

RAND PAUL, OF KENTUCKY
SUSAN M. COLLINS, OF MAINE
LISA MURKOWSKI, OF ALASKA
MARKWAYNE MULLIN, OF OKLAHOMA
ROGER MARSHALL, OF KANSAS
TIM SCOTT, OF SOUTH CAROLINA
JOSH HAWLEY, OF MISSOURI
TOMMY TUBERVILLE, OF ALABAMA
JIM BANKS, OF INDIANA
JON HUSTED, OF OHIO
ASHLEY MOODY, OF FLORIDA

BERNARD SANDERS, OF VERMONT
PATTY MURRAY, OF WASHINGTON
TAMMY BALDWIN, OF WISCONSIN
CHRISTOPHER MURPHY, OF CONNECTICUT
TIM KAINE, OF VIRGINIA
MARGARET WOOD HASSAN, OF NEW HAMPSHIRE
JOHN W. HICKENLOOPER, OF COLORADO
EDWARD J. MARKEY, OF MASSACHUSETTS
ANDY KIM, OF NEW JERSEY
LISA BLUNT ROCHESTER, OF DELAWARE
ANGELA D. ALSOBROOKS, OF MARYLAND

MATT GALLIVAN, MAJORITY STAFF DIRECTOR
WARREN GUNNELS, MINORITY STAFF DIRECTOR

www.help.senate.gov

United States Senate

COMMITTEE ON HEALTH, EDUCATION,
LABOR, AND PENSIONS

WASHINGTON, DC 20510-6300

September 23, 2025

VIA ELECTRONIC TRANSMISSION

Bobby Mukkamala, M.D.
President
American Medical Association
330 N. Wabash Ave., Suite 39300
Chicago, IL 60611-5885

Dear Dr. Mukkamala,

I am writing as Chairman of the Senate Committee on Health, Education, Labor, and Pensions (HELP) and a physician to seek transparency regarding the American Medical Association's (AMA's) advocacy of "woke" policies contrary to scientific evidence and inconsistent with many of its members' views.

As the largest association representing physicians in the United States, the AMA has a unique responsibility to advocate on behalf of its over 270,000 members and the millions of patients they treat.¹ The AMA is widely recognized as a leading organization representing the voice of physicians in the United States. With that role comes a responsibility to fulfill the public trust and maintain integrity in exercising influence in the policy-making process.

Unfortunately, the AMA too often has been guided by ideological views in adopting policy resolutions, rather than doing what is right for doctors and patients. AMA's recent actions raise questions about whether it is actually prioritizing physicians and patients or simply advocating on its own political priorities. The AMA has taken a number of policy positions related to gender transitions, abortion, forced diversity, equity, and inclusion (DEI) mandates, and other positions that run contrary to science and ignore the day-to-day issues providers and patients face.

Gender Transition Procedures on Minors

In one striking example, the AMA has endorsed an unscientific, anti-patient policy supporting gender transition procedures on minors. The AMA's stated position is to "oppose laws and policies that criminalize, prohibit or otherwise impede the provision of evidence-based, gender-affirming care, including laws and policies that penalize parents and guardians who support minors seeking and/or receiving gender-affirming care."²

¹ *About the AMA*, Am. Med. Ass'n, <https://www.ama-assn.org/about> (last visited Sept. 22, 2025).

² Am. Med. Ass'n, Clarification of Evidence-Based Gender-Affirming Care H-185.927 (2024), <https://policysearch.ama-assn.org/policyfinder/detail/Gender?uri=%2FAMADoc%2FHOD-185.927.xml/> (last visited Aug. 15, 2025).

In a recent interview with STAT, AMA's CEO John Whyte stated: "We have to be the voice of medicine" and added, "We have to stand up for science."³ Yet this policy flies in the face of widely available evidence and conflicts with guidelines and practices adopted in many other countries.

Further, the Daily Caller News Foundation recently reported that the nonprofit AMA Foundation established a LGBTQ medical fellowship in 2021, which provides up to \$750,000 in grants to academic medical centers to train physicians to provide transgender "affirming" care and cross-sex hormones to gender-confused pediatric and adolescent patients.⁴ Leading academic medical centers, including the University of Wisconsin-Madison, Harvard Medical School, Vanderbilt University, and Mount Sinai, partnered with the AMA Foundation to provide the fellowships.⁵

In his first month in office, President Trump made clear that protecting children from chemical and surgical castration must be a priority. On January 28, 2025, the President issued Executive Order (EO) 14187 titled, "Protecting Children from Chemical and Surgical Mutilation," establishing that the United States will not support gender transition procedures on individuals under age 19, which includes the use of puberty blockers, cross sex hormones, or surgery.⁶

The EO condemned guidance issued by the World Professional Association for Transgender Health (WPATH) as "junk science" and directed federal agencies to enforce all laws that prohibit or limit these destructive and life-altering procedures.⁷ The EO also directed the Department of Health and Human Services (HHS) and its agencies to end gender transition services for children covered by Medicare, Medicaid, and the exchanges established by the Patient Protection and Affordable Care Act (ACA).

HHS subsequently released a comprehensive review in May of the evidence and best practices for promoting the health of children and adolescents with gender dysphoria, which identified "serious concerns about medical interventions, such as puberty blockers, cross-sex hormones, and surgeries, that attempt to transition children and adolescents away from their sex."⁸ HHS concluded that a growing body of evidence points to significant risks (e.g., infertility) while finding very weak evidence of benefit, consistent with systematic reviews of evidence around the world.

Other countries adopting this view include Finland and Sweden, where guidelines recommend that psychotherapy should be the standard of care for youth with gender dysphoria, rather than

³ Theresa Gaffney, *Inside the American Medical Association's Sudden Strategy Shift in Washington*, STAT (Aug. 13, 2025), <https://www.statnews.com/2025/08/13/ama-strategy-shift-new-louder-voice-in-washington/>.

⁴ Megan Brock, *EXCLUSIVE: Trans-Industrial Complex Trains New Wave of Radical Doctors Right Under Trump Admin's Nose*, Daily Caller News Foundation (Sept. 18, 2025), <https://dailycaller.com/2025/09/18/exclusive-american-medical-association-foundation-child-sex-changes-training-doctors/>.

⁵ *Id.*

⁶ Exec. Order No. 14187, 90 Fed. Reg. 8771 (Feb. 3, 2025).

⁷ *Id.*

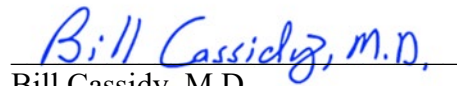
⁸ Press Release, Dep't of Health and Human Services, HHS Releases Comprehensive Review of Medical Interventions for Children and Adolescents with Gender Dysphoria (May 1, 2025), <https://www.hhs.gov/press-room/gender-dysphoria-report-release.html>.

hormones or surgeries.⁹ A growing number of hospitals and health systems in the United States also have moved away from providing these unscientific, anti-patient procedures.¹⁰

Americans do not want federal tax dollars funding irreversible gender transition procedures on children. To that end, I request answers to the following questions by October 7, 2025:

1. What actions, if any, has the association taken to ensure its members' compliance with Executive Order (EO) 14187, which prohibits the funding, sponsorship, promotion, assistance, or support of gender transition interventions for minors?
2. Please describe the types of gender transition services that the association's members either currently provide or have provided to minors at any time, including counseling; speech and communication modification services; behavioral adaptations; puberty blockers; hormone therapy; hair removal; surgical procedures; and resident and fellow medical training.
3. Please provide the sources and dollar amounts of any federal funding received by the association annually.
 - a. What amount of this funding is utilized for association member and/or health care provider outreach, education, or other initiatives related to gender transition services for minors, including the AMA Foundation's LGBTQ medical fellowship program?
4. Following the signing of EO 14187, please describe what, if any, revisions have been made to the association's guidelines on chemical, surgical, and behavioral interventions for gender transition services for minors.
 - a. What related guidance or guidelines for practice, including revised scientific literature, has the association provided to its members and/or health care providers?
5. Please provide copies of guidance documents, guidelines for practice, and scientific literature provided by the association from January 28, 2025, to the present to its members and/or health care providers related to gender transition services for minors.

Sincerely,


Bill Cassidy, M.D.
Chairman
U.S. Senate Committee on Health,
Education, Labor, and Pensions

⁹ *Id.* at Pages 142-145.

¹⁰ Mary Kekatos, *More US hospitals are ending gender-affirming care for minors. How this could impact patients*, ABC News (Aug. 23, 2025) <https://abcnews.go.com/Health/us-hospitals-ending-gender-affirming-care-minors-impact/story?id=124889031>.

cc: John Whyte, M.D., MPH, CEO