laws protecting unborn children and adequately consider alternatives to its proposal. IHS should withdraw its proposed rule and maintain all of its current regulations.⁴³

³⁸ Complaint, *Tennessee v. HHS*, No. 25-25 (E.D. Tenn. filed Jan. 17, 2025), <https://www.tn.gov/content/dam/tn/attorneygeneral/documents/pr/2025/2025-1-hipaa.pdf>.

³⁹ Exhibit D, <https://storage.courtlistener.com/recap/gov.uscourts.tned.117532/gov.uscourts.tned.117532.26.4.pdf>.

⁴⁰ 89 Fed. Reg. 896 (Jan. 8, 2024).

⁴¹ HHS, IHS, *Use of Indian Health Service Funds for Abortions* (June 30, 2022), <https://www.ihs.gov/ihs/circulars/2022/use-of-indian-health-service-funds-for-abortions/>.

⁴² While some IHS facilities are on Native American reservations, many are not and therefore should be subject to state law.

⁴³ EPPC Scholars Comment Opposing IHS's Proposed Rule "Removal of Outdated Regulations," RIN 0917-AA24 (Mar. 8, 2023), <https://eppc.org/wp-content/uploads/2024/03/EPPC-Scholars-Comment-on-IHS-Removal-of-Outdated-Regulations.pdf>.

Our project, while encouraging the department to withdraw its proposed rules, also recommended various alternatives to the rulemaking. April 18, 2024, our project met with officials from the Executive Office of the President to reiterate our concerns through an EO 12866 Meeting.⁴⁴

On April 30, 2024, HHS IHS issued its final rule, ignoring public comments that pointed out that the administration was misinterpreting the Hyde Amendment.⁴⁵ Although IHS offered no other justification for this rulemaking other than its claims about the Hyde Amendment, when commentators pointed out IHS was misconstruing the effect of this law, IHS said their remarks were irrelevant. The agency inexplicably stated that “comments about the substance and application of the Hyde Amendment itself are outside of the scope of this rulemaking,” a remark repeated four times in the five-page final rule.

The IHS 2024 rule was arbitrary and capricious, does not satisfy the APA’s requirement for reasoned decision making, violates states’ rights to advance the policy interests recognized by the Supreme Court in *Dobbs*, and violates the federal Hyde Amendment. There was nothing “outdated” about the previous regulations. We urge IHS to rescind the 2024 rule and reinstate the previously operative regulations for abortion in IHS facilities.

G. ACF should rescind *Designated Placement Requirements Under Titles IV–E and IV–B for LGBTQI+ Children*, 89 Fed. Reg. 34818 (April 30, 2024).

On September 28, 2023, the U.S. Department of Health and Human Services Administration for Children and Families (ACF) proposed a rule titled, “Safe and Appropriate Foster Care Placement Requirements for Titles IV–E and IV–B,” that proposed to require foster care providers to “affirm” a child’s “LGBTQI+ identity.”⁴⁶

On November 27, 2023, our project submitted a public comment opposing the proposed rule.⁴⁷ Our comment agreed that all children in foster care should receive “safe and proper” care, including children who identify as “LGBTQI+.” However, we argued that this rule’s special rules for “LGBTQI+ children” were premised on two incorrect and harmful assumptions: (1) not “affirming” a child’s self-proclaimed LGBTQI+ identity is unsafe and abuse; and (2) foster care providers who hold traditional beliefs (religious or otherwise) about marriage, sexuality, and gender are unable to provide LGBTQI+ children with safe and loving homes. We argued that these premises are not only false but are harmful to children in foster care and would undermine religious freedom and parental rights far beyond the foster care context. Our comment urged HHS to withdraw and abandon its harmful proposed rule.⁴⁸

⁴⁴ EPPC Scholars EO 12866 Meeting “Removal of Outdated Regulations” RIN 0917-AA24 (Apr. 18, 2024), <https://eppc.org/wp-content/uploads/2024/04/EPPC-Comment-EO-12866-Meeting-on-HHS-IHS-Removal-of-Outdated-Regulations.pdf>.

⁴⁵ 89 Fed. Reg. 34144 (April 30, 2024).

⁴⁶ 89 Fed. Reg. 34818 (Sept. 28, 2023). For a summary of the proposed rule, see Rachel N. Morrison, *Non-Affirmation of Child’s “LGBTQI+” Identity Is Abuse Under Proposed Foster Care Rule*, The Federalist Society (Nov. 19, 2023), <https://fedsoc.org/commentary/fedsoc-blog/non-affirmation-of-child-s-lgbtqi-identity-is-abuse-under-proposed-foster-care-rule>.

⁴⁷ EPPC Scholars Comment Opposing HHS Proposed Rule “Safe and Appropriate Foster Care Placement Requirements for Titles IV–E and IV–B,” RIN 0970-AD03 (Nov. 27, 2023), <https://eppc.org/wp-content/uploads/2023/11/EPPC-Comment-Opposing-HHS-Foster-Care-Proposed-Rule.pdf>.

⁴⁸ Public comments from other groups collected at: <https://eppc.org/news/eppc-scholars-and-others-submit-comments->

On April 30, 2024, ACF issued its final rule.⁴⁹ The final rule doubled down on HHS’s spurious claims that that LGBTQI+ kids face particular harms and risks and are “especially vulnerable.” It claimed that a “significant body of evidence” demonstrates a connection between the risk that a LGBTQI+ child will consider or attempt suicide and the conduct and treatment of their caregivers towards the child’s sexual orientation or gender identity. ACF also claimed that research shows that the support LGBTQI+ children receive from their families and caregivers related to their sexual orientation or gender identity is highly predictive of their mental health and wellbeing.

Weeks later, Joseph Figliolia and Leor Sapir of the Manhattan Institute published an article debunking the final rule’s bad science.⁵⁰ We agree with their conclusion that ACF’s final rule reflected the Biden administration’s flawed and ideologically-driven effort “to use federal policy to cajole foster families and agencies into affirming a child’s mistaken gender identity, entrenching the idea that failing to do so constitutes abuse. The policy will compound the challenges facing some of the nation’s most vulnerable children.” HHS’s recent report on care for children suffering with gender dysphoria, cited below, affirms the Manhattan Institute’s analysis.

Not only does the ACF rule reflect bad science, it has also been found unlawful. In March 2025, a federal district court found in favor of Texas Attorney General Ken Paxton, holding that ACF lacked statutory authority to issue its mandate.⁵¹

For all these reasons, we urge ACF to rescind its 2024 foster care rule.

H. HHS should rescind the *Health and Human Services Grants Regulation*, 89 Fed. Reg 36684 (May 3, 2024)

On July 13, 2023, HHS issued a proposal to rewrite sex discrimination provisions in more than a dozen laws that undergird federal grant programs. HHS proposes applying these provisions as if they also prohibit discrimination based on sexual orientation and gender identity.⁵² On September 11, 2023, EPPC scholars submitted a public comment opposing a proposed rule.⁵³

Our comment argued that the proposed rule also offers inadequate protections for religious liberty. The social services programs these statutes created depend in substantial part on religious organizations, many of whom cannot comply with HHS’s reinterpreted grant terms without violating their religious convictions. Yet the proposed rule offers no religious exemptions or accommodations: HHS only offers that grant recipients may voice their concerns, and HHS will consider them “promptly.”

[opposing-hhs-proposed-rule-requiring-affirmation-of-a-foster-childs-lgbtqi-identity/](#).

⁴⁹ 89 Fed. Reg. 34818 (April 30, 2024).

⁵⁰ Joseph Figliolia and Leor Sapir, *Foster Children: the New Pawn in the Gender Wars*, City Journal (May 14, 2024), <https://www.city-journal.org/article/foster-children-the-new-pawn-in-the-gender-wars>.

⁵¹ Office of the Texas Attorney General, *Attorney General Ken Paxton Defeats Biden-Era Rule that Attempted to Force Radical “Gender Identity” Ideology on Texas Foster Care System* (Mar. 21, 2025), <https://www.oag.state.tx.us/news/releases/attorney-general-ken-paxton-defeats-biden-era-rule-attempted-force-radical-gender-identity-ideology>.

⁵² 88 Fed. Reg. 44750 (July 13, 2023).

⁵³ EPPC Scholars Comment Opposing HHS OCR’s “Health and Human Services Grants Regulation,” RIN 0945-AA19 (Sept. 11, 2023), <https://eppc.org/wp-content/uploads/2023/09/EPPC-Comment-Opposing-HHS-Grants-NPRM.pdf>.

As we explained in our comment:

The Proposed Rule contradicts long-standing scientific understandings of human biology and thereby endangers public health. The Proposed Rule turns the clock back on girls' and women's rights, tramples parental rights, harms children's interests, dismantles sex-based protections, and violates religious freedom and conscience rights of grantees and religious institutions. While the Department claims to "take[] seriously its obligations to comply with Federal religious freedom laws, including the First Amendment and RFRA," the proposed religious exemption process is inadequate and not reflective of an agency "seriously" considering religious freedom laws. The Proposed Rule inverts our civil rights law and should be withdrawn and abandoned.

EPSC scholars urged HHS to withdraw the proposal.⁵⁴

On April 1, 2024, one of the project's scholars met with government officials in the Executive Office of the President to reiterate our concerns and urge the administration to abandon its unlawful proposal.⁵⁵ He argued that HHS's interpretation of *Bostock* was implausible:

The Supreme Court did not, as HHS claims, conclude that Title VII bars discrimination on the basis of gender identity. Moreover, the Supreme Court explicitly denied that its interpretation of Title VII applied to other statutes—not to Title IX and not to the thirteen statutes listed in the proposed rule. HHS has no mandate from Congress and no duty under *Bostock* to redefine what discrimination on the basis of sex means under these laws. ...

The EO 12866 comment also noted that while HHS claims to "take[] seriously its obligations to comply with Federal religious freedom laws, including the First Amendment and RFRA," the proposed religious exemption process is inadequate and not reflective of an agency "seriously" considering religious freedom laws. We again urged OIRA and HHS to take this final chance to reverse course, acknowledge the fundamental problems with this proposed rule, and abandon this attempt to rewrite more than a dozen federal statutes.

On May 3, 2024, however, HHS issued its final rule,⁵⁶ cementing its proposal to redefine "sex discrimination" based on its expansive interpretation of *Bostock*. Although the rule dramatically expanded covered entities' nondiscrimination obligations under HHS grant programs, HHS denied that its final rule was imposing new obligations. Instead, HHS claimed this was "merely an interpretive rule" and denied that it imposed costs or had any Federalism implications.

The final rule also reflected the Biden administration's hostility toward religious liberty. Instead of forthrightly addressing its obligations under RFRA, HHS instead created a process, essentially identical to what it had created under its 2024 ACA Section 1557 regulations, to allow recipients to raise concerns that the final rules, as applied to them, violated their rights under RFRA.

⁵⁴ Public comments from other groups collected at: <https://epsc.org/news/epsc-scholars-and-others-oppose-the-hhss-grants-proposed-rule/>.

⁵⁵ EO 12866 Meeting "Health and Human Services Grant Regulation" RIN 0945-AA19 (Apr. 1, 2024), <https://epsc.org/wp-content/uploads/2024/04/EPSC-Scholars-Comments-for-EO-12866-Meeting-HHS-Grants.pdf>.

⁵⁶ 89 Fed. Reg. 36684 (May 3, 2024).

A Louisiana school board filed suit against the HHS Grants final rule in January 2025, alleging that the Biden administration’s gender-identity mandate was unlawful as it does not, as HHS claimed, qualify as a “housekeeping” rule.⁵⁷

HHS should abandon its illegal attempt to unilaterally change the nondiscrimination requirements in HHS grants. It should rescind the 2024 grants rule and should concede in court that this rule is unlawful.

I. HHS should rescind *Nondiscrimination in Health Programs and Activities*, 89 Fed. Reg. 37522 (May 6, 2024).

On August 8, 2022, HHS issued a proposed rule claiming authority under Section 1557 of the Affordable Care Act to impose a radical transgender mandate on the American health care system.⁵⁸ On October 3, 2022, our project filed a public comment opposing HHS’s proposed mandate.⁵⁹ The comment argued that the proposed rule

... would radically remake American healthcare by replacing science-based medicine with ideology-driven mandates. As proposed, the Rule is arbitrary and capricious, exceeds statutory authority, and is unlawful and unconstitutional. The primary proposed changes are unsupported by substantial evidence. The Proposed Rule contradicts long-standing scientific understandings of human biology and thereby endangers public health. The Proposed Rule turns the clock back on girls’ and women’s rights, tramples parental rights, harms children’s interests, dismantles sex-based patient protections, and violates religious freedom and conscience rights of medical professionals, hospitals, and religious institutions. The Proposed Rule inverts our civil rights law and should be withdrawn and abandoned.

We noted that the proposed regulations would trample the conscience and religious freedom rights of medical professionals and also threaten the rights of providers and insurers to decline to assist or pay for elective abortions.⁶⁰

We followed up in February 2024, meeting with officials in the Executive Office of the President to reiterate our concerns.⁶¹ We noted that, just as with the Biden administration’s conscience regulations, the executive branch was abusing the regulatory process to advance its radical policy goals—goals that Congress and the American people do not share. We argued:

HHS’s rule would harm children and negatively impact the healthcare industry and access to care. The rule also has massive implications for conscience and religious freedom rights, which HHS continues to set aside in pursuit of the administration’s and Secretary Becerra’s policy goals.

⁵⁷ Complaint, *Rapides Parish Sch. Bd. v. HHS*, No. 25-70 (W.D. La. filed Jan. 17, 2025), <https://adfmlegalfiles.blob.core.windows.net/files/RapidesParishSchoolBoardHHSComplaint.pdf>.

⁵⁸ 87 Fed. Reg. 47824 (Aug. 8, 2022).

⁵⁹ EPPC Scholars Comment Opposing “Nondiscrimination in Health Programs and Activities,” RIN 0945–AA17 (Oct. 3, 2022), <https://eppc.org/wp-content/uploads/2022/10/EPPC-Scholars-Comment-Opposing-1557-Proposed-Rule.pdf>.

⁶⁰ Public comments from other groups collected at <https://eppc.org/news/eppc-scholars-and-others-oppose-hhss-proposed-transgender-mandate-in-healthcare/>.

⁶¹ EPPC Scholars EO 12866 Meeting “Nondiscrimination in Health Programs and Activities” RIN 0945–AA17 (Feb. 2, 2024), <https://eppc.org/wp-content/uploads/2024/02/EPPC-Scholars-Comments-for-EO-12866-Meeting-Section-1557-ACA-.pdf>.

Given the flagrant legal problems with the proposed rule, and given that HHS already conceded defeat in legal challenges to its 2016 Section 1557 rule,⁶² we are confident this proposal awaits a similar fate. If HHS continues down the path set out in the proposed rule, this rule will be the subject of extensive litigation, just like the 2016 Rule. Plaintiffs will win these lawsuits, just like with the 2016 Rule.

On May 6, 2024, HHS issued its final rule under Section 1557.⁶³ The final rule repeated the 2016 rule's broad definition of discrimination "on the basis of sex," even though the rule failed to define "sex." The regulation contained 42 definitions under Section 92.4, but "sex" was not one of them. This came on the heels of the Biden administration's Title IX final rule, which similarly found it "not necessary" to define sex or sex discrimination.

The final rule also renewed the declaration from the 2016 rule that claimed it is unlawful sex discrimination to "have or implement a categorical coverage exclusion or limitation for all health services related to gender transition." The rule made conflicting and confusing claims about abortion. On the one hand, HHS said that "nothing in this rule requires the provision of ... abortion." However, HHS still maintained that Section 1557 prohibited discrimination on the basis of "termination of pregnancy." HHS failed to resolve this tension in the final rule.

HHS maintained in the final rule that Section 1557 did not incorporate Title IX a whole, but only its prohibition on sex discrimination. We believe that this is incorrect and that it was arbitrary and capricious for HHS to declare itself not bound by Title IX's religious exemption, 20 U.S.C. § 1681(a)(3), and its abortion neutrality provision, 20 U.S.C. § 1688.

HHS attempted to justify its "gender transition" mandate by claiming that these procedures are supported by a "robust consensus." However, as HHS recognized in its recent report, these claims are false. On May 1, 2025, HHS issued its report, *Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices*.⁶⁴ The report's "umbrella review," an overview of systematic reviews, determined that "the overall quality of evidence concerning the effects of any intervention on psychological outcomes, quality of life, regret, or long-term health, is very low." The report also details the ethical concerns raised by allowing minors to consent to irreversible procedures under false pretenses, especially given the "unfavorable" risk/benefit profile of medical interventions.

Given the administration's commitment to sound science, fighting gender ideology, and protecting religious liberty, and in light of HHS's recent report, we strongly recommend that HHS rescind the 2024 Section 1557 final rule.

J. HHS should rescind portions of *Nondiscrimination on the Basis of Disability in Programs or Activities Receiving Federal Financial Assistance*, 89 Fed. Reg. 40066 (May 9, 2024).

On September 13, 2023, HHS issued a proposed rule that would clarify what constitutes discrimination against individuals with disabilities under section 504 of the Rehabilitation Act and,

⁶² In 2022, both the Fifth Circuit and the Eighth Circuit ruled in favor of religious plaintiffs and granted injunctive relief from HHS's 2016 Section 1557 regulations. *Franciscan Alliance v. Burwell*, 47 F.4th 368 (5th Cir. 2022); *Religious Sisters of Mercy v. Becerra*, 55 F.4th 583 (8th Cir. 2022). No other circuit has ruled on these issues.

⁶³ 89 Fed. Reg. 37522 (May 6, 2024).

⁶⁴ HHS, *Treatment for Pediatric Gender Dysphoria: Review of Evidence and Best Practices*, May 1, 2025, <https://opa.hhs.gov/sites/default/files/2025-05/gender-dysphoria-report.pdf>.

by extension, the Americans with Disabilities Act.⁶⁵ Our public comment, submitted in November 2023, applauded HHS for its efforts to better protect the dignity of disabled persons in the medical treatment context, proposals that we have reason to believe were formulated during the first Trump administration.⁶⁶

However, we criticized the Proposed Rule’s claim that people with gender dysphoria qualify for protections under Section 504. We argued that this claim did not withstand scrutiny and that the proposed rule’s reliance on *Williams v. Kincaid*, 45 F.4th 759 (4th Cir. 2022) was unwarranted. We also emphasized the enormous religious liberty problems that expanding Section 504 by counting gender dysphoria as a disability would create.⁶⁷ We urged HHS to drop this effort. We reiterated our concerns again in a meeting with White House officials under Executive Order 12866.⁶⁸

Unfortunately, in its May 2024 final rule, HHS persisted in its claim that gender dysphoria counts as a disability under Section 504, even as it admitted that that Congress explicitly excluded “gender identity disorders not resulting from physical impairments” from the Section 504 definition of disability. This aspect of the final rule directly contradicts 42 U.S.C. § 12211. Months after the final rule, a coalition of 17 states filed a lawsuit against HHS challenging this aspect of the disability rule.⁶⁹ A Louisiana school district filed a second lawsuit in January.⁷⁰

Last month, on April 11, HHS issued a clarification “document” “out of an abundance of caution” to “clarify and emphasize” that gender discrimination is not a protected disability under federal disability discrimination requirements.⁷¹ As revealed in the clarification document, the Trump HHS is taking the position that the discussion about gender dysphoria in the Biden rule’s preamble “does not have the force or effect of law” and “is not, and never was, enforceable.”

We are grateful that HHS has recently taken this step. We urge the administration to take whatever steps it believes prudent to rescind or otherwise nullify the “gender dysphoria” aspect of the 2024 disability rule and resolve litigation against HHS over this rule.

⁶⁵ 88 Fed. Reg. 63392 (Sept. 13, 2023).

⁶⁶ EPPC Scholar’s Comment Regarding “Discrimination on the Basis of Disability in Health and Human Service Programs or Activities,” RIN 0945-AA15 (Nov. 13, 2023), <https://eppc.org/wp-content/uploads/2023/11/EPPC-HHS-Disability-Pub-Comment-2023-11-13.pdf>.

⁶⁷ Public comments from other groups available at <https://eppc.org/news/eppc-scholar-and-others-comment-on-hhs-proposed-rule-on-disability-rights/>.

⁶⁸ EPPC Scholars EO 12866 Meeting “Rulemaking on Discrimination on the Basis of Disability in Health and Human Services Programs or Activities” RIN 0945-AA15 (Apr. 2, 2024), <https://eppc.org/wp-content/uploads/2024/04/EPPC-Scholar-Comments-for-EO-12866-Meeting-HHS-Disability-Rule.pdf>.

⁶⁹ Office of the Texas Attorney General, *Attorney General Ken Paxton Sues Biden Administration to Stop New Regulation that Illegally Attempts to Rewrite Federal Disability Law to Include “Gender Dysphoria,”* (Sept. 26, 2024), <https://www.texasattorneygeneral.gov/news/releases/attorney-general-ken-paxton-sues-biden-administration-stop-new-regulation-illegally-attempts-rewrite>.

⁷⁰ Complaint, *Rapides Parish Sch. Bd. v. HHS*, No. 25-70 (W.D. La. filed Jan. 17, 2025), *supra*, n.57.

⁷¹ 90 Fed. Reg. 15412 (April 11, 2025).

CONCLUSION

We thank OMB for this invitation to submit public comment and for its dedication to the rule of law. We encourage OMB to rescind the agency actions identified above and for the administration to take whatever steps it deems necessary to protect the American people from regulatory overreach.

Sincerely,

Eric Kniffin, J.D.

Fellow

Administrative State Accountability Project

Ethics & Public Policy Center

Natalie Dodson

Policy Analyst

Administrative State Accountability Project

Ethics & Public Policy Center