U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

COMMISSIONED CORPS INSTRUCTION





CCI 222.01 EFFECTIVE DATE: 22 November 2021

By Order of the Assistant Secretary for Health:

ADM Rachel L. Levine, M.D.

SUBJECT: Transgender PHS Officers

- 1. PURPOSE: This Instruction establishes the policy under which Public Health Service (PHS) officers can transition their gender while serving in the U.S. Public Health Service (USPHS) Commissioned Corps. It discusses basic readiness requirements, name change policies, guidance on the necessary medical documentation to pursue transition-related medical care, and the procedures for changing an officer's gender marker in the Defense Enrollment Eligibility Reporting System (DEERS). It also formalizes the USPHS Commissioned Corps' commitment to non-discrimination with respect to officers who are transgender in order to foster a diverse, inclusive force that reflects the Nation served by PHS officers.
- 2. APPLICABILITY: This Instruction applies to all PHS officers in the Regular Corps and the Ready Reserve Corps.
- AUTHORITY:
 - 3-1. 42 U.S.C. § 213(f), "Military benefits"
 - 3-2. 42 U.S.C. § 216, "Regulations"
 - 3-3. Executive Order 11140, "Delegating certain functions of the President relating to the Public Health Service," dated 30 January 1964
 - 3-4 <u>Executive Order 13988</u>, "Preventing and Combating Discrimination on the Basis of Gender Identity or Sexual Orientation," dated 20 January 2021
 - 3-5 Commissioned Corps Directive (CCD) 111.01, "Equal Opportunity"
 - 3-6 Commissioned Corps Instruction (CCI) <u>211.03</u>, "Equal Opportunity: Discrimination Complaints Processing"
 - 3-7. <u>Department of Defense (DoD) Instruction 1341.02</u>, "Defense Enrollment Eligibility Reporting System (DEERS) and Program and Procedures"
- 4. PROPONENT: The proponent of this Instruction is the Assistant Secretary for Health (ASH). The Surgeon General (SG) is responsible for providing supervision of activities relating to the day-to-day operations of the USPHS Commissioned Corps. The Director, Commissioned Corps

Headquarters (CCHQ), provides overall management of USPHS Commissioned Corps personnel operations and processes.

5. SUMMARY OF REVISIONS AND UPDATES: This is the first issuance of this Instruction within the electronic Commissioned Corps Issuance System (eCCIS).

- 6. POLICY: This policy is effective immediately.
 - 6-1. Transgender status is not a relevant factor in determining an individual's appointment to or continued eligibility for service in the USPHS Commissioned Corps. Sex discrimination, including discrimination against transgender officers, is inconsistent with the core values and conditions of service in the USPHS Commissioned Corps. Officers who feel their gender identity or transgender status has caused them to be subjected to discrimination may file a complaint in accordance with CCI 211.03, "Equal Opportunity: Discrimination Complaints Processing."
 - 6-2. The USPHS Commissioned Corps will treat information related to an individual's transgender status with the appropriate sensitivity and keep it confidential to the extent required by all applicable federal laws, regulations, and policies. Unauthorized use or disclosure of information of an officer's transgender status by supervisors or staff may violate the Privacy Act of 1974 (5 U.S.C. § 552a) and the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as applicable. Officers who are transgender may share this information with their colleagues as they personally determine appropriate.
 - 6-3. Recognizing Name and Gender Changes. The provisions in this subsection apply to PHS officers who are assigned or detailed to the Department of Health and Human Services (HHS). Officers assigned or detailed to non-HHS organizations must follow their respective organizations' policies.
 - a. Informal use of preferred name and pronoun. Consistent with guidance issued by the United States Office of Personnel Management (OPM) regarding the Employment of Transgender Individuals in the Federal Workplace, PHS officers do not need a court-ordered name or gender change in order to change the name the officer uses at work due to transgender status or gender identity. Officers can, upon their request, have certain records changed, such as staff directories, intranet profiles, business cards, email addresses, and door nameplates without submitting documentation to support the change.
 - b. Legal name change. The USPHS Commissioned Corps authorizes officers who wish to change their name in official personnel and other records to do so. These records (e.g., those pertaining to payroll, retirement accounts, official personnel records, or official government identification tags) require legal documentation (such as a name change order) before the name can be changed in the records.
 - c. Initiating the Workplace Transition Process. Officers who are transgender and are seeking changes in the workplace that require supervisory assistance (e.g., name and pronoun usage, records changes) associated with a transition must notify their supervisor and their USPHS Commissioned Corps Liaison (Liaison). Detailed information on developing a workplace Transition Plan (which includes information about initiating record changes and changes in the office, as well as making decisions about disclosure to co-workers) can be found in OPM's User Individuals in the Federal Workplace.
 - 6-4. Readiness and Uniform Requirements.
 - a. Transgender officers who begin receiving hormone replacement therapy may experience changes in their physical strength, muscle mass, and body shape and composition. If, as a result of their medical treatment during the period of transition, officers cannot meet Annual Physical Fitness Test (APFT) standards, they must submit medical documentation to Medical Affairs Branch (MAB) in CCHQ to request a medical waiver in accordance with CCI 241.01, "Readiness

- and Duty Requirements" (see also, Personnel Operations Memorandum (POM) <u>821.65</u>, "Annual Physical Fitness Test (APFT)," for general information regarding the APFT).
- b. If, as a result of their medical treatment during the period of transition, transgender officers cannot meet uniform and grooming standards, they must request a medical waiver in accordance with <u>CCI 412.01</u>, "Uniforms and Appearance," Section 6-5.h.
- c. After an officer's gender marker is changed in DEERS, the officer must meet the readiness requirements (e.g., APFT and weight requirements), uniform and grooming standards, and deployability standards that align with the new gender marker in DEERS.
- 6-5. Facilities Use. Use of common access restrooms, locker room/dressing rooms, and gender segregated billeting facilities while on:
 - a. Assignments and Deployments in HHS Organizations.
 - (1) Consistent with OPM <u>guidance</u> and the Department of Labor's <u>Occupational Safety and Health Administration guidelines</u>, it is impermissible discrimination to limit the access of an officer who is transgender to a single-user restroom in places where a common-access restroom is available. Transgender officers must be permitted to use restrooms that align with their gender identity. Restroom access cannot be premised or conditioned upon any medical procedure, nor can it be premised or conditioned upon where the officer is in the gender transition process. Transgender officers must be allowed to use locker rooms/dressing rooms that align with their chosen gender identity.
 - (2) In a deployment setting with gender segregated sleeping/housing arrangements, officers may choose the sleeping/housing arrangements that align with their chosen gender identity.
 - (3) Officers may choose to use single-user restrooms or private locker rooms/dressing rooms to provide for their comfort and privacy, but cannot be compelled to use such facilities.
 - b. Assignments and Deployments in non-HHS Organizations. Transgender officers who are stationed at, or deployed in support of, non-HHS organizations (e.g., DoD, Department of Homeland Security, Bureau of Prisons, National Atmospheric and Oceanic Administration) must familiarize themselves with and adhere to the policies and procedures outlined by the organizations to which they are detailed or deployed.
- 6-6. Gender Transition and Medical Care.
 - a. Officers seeking to transition genders must obtain a diagnosis from a medical provider stating that a gender transition is medically necessary. The medical provider must be located at a Military Treatment Facility (MTF) or, if the officer is unable to access a MTF, the medical provider must be approved by MAB (see CCI 671.10, "Health Care Benefits").
 - b. After receiving a diagnosis, officers must collaborate with their medical provider to develop a medical treatment plan. Officers must inform MAB of their medical

diagnosis and treatment plan (as well as any changes to the treatment plan) and provide MAB with the appropriate supporting documentation.

- (1) Gender transition care is unique to the individual officer and may include, but is not limited to psychotherapy, hormone therapy, and/or surgery.
- (2) If the officer and/or the medical provider anticipates that the officer's treatment will impact basic readiness status, the officer should request exceptions/waivers to policy as needed. The officer must make requests for medical waivers through the MAB form, "Active Duty and Reserve Corps Medical Waiver Request". For more information about the USPHS Commissioned Corps' Medical Waiver Program, see CCI 221.02, "Medical Readiness," and MAB's Medical Waiver Request FAQs.
- c. After an officer completes the gender transition, they are still required to complete all necessary medical evaluations needed to meet medical readiness requirements (e.g., a transgender male officer with internal reproductive organs will still need to have the pertinent medical exams). Therefore, even if an officer has their gender marker changed in DEERS, such change does not prohibit nor relieve officers from receiving ongoing, medically appropriate care.
- 6-7. Changing Gender Marker in DEERS.
 - Once an officer and their medical provider determine it is appropriate to change the officer's gender marker in DEERS (as documented by their medical provider) the officer must obtain and produce documentation to include, but not limited to:
 - (1) A United States passport reflecting the officer's changed identity;
 - (2) A certified true copy of a State birth certificate reflecting the officer's gender identity; or
 - (3) A certified true copy of a court order reflecting the officer's gender identity.
 - b. Once an officer's gender marker is changed in DEERS, the officer must adhere to all USPHS Commissioned Corps standards and requirements associated with their gender marker in DEERS as outlined in this Instruction.

7. RESPONSIBILITIES:

- 7-1. The ASH is responsible for establishing USPHS Commissioned Corps policy Instructions.
- 7-2. The SG is responsible for supervision of activities relating to the day-to day operations of the USPHS Commissioned Corps and may issue any POMs that are necessary to implement this Instruction.
- 7-3. USPHS Commissioned Corps Liaisons are responsible for being familiar with this policy, providing guidance, and serving as a first-line resource for PHS officers within their agencies throughout the gender transition process. Liaisons will provide administrative support to officers as necessary, but will not have access to officers' private medical information.
- 7-4. All PHS officers are responsible for abiding by the USPHS Commissioned Corps' core values and upholding the highest standards of ethical and moral conduct. Officers who practice gender identity discrimination within their workplaces and/or within the scope of

their employment are subject to disciplinary action in accordance with <u>CCD 111.02</u>, "Disciplinary Action."

7-5. Officers who are transgender are responsible for:

- a. Notifying MAB of any diagnosis and/or medical treatment plan, as well as requesting any applicable exceptions/waivers to policy, related to their gender transition and providing the relevant supporting documentation.
- b. Obtaining certification from their medical provider supporting identity documentation changes, if sought. They can obtain necessary documentation and request gender marker change in DEERS as detailed in Section 6-7.
- c. Adhering to the readiness and uniform and grooming standards associated with their gender marker in DEERS.
- d. Adhering to any ongoing medical treatment plan related to transition as prescribed by their medical provider.

7-6. MAB is responsible for:

- a. Serving as an intermediary between the officer, the treatment facility, and medical provider as needed.
- b. Maintaining medical documentation submitted by the officer and complete medical waiver requests as appropriate.
- Confirming with officer when the officer plans to change their gender marker in DEERS.
- 8. HISTORY: This is the first issuance of this Instruction within the eCCIS.

Appendix A

Definitions

- a. Hormone Replacement Therapy. The use of feminizing hormones in an individual assigned male at birth or the use of masculinizing hormones in an individual assigned female at birth. Hormone replacement therapy is a common medical treatment associated with gender transition.
- b. Gender dysphoria. A concept designated in the DSM-5 as clinically significant distress or impairment related to a strong desire to be of another gender, which may include the desire to change one's primary and/or secondary sex characteristics. Not all transgender or gender diverse people experience dysphoria.
- c. Gender identity. One's internal or personal sense of being male, female, both, or neither. However, an officer who identifies as both or neither must choose either male or female for the purposes of the gender marker in DEERS, uniform wear, and readiness requirements.
- d. Gender marker. Data element in DEERS that identifies an officer's gender. After a transgender officer's gender marker is changed in DEERS, the officer must meet the gender specific conditions of service associated with that gender marker.
- e. Medically necessary. Healthcare services or supplies necessary to prevent, diagnose, or treat an illness, injury, condition, disease, or its symptoms, and that meet accepted standards of medicine.
- f. Sex assigned at birth. A person's sex determined at his or her birth and recorded on the person's original birth certificate.
- g. Transgender. An umbrella term for people whose gender identity differs from the sex assigned at birth.
- h. Transition. A person's process of developing and assuming a gender expression to match their gender identity. Transitioning may or may not include medical and legal aspects, including taking hormones, having surgery, or changing identity documents (e.g. driver's license, Social Security record) to reflect one's gender identity. The nature and duration of transition are variable and individualized. As such, each officer should be treated on a case-by-case basis.