



Office of the Deputy Attorney General

Washington, D.C. 20530

March 18, 2026

The Honorable Letitia James
New York State Attorney General
Office of the Attorney General
28 Liberty Street
16th Floor
New York, NY 10005

Dear Attorney General James:

I understand that on February 25, 2026, your office wrote a letter to NYU Langone Health asserting that it may violate New York anti-discrimination law if it does not offer sex-rejecting procedures for children. *See* N.Y. Exec. Law § 296; *see also* N.Y. Pub. Health L. § 2803(1)(g) & N.Y. Comp. Codes R. & Regs. tit. 10, § 405.7(b)(2). I also understand that on March 10, 2026, the Administrator of the Department of Health and Human Services, Dr. Mehmet Oz, sent a letter to your office in support of NYU Langone's decision to end this treatment. Representatives of NYU Langone have reported to the Department that the hospital has reviewed these letters and does not intend to offer sex-rejecting procedures to minors.

I recognize that Dr. Oz and NYU Langone have addressed the scientific and medical factors that support NYU Langone's decision. I write because your office's invocation of anti-discrimination laws to require the provision of these services and procedures to minors raises significant legal issues as well as issues of health care and public policy. As just one example, your office's position would require a hospital to prescribe certain medications for certain diagnoses, regardless of the hospital's or its doctors' independent medical determination about the propriety of such treatment.

The U.S. Department of Justice disagrees with your determination that NYU Langone's decision not to offer sex-rejecting procedures to children is discriminatory as a legal matter. The law cited in your office's letter prohibits discrimination based on, among other things, sex, gender identity, and disability. NYU Langone's exercise of its sound discretion to not provide such services and procedures does not constitute discrimination on any of these grounds.

First, NYU Langone's policy applies to all minors identically and does not treat minor patients differently because of their sex. Any such insinuation of sex-based discrimination was refuted by the United States Supreme Court in *United States v. Skrmetti*, 605 U.S. 495 (2025). NYU Langone has made a reasoned policy decision not to supply minors with puberty blockers or hormones to treat gender dysphoria. *Id.* at 515. This policy applies regardless of the minor's sex. Therefore, as the Supreme Court has recognized, "[t]he application of [this] prohibition does not turn on sex." *Id.* at 514.

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Second, NYU Langone’s policy does not result in discrimination based on gender identity. Again, the Supreme Court’s holding in *Skrimetti* is determinative. NYU Langone will not provide any minor—regardless of that minor’s perceived gender identity—with puberty blockers or hormonal interventions to treat gender dysphoria. But NYU Langone will provide any child—regardless of that minor’s perceived gender identity—with puberty blockers or hormonal interventions to treat other diagnoses. Put simply, a minor’s gender identification status does not alter the application of NYU Langone’s policy. *Skrimetti*, 605 U.S. at 520. The assertion, whether correct or not as a medical matter, that only children who identify as transgender suffer from gender dysphoria does not change this conclusion. *Cf. id.* at 518 (“[A] State does not trigger heightened constitutional scrutiny by regulating a medical procedure that only one sex can undergo unless the regulation is a mere pretext for invidious sex discrimination.”). Because NYU Langone’s policy turns on diagnosis rather than gender identity—and thus allows transgender minors to access puberty blockers and hormones to treat conditions other than gender dysphoria—there is, as the Supreme Court has said, a “‘lack of identity’ between transgender status and the excluded medical diagnoses.” *Id.* at 519.

Third, NYU Langone’s policy does not discriminate based on disability. Although New York regulation defines “disability” to include “gender dysphoria,”¹ nothing about NYU Langone’s reasoned determination not to provide sex-rejecting procedures for minors suggests that it is discriminating against patients with gender dysphoria. NYU Langone has simply decided not to provide certain off-label² medical interventions to minors to treat that condition. NYU Langone does not turn away patients with gender dysphoria. As it plainly states on its website, NYU Langone “provide[s] psychological counseling for the entire family” for gender dysphoric adolescents.³ As above, *Skrimetti*’s reasoning applies equally with regard to an analysis of discrimination based on disability.

For these reasons, the Justice Department believes the law is clear, and anti-discrimination laws cannot be used to force NYU Langone to perform sex-rejecting procedures on children. If you proceed with any enforcement action against NYU Langone, the Department will take all necessary actions to defend the hospital’s decision to cease offering such procedures. We will not sit idly by while you attempt to use your office to force harmful procedures on our most vulnerable population.

Sincerely,



Todd Blanche
Deputy Attorney General

¹ N.Y. Comp. Codes R. & Regs. tit. 9, § 466.13(3)(2).

² Puberty blockers and cross-sex hormones have never been approved by the FDA to treat gender dysphoria.

³ <https://nyulangone.org/care-services/transgender-health>.