

PENN STATE HEALTH and ST.
JOSEPH REGIONAL HEALTH
NETWORK D/B/A PENN STATE
HEALTH ST. JOSEPH,

NO. 335 M.D. 2025

V.

COMMONWEALTH OF PENNSYLVANIA,
PENNSYLVANIA HUMAN RELATIONS
COMMISSION,

Respondent.

Because Petitioners Penn State Health and St. Joseph Regional Health Network d/b/a Penn State Health St. Joseph in this action seek declaratory relief that could undermine proposed Intervenor EJ Stiles's right to assert a cause of action against Penn State Health and Penn State Health St. Joseph for violation of

the Pennsylvania Human Relations Act (“PHRA”),¹ Stiles petitions to intervene pursuant to Pennsylvania Rules of Civil Procedure 2327 and 2328.

1. This case stems from a Pennsylvania Human Relations Commission (“PHRC”) complaint filed by proposed Intervenor EJ Stiles against Penn State Health St. Joseph, Penn State Health, and the Pennsylvania State University (collectively, “the Penn State Entities”).

2. In Stiles’s PHRC complaint, Am. Compl.² Ex. A, Stiles alleged that the Penn State entities illegally discriminated against Stiles on the basis of sex in violation of the PHRA when the Penn State entities canceled Stiles’s scheduled gender-affirming mastectomy surgery at Penn State Health St. Joseph Medical Center, for the stated reason that providing such surgery would violate Catholic doctrine.

3. Stiles alleged that Penn State Health St. Joseph is controlled by its sole member, Penn State Health, which in turn is controlled by The Pennsylvania State University, a state-related university that is part of the Commonwealth System of Higher Education (i.e., a government entity that may not operate a religious institution). *See* Am. Compl. Ex. A at 4.

¹ Act of Oct. 27, 1955, P.L. 744, *as amended*, 43 P.S. §§ 951-64.

² Stiles refers to the Amended Petition for Review in the Nature of a Complaint as the “Amended Complaint.”

4. In this case, Penn State Health and Penn State Health St. Joseph allege that Penn State Health St. Joseph Medical Center is a Catholic hospital and assert rights under the Pennsylvania Religious Freedom Protection Act (“RFPA”), Act of Dec. 9, 2002, P.L. 1701, *as amended*, 71 P.S. §§ 2401-08.³

5. Penn State Health and Penn State Health St. Joseph allege that Penn State Health St. Joseph is “recognized by” the Roman Catholic Diocese of Allentown as a Catholic hospital but allege no formal connection with the Diocese or the Catholic church. Am. Compl. ¶ 6.

6. In Penn State Health St. Joseph’s original Petition for Review in the Nature of a Complaint (“Complaint”), Penn State Health St. Joseph sought, among other things, an order enjoining the PHRC from exercising subject matter jurisdiction over Stiles’s PHRC complaint.

7. After Penn State Health St. Joseph filed its Complaint in this action, the PHRC dismissed Stiles’s PHRC complaint pursuant to the RFPA, based solely on Penn State Health St. Joseph’s averments in its Complaint.

8. The PHRC conducted no factual investigation into whether Penn State Health St. Joseph is “[a]n individual or a church, association of churches or other religious order, body or institution,” entitled to assert a claim or defense under the

³ Penn State Health and Penn State Health St. Joseph operate Penn State Health St. Joseph Medical Center. Am. Compl. ¶ 29. Penn State Health St. Joseph is a registered fictitious name of St. Joseph Regional Health Network.

RFPA, RFPA § 3, 71 P.S. § 2403, ignored Stiles’s allegations regarding The Pennsylvania State University and Penn State Health’s control over Penn State Health St. Joseph, *see* Am. Compl. Ex. A at 4, and did not provide Stiles with any opportunity to present arguments regarding Penn State Health St. Joseph’s assertion of rights under the RFPA.

9. The PHRC summarily concluded that Penn State Health St. Joseph “has established that it is entitled to relief pursuant to the RFPA,” and dismissed Stiles’s complaint. Am. Compl. Ex. D.

10. Penn State Health St. Joseph, joined by Penn State Health, then filed their Amended Complaint seeking declaratory relief in this Court.

11. The Amended Complaint specifically references Stiles’s PHRC complaint and Stiles’s intention to file suit against the Penn State entities for violation of the PHRA. *See* Am. Compl. ¶¶ 32-48.⁴

12. Despite PHRC’s dismissal of Stiles’s complaint, and the RFPA’s limitation to prohibiting only “agency action” that substantially burdens free exercise of religion, Penn State Health and Penn State Health St. Joseph ask this Court, among other things, to declare that the *PHRA* cannot compel Penn State Health or Penn State Health St. Joseph to provide gender-affirming care. *See* Am. Compl. Statement of Relief Requested ¶ 3.

⁴ Petitioners in their Amended Complaint refer to Stiles as “E.S.”

13. Stiles wishes to assert several causes of action against the Penn State entities, including a claim for violation of the PHRA. *See* PHRA § 12(c)(1), 43 P.S. § 962(c)(1) (providing cause of action if PHRC dismisses a complaint within one year of its filing).

14. A declaratory judgment in favor of Penn State Health and Penn State Health St. Joseph in this case could undermine Stiles's ability to pursue causes of action against the Penn State entities stemming from the discriminatory cancellation of Stiles's surgery.

15. Stiles, therefore, is entitled to intervene because "the determination of [this] action may affect any legally enforceable interest of [Stiles] whether or not [Stiles] may be bound by a judgment in the action." Pa.R.Civ.P. 2327(4).

16. If this Court permits Stiles to intervene, Stiles will file the proposed preliminary objections attached as Exhibit A, including objections that Penn State Health and Penn State Health St. Joseph are not entitled to assert rights under the RFPA.⁵

17. Further, none of the circumstances of Pennsylvania Rule of Civil Procedure 2329 that permit refusal of intervention apply here.

⁵ If permitted to intervene, Stiles also will file the proposed Motion for Protective Order attached as Exhibit B.

18. First, the Court in this case has not yet made any factual findings or legal determinations. Stiles's claims or defenses, therefore, are "in subordination to and in recognition of the propriety of the action." Pa.R.Civ.P. 2329(1); *see Commonwealth ex rel. Chidsey v. Keystone Mut. Cas. Co.*, 76 A.2d 867, 870-71 (Pa. 1950) (explaining that Rule 2329(1) means that an intervenor "must take the suit as he finds it" (quotation marks omitted) and may not challenge fact findings or court decisions prior to intervention).

19. Second, the PHRC in dismissing Stiles's PHRC complaint already agreed with Penn State Health and Penn State Health St. Joseph's position that they are entitled to assert rights under the RFPA. The PHRC, therefore, will not adequately represent Stiles's interests. The Pa.R.Civ.P. 2329(2).

20. Third, Stiles's Petition to Intervene is timely. The PHRC has not yet filed an answer or other response to Penn State Health and Penn State Health St. Joseph's Amended Complaint. Stiles, therefore, has not unduly delayed in seeking intervention, and intervention will not "unduly delay, embarrass or prejudice the trial or the adjudication of the rights of the parties." Pa.R.Civ.P. 2329(3).

For the foregoing reasons, EJ Stiles respectfully requests that this Court grant Stiles's Petition to Intervene, and enter the attached proposed Motion for Protective Order and Preliminary Objections on the docket.

Counsel for Petitioners Penn State Health and Penn State Health St. Joseph has indicated they oppose Stiles's intervention. Counsel for Respondent PHRC has indicated it will not oppose Stiles's intervention.

Date: January 26, 2026

Respectfully submitted,

/s/ Richard T. Ting

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Attorneys for Proposed Intervenor EJ Stiles

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

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| COMMISSION, | : | |
| | : | |
| | : | |
| Respondent. | : | |
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ORDER

AND NOW, this ____ day of _____, 2026, upon consideration of
EJ Stiles’s Petition to Intervene, it is ORDERED and DECREED that:

1. EJ Stiles’s Petition to Intervene is GRANTED.
2. Pursuant to Pennsylvania Rule of Civil Procedure 2330, Intervenor
Stiles shall have all the rights and liabilities of a party to the action.

BY THE COURT:

VERIFICATION

I, Richard Ting, counsel for proposed Intervenor EJ Stiles in this matter, hereby verify that the facts set forth in the foregoing Petition to Intervene are true and correct to the best of my information, knowledge, and belief. I understand that statements herein are made subject to the penalties of 18 Pa.C.S. § 4904 relating to unsworn falsification to authorities.

/s/ Richard T. Ting

Richard T. Ting

Counsel for proposed Intervenor EJ Stiles

CERTIFICATE OF COMPLIANCE

I certify that this filing complies with the provisions of the *Case Records Public Access Policy of the Unified Judicial System of Pennsylvania* that require filing confidential information and documents differently than non-confidential information and documents.

Date: January 26, 2026

/s/ Richard T. Ting

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Attorneys for Proposed Intervenor EJ Stiles

CERTIFICATE OF SERVICE

I hereby certify that I am this day serving the foregoing Petition to Intervene upon the persons and in the manner indicated below, which service satisfies the requirements of Pa. R.A.P. 121:

Service by electronic filing on the following:

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Date: January 26, 2026

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EXHIBIT

A

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

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| | : | |
| Respondent. | : | |

NOTICE TO PLEAD

Penn State Health and St. Joseph Regional Health Network d/b/a Penn State Health St. Joseph: You are hereby notified to file a written response to the enclosed Preliminary Objections within thirty (30) days from service hereof or a judgment may be entered against you.

/s/ Richard T. Ting

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PRELIMINARY OBJECTIONS

Introduction

Petitioners Penn State Health and St. Joseph Regional Health Network d/b/a Penn State Health St. Joseph through this action seek to short circuit the statutory Pennsylvania Human Relations Commission (“PHRC”) administrative process and limit anti-discrimination protections based on gender identity and sexual orientation.

This action stems from a PHRC complaint filed by Intervenor EJ Stiles against Penn State Health, Penn State Health St. Joseph, and The Pennsylvania State University (“Penn State University”) (collectively, “the Penn State entities”), alleging discrimination on the basis of sex in violation of the Pennsylvania Human Relations Act (“PHRA”),¹ for abruptly cancelling Stiles’s scheduled double mastectomy surgery for the stated reason that gender-affirming care is not permitted at Penn State Health St. Joseph Medical Center because such care violates Catholic doctrine. Stiles alleged, among other things, that Penn State University (a government entity that may not operate a religious institution) controls Penn State Health, which in turn controls Penn State Health St. Joseph. *See* Am. Compl. Ex. A.²

Rather than participate in the PHRC administrative process, Penn State Health St. Joseph initiated this action seeking, among other things, an injunction enjoining the PHRC from exercising jurisdiction over Stiles’s complaint, based on Penn State Health St. Joseph’s purported free exercise rights under the Pennsylvania Religious Freedom Protection Act (“RFPA”).³ The PHRC then dismissed Stiles’s PHRC complaint, summarily concluding that Penn State Health

¹ Act of Oct. 27, 1955, P.L. 744, *as amended*, 43 P.S. §§ 951-64.

² Stiles refers to the Amended Petition for Review in the Nature of a Complaint as the “Amended Complaint.”

³ Act of Dec. 9, 2002, P.L. 1701, *as amended*, 71 P.S. §§ 2401-08.

St. Joseph “has established that it is entitled to relief pursuant to the RFPA.” Am. Compl. Ex. D; *see also* Am. Compl. ¶ 47.

Penn State Health St. Joseph then, joined by Penn State Health, filed the Amended Complaint in this action. The Amended Complaint references two additional PHRC complaints filed against Penn State Health alleging discrimination on the basis of sex for Penn State Health’s termination of all gender affirming care for patients under age 19.⁴ Penn State Health and Penn State Health St. Joseph seek declarations that the PHRC regulations defining “sex” in the PHRA are unconstitutional under the non-delegation doctrine, that the PHRA and PHRC regulations do not compel Penn State Health St. Joseph to provide gender affirming care in violation of Penn State Health St. Joseph’s purported free exercise rights, and that federal Executive Order 14187 preempts the PHRA and PHRC regulations with respect to gender affirming healthcare for patients under age 19. Though the Amended Complaint is styled as asserting a single count for declaratory judgment, Stiles treats the single count as three separate claims based on (1) the non-delegation doctrine (“the non-delegation claim”), (2) the RFPA (“the RFPA claim”), and (3) federal preemption (“the preemption claim”).

⁴ Stiles is over age 19, so is not directly impacted by Penn State Health’s termination of all gender affirming care for patients under age 19 or Petitioners’ preemption claim.

Because Penn State Health and Penn State Health St. Joseph are not entitled to assert free exercise rights under the RFPA, and because Penn State Health and Penn State Health St. Joseph have failed to state a claim under the non-delegation doctrine, Intervenor Stiles respectfully requests that this Court dismiss Petitioners' claims.

Factual Background

A. The Pennsylvania Human Relations Commission's Regulations

1. To comprehensively combat sex discrimination, the Pennsylvania Human Relations Commission sought to provide a uniform definition for the term sex as used under the PHRA.

2. On March 23, 2022, the PHRC submitted a notice of proposed rulemaking, that was published on April 9, 2022, to the Independent Regulatory Review Commission and the Chairpersons of the Government Committee and the Senate Labor and Industry for review and comment.

3. Between March 2022 to March 2023, the PHRC, in coordination with the Independent Regulatory Review Commission Chairpersons of the Government Committee and the Senate Labor and Industry, used public comment and independent review to establish a well-rounded definition of sex to suit the needs of the PHRA.

4. The PHRC published its finalized rule which defined sex as used in the PHRA and the Pennsylvania Fair Educational Opportunities Act (“PFEOA”) to mean “gender, including a person’s gender identity or gender expression.” 16 Pa. Code § 41.206.

5. The PHRC further defined gender identity or expression as “[h]aving or being perceived as having a gender-related identity, appearance, expression or behavior, which may or may not be stereotypically associated with the person’s sex assigned at birth. Gender identity or expression may be demonstrated by consistent and uniform assertion of the gender identity or any other evidence that the gender identity is part of a person’s core identity.” 16 Pa. Code § 41.204.

6. The definition went into effect sixty days later.

Procedural Background

7. On January 22, 2025, Stiles filed a Complaint with the PHRC, against the Penn State entities, alleging that the Penn State entities discriminated against Stiles on the basis of sex by denying Stiles gender-affirming healthcare at Penn State Health St. Joseph Medical Center.

8. In response to Stiles’s PHRC complaint, Penn State Health St. Joseph initiated this action on August 29, 2025 by filing its initial Petition for Review in the Nature of a Complaint.

9. The PHRC then dismissed Stiles’s PHRC complaint pursuant to the RFPA, based solely on Penn State Health St. Joseph’s averments in its Petition for Review to this Court. *See* Am. Compl. Ex. D.

10. Penn State Health St. Joseph, joined by Penn State Health, then filed their Amended Complaint seeking declaratory relief in this Court.

I. First Preliminary Objection: This Court lacks subject matter jurisdiction (Pa.R.Civ.P. 1028(a)(1)).

11. Penn State Health St. Joseph initiated this action under this Court’s original jurisdiction pursuant to 42 Pa.C.S. § 761(a)(1).

12. “[T]he Commonwealth Court’s original jurisdiction of actions against the Commonwealth is limited to those not within its Section 763 [42 Pa.C.S. § 763] appellate jurisdiction over appeals from Commonwealth agencies, whether directly under Section 763(a)(1) or (2), indirectly under Section 762(a)(3) or (4) or otherwise within its appellate jurisdiction.” *Pa. Dep’t of Aging v. Lindberg*, 469 A.2d 1012, 1015-16 (Pa. 1983).

13. Thus, issues related to PHRC proceedings, which “will ultimately be subject to this court’s appellate review,” are not within this Court’s original jurisdiction. *Pittsburgh Bd. of Public Educ. v. Pa. Human Relations Comm’n*, 820 A.2d 838, 841 (Pa. Commw. Ct. 2003).

14. Because all of Penn State Health and Penn State Health St. Joseph's claims arise from pending PHRC proceedings, this Court lacks subject matter jurisdiction.

II. Second Preliminary Objection: The RFPA claim is legally insufficient because the PHRC has not burdened and is not likely to burden any free exercise rights Penn State Health or Penn State Health St. Joseph might have (Pa.R.Civ.P. 1028(a)(4)).

15. A person may assert an RFPA claim if their "free exercise of religion has been burdened or likely will be burdened in violation of section 4" of the RFPA. RFPA § 5(a) (71 P.S. § 2405(a)).

16. A person's free exercise of religion is burdened in violation of Section 4 of the RFPA by "agency action" that "[c]ompels conduct or expression which violates a specific tenet of a person's religious faith." RFPA § 3 (71 P.S. § 2403); *see also* RFPA § 4 (71 P.S. § 2404).

17. In response to Penn State Health St. Joseph initiating this action, the PHRC closed Stiles's PHRC case, finding that "Respondent has established that it is entitled to relief pursuant to the RFPA." Am. Compl. Ex. D; *see also* Am. Compl. ¶ 47.

18. Because the PHRC agrees with Penn State Health and Penn State Health St. Joseph's position regarding the RFPA, and dismissed Stiles's complaint

based on the RFPA, the PHRC has not burdened and is not likely to burden any free exercise rights Penn State Health or Penn State Health St. Joseph might have.

III. Third Preliminary Objection: The RFPA claim is legally insufficient because Penn State Health and Penn State Health St. Joseph have not pled sufficient facts to establish that either Penn State Health or Penn State Health St. Joseph is a “person” under the RFPA (Pa.R.Civ.P. 1028(a)(4)).

19. Under the RFPA, a “person” entitled to assert a claim is: “An individual or a church, association of churches or other religious order, body or institution which qualifies for exemption from taxation under section 501(c)(3) or (d) of the Internal Revenue Code of 1986 (Public Law 99-514, 26 U.S.C. § 501).” RFPA § 3 (71 P.S. § 2403).

20. Extension of free exercise rights to corporate entities “protects the religious liberty of the humans who own and control those companies.” *Burwell v. Hobby Lobby Stores, Inc.*, 573 U.S. 682, 707 (2014).

21. A corporation’s “beliefs” must derive from people, as determined by state corporate law and the corporation’s governing structure. *See id.* at 717-18.

22. Penn State Health and Penn State Health St. Joseph allege that Penn State Health St. Joseph “is recognized by” the Roman Catholic Diocese of Allentown as “a Catholic hospital,” Am. Compl. ¶ 6, but Penn State Health and Penn State Health St. Joseph do not allege that the Diocese has any control over

Penn State Health or Penn State Health St. Joseph, or any formal connection with Penn State Health or Penn State Health St. Joseph.

23. Penn State Health and Penn State Health St. Joseph do not allege any facts regarding their corporate structure or control.

24. Penn State Health and Penn State Health St. Joseph, therefore, have not alleged sufficient facts to demonstrate that either entity is an “[a]n individual or a church, association of churches or other religious order, body or institution” under the RFPA.

IV. Fourth Preliminary Objection: The RFPA claim is legally insufficient because Penn State Health and Penn State Health St. Joseph have not alleged that they provided notice to their patients of their policies regarding health care services (Pa.R.Civ.P. 1028(a)(4)).

25. Under the RFPA, a “religiously affiliated health care facility” may not be required “to provide, allow, participate in or refer for health care services which are contrary to the religious beliefs or practices of the facility, *provided that the facility shall provide notice to its patients of its policies regarding those health care services.*” RFPA § 7 (71 P.S. § 2407) (emphasis added).

26. Even if Penn State Health and/or Penn State Health St. Joseph qualifies as a “person” under the RFPA, Penn State Health and Penn State Health St. Joseph have not alleged that they provided the notice to its patients required by Section 7 of the RFPA.

V. Fifth Preliminary Objection: Penn State Health and Penn State Health St. Joseph failed to join necessary party The Pennsylvania State University (Pa.R.Civ.P. 1028(a)(5)).

27. “Necessary parties are those whose presence, while not indispensable, is essential if the Court is to completely resolve the controversy before it and render complete relief.” *York-Adams Cnty. Constables Ass’n v. Court of Common Pleas of York Cnty.*, 474 A.2d 79, 81 (Pa. Commw. Ct. 1984).

28. In addition to Penn State Health St. Joseph and Penn State Health, Penn State University was a respondent in Stiles’s underlying PHRC proceeding.

29. In the PHRC proceeding, Stiles alleged that Penn State University controls Penn State Health, which controls Penn State Health St. Joseph. Am. Compl. Ex. A at 4.

30. Because Penn State University is a government entity, allowing Penn State Health and/or Penn State Health St. Joseph to assert free exercise rights under the RFPA could result in potential liability for Penn State University for violation of the Establishment Clause of the First Amendment to the United States Constitution.

31. Penn State University, therefore, is a necessary party to this action.

VI. Sixth Preliminary Objection: The non-delegation claim is legally insufficient because there is no cognizable constitutional non-delegation claim against the PHRC. (Pa.R.Civ.P. 1028(a)(4)).

32. Penn State Health and Penn State Health St. Joseph fail to state a claim for violation of the non-delegation doctrine because under the Pennsylvania Constitution, the non-delegation doctrine is a restriction on the General Assembly's power, not an executive Agency's power. *See City of Lancaster v. Pa. Pub. Util. Comm'n*, 313 A.3d 1020, 1028 (Pa. 2024) ("The non-delegation doctrine, at its core, serves as a check on the General Assembly's delegative power.").

33. "Undoubtedly, to have an unconstitutional delegation of legislative authority, there must be a legislative delegation in the first instance." *Id.* at 1029.

34. Penn State Health and Penn State Health St. Joseph do not allege an unconstitutional legislative delegation by the General Assembly. To the contrary, Penn State Health and Penn State Health St. Joseph allege that "The Pennsylvania General Assembly has not delegated any authority to the PHRC" to issue the regulation at issue in this case. Am. Compl. ¶ 22.

35. Thus, Penn State Health and Penn State Health St. Joseph have failed to state a claim for violation of the non-delegation doctrine.

VII. Seventh Preliminary Objection: The “non-delegation” claim is legally insufficient to the extent it is a claim regarding lack of statutory authority (Pa.R.Civ.P. 1028(a)(4)).

36. To the extent Penn State Health and Penn State Health St. Joseph’s “non-delegation” claim is construed as a claim that the PHRC lacks statutory authority to issue the regulation at issue, Penn State Health and Penn State Health St. Joseph fail to state a claim because the PHRC issued a valid regulation within its statutory authority.

37. The General Assembly expressly granted the PHRC authority “to adopt, promulgate, amend, and rescind rules and regulations to effectuate the policies and provisions of” the PHRA. PHRA § 7(d), 43 P.S. § 957(d).

38. The PHRC regulation defining “sex” was issued within the scope of the PHRC’s statutory authority, according to proper procedure, and is consistent with the PHRA.

Date: January 26, 2026

/s/ Richard T. Ting

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Attorneys for Intervenor EJ Stiles

VERIFICATION

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/s/ Richard T. Ting
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Counsel for Intervenor EJ Stiles

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EXHIBIT B

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

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| NETWORK D/B/A PENN STATE | : | |
| HEALTH ST. JOSEPH, | : | |
| | : | NO. 335 M.D. 2025 |
| Petitioners | : | |
| | : | |
| v. | : | |
| | : | |
| COMMONWEALTH OF PENNSYLVANIA, | : | |
| PENNSYLVANIA HUMAN RELATIONS | : | |
| COMMISSION, | : | |
| | : | |
| Respondent. | : | |

**MOTION FOR LEAVE TO PROCEED UNDER PSEUDONYM AND FOR
PROTECTIVE ORDER**

Intervenor EJ Stiles respectfully moves this Court for leave to proceed using their first and middle initials, with full last name, pursuant to the Court’s inherent authority to manage proceedings and protect Stiles’s rights and in support states:

1. Intervenor EJ Stiles is a non-binary individual who seeks intervention in the above captioned matter, as it directly relates to their complaint filed with the

Pennsylvania Human Relations Commission (PHRC), captioned *EJ Stiles v. St. Joseph Regional Health Network d/b/a Penn State Health St. Joseph, et. al*, PHRC Case No. 202401365.

2. Stiles no longer uses their full legal name as it does not accurately reflect their gender identity.
3. Stiles presents themselves to the public as EJ Stiles, in which “E” and “J” are Stiles’s first and middle initials, respectively. “Stiles” is Stiles’s legal last name.
4. By using the name EJ Stiles, Stiles seeks to present themselves to the Court in the same manner they present themselves to the public. Stiles is not seeking anonymity and not seeking to shield themselves from the public.
5. Granting Stiles’s request to proceed under their preferred name EJ Stiles, therefore, would constitute a very limited closure of the record.
6. While there is a presumption of openness to judicial proceedings, there are some circumstances in which it is appropriate to allow a party to proceed under a pseudonym. *See Allegheny Reprod. Health Ctr. v. Pa. Dep’t of Human Servs.*, 249 A.3d 598, 614 (Pa. Commw. Ct. 2021) (acknowledging “a woman might bring suit under a pseudonym” to maintain the privacy of their medical decisions), *rev’d on other grounds*, 309 A.3d 808 (Pa. 2024).

7. Specifically, Pennsylvania Courts determine whether a party proceeding under a pseudonym is appropriate via a balancing test, where the party must demonstrate that their personal interest in privacy outweighs the traditional presumption of openness. *R.W. v. Hampe*, 626 A.2d 1218, 1220 n.3 (Pa. Super. Ct. 1993).
8. Additionally, the presumption of openness in legal proceedings does not require the unnecessary publication of a party's full legal name, particularly where that information leaves the party vulnerable to harassment. *Katz v. Katz*, 514 A.2d 1374, 1377 (Pa. Super. Ct. 1986) ("Every court has supervisory powers over civil proceedings in progress before it and may deny access where such access may become a vehicle for harmful or improper purposes").
9. LGBTQ+ individuals are subjected to intensified discrimination and harassment, compared to non-LGBTQ+ individuals. See Ilan H. Meyer & Andrew R. Flores, *Anti-LGBT Victimization in the United States*, Univ. of California Williams Inst. (Feb. 2025), <https://williamsinstitute.law.ucla.edu/wp-content/uploads/Anti-LGBT-Violence-Feb-2025.pdf> (finding that LGBTQ+ people are nine times more likely to experience violent hate crimes than non-LGBTQ+ individuals).¹

¹ Article attached as Attachment 1.

10. Thus, engaging in anti-discrimination litigation as it relates to gender expression already exposes Stiles to heightened stigmatization, harassment, and discrimination.
11. Public disclosure of Stiles's full legal name would erode their dignity and gender identity, leaving them more vulnerable to harassment than before.
12. Further, mandating gender non-confirming individuals to utilize their legal name as opposed to their public-facing preferred name, particularly in a case alleging discrimination on the basis of gender identity, creates a substantial risk of chilling gender non-confirming individuals from exercising their legal rights by deterring meaningful access to the courts.
13. Further, Petitioners St. Joseph Regional Health Network d/b/a Penn State Health St. Joseph and Penn State Health, and Respondent Pennsylvania Human Relations Commission are not prejudiced by this relief. All parties are aware of Stiles's identity, and protecting Stiles from disclosure of their full legal name does not impair any party's ability to present claims or defenses or otherwise litigate this matter.
14. Stiles's full legal name has no bearing to the substance of the litigation before the Court. Because the information is irrelevant to the merits of the claims and defenses, excluding it from public record imposes no burden on any party.

15. Stiles's personal interest in privacy, therefore, outweighs the presumption of openness in court proceedings.

WHEREFORE, Intervenor EJ Stiles respectfully requests that this Court enter an Order permitting Stiles to proceed under the name EJ Stiles, directing that all public filings and docket entries refer to Stiles by that name, and granting such further relief as this Court deems just and proper.

Date: January 26, 2026

Respectfully submitted,

/s/ Richard T. Ting

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Attorneys for Proposed Intervenor EJ Stiles

IN THE COMMONWEALTH COURT OF PENNSYLVANIA

| | | |
|-------------------------------|---|-------------------|
| PENN STATE HEALTH and ST. | : | |
| JOSEPH REGIONAL HEALTH | : | |
| NETWORK D/B/A PENN STATE | : | |
| HEALTH ST. JOSEPH, | : | |
| | : | NO. 335 M.D. 2025 |
| Petitioners | : | |
| | : | |
| v. | : | |
| | : | |
| COMMONWEALTH OF PENNSYLVANIA, | : | |
| PENNSYLVANIA HUMAN RELATIONS | : | |
| COMMISSION, | : | |
| | : | |
| Respondent. | : | |

ORDER

AND NOW, this ____ day of ____, 2026, upon motion of counsel for the Intervenor, it is ORDERED and DECREED that:

1. Intervenor is granted leave to proceed under their preferred name, EJ Stiles.
2. All public filings and docket entries shall refer to Intervenor only by their preferred name EJ Stiles.

BY THE COURT:

ATTACHMENT

1



ANTI-LGBT VICTIMIZATION IN THE UNITED STATES

Results from the National Crime Victimization Survey (2022-2023)

BRIEF / FEBRUARY 2025

Ilan H. Meyer, Andrew R. Flores

In his first weeks in office, and consistent with his campaign language, President Trump issued executive orders that target or severely impact LGBT people.¹ The orders include declaring that the U.S. federal government will officially recognize only two sexes based on sex at birth, male and female;² ending diversity, equity, and inclusion (DEI) programs across federal agencies, which had previously adopted programs to support LGBT people and other minority groups;³ and rolling back anti-discrimination legal protections for LGBT people.⁴

President Trump, members of Congress, and state legislators have been clear throughout their 2024 campaigns and since the election that they plan to attack LGBT rights, both in state and federal policies and laws.⁵ Indeed, over

¹ Redfield, E. (2025, January). *Impact of ban on gender-affirming care on transgender minors*. Williams Institute, UCLA School of Law. Los Angeles. <https://williamsinstitute.law.ucla.edu/publications/impact-gac-ban-eo/>; Redfield, J., & Chokshi, M. (2025, January). *Impact of the executive order redefining sex on transgender, nonbinary, and intersex people*. Williams Institute, UCLA School of Law. Los Angeles. <https://williamsinstitute.law.ucla.edu/publications/impact-eo-redefine-sex-tbi/>; Sears, B. (2025, January). *Impact of executive order revoking non-discrimination protections for LGBTQ federal employees and employees of federal contractors*. Williams Institute, UCLA School of Law. Los Angeles. <https://williamsinstitute.law.ucla.edu/publications/impact-eo-nd-federal-workers/>

² Arkin, D., Alcindor, Y., & Laviertes, M. (2025, January 22). Trump signs executive orders proclaiming there are only two biological sexes, halting diversity programs. *NBC News*. <https://www.nbcnews.com/nbc-out/out-politics-and-policy/trump-sign-executive-orders-proclaiming-are-only-two-biological-sexes-rcna188388?t=>; Redfield, E., & Chokshi, I. (2025, January). *Impact of the Executive Order Redefining Sex on Transgender, Nonbinary, and Intersex People* [Policy brief]. The Williams Institute, UCLA School of Law. <https://williamsinstitute.law.ucla.edu/publications/impact-eo-redefine-sex-tbi/>

³ Flowers, B., & Trotta, D. (2025, January 20). Trump curtails protections around diversity, LGBTQ rights. *Reuters*. <https://www.reuters.com/world/us/trump-sign-orders-ending-diversity-programs-proclaiming-there-are-only-two-sexes-2025-01-20/?t>

⁴ Green, E. L., & Montague, Z. (2025, January 20). Trump signs two orders to dismantle equity policies. *The New York Times*. <https://www.nytimes.com/2025/01/20/us/politics/trump-transgender-race-education.html>; Sears, B. (2025, January). *Impact of Executive Order Revoking Non-Discrimination Protections for LGBTQ Federal Employees and Employees of Federal Contractors* [Policy brief]. The Williams Institute, UCLA School of Law. <https://williamsinstitute.law.ucla.edu/publications/impact-eo-nd-federal-workers/>

⁵ Thompson, I., Esseks, J., & Cooper, L. (2024, June 12). *Erasing LGBTQ freedoms by rolling back protections, mandating discrimination, and weaponizing federal law against transgender people*. ACLU. <https://www.aclu.org/trump-on-lgbtq-rights>

the past decade, states across the country have initiated legislative proposals and have passed several statutes that limit the rights of LGBT people, with especially severe attacks on transgender rights. In 2023, the ACLU tracked 510 anti-LGBT bills, and in 2024, it tracked 533 anti-LGBT bills that were introduced in state legislatures across the United States,⁶ representing an increase over previous years.⁷ This year, by February 10, 2025, the ACLU had already tracked 339 anti-LGBT bills across the U.S.⁸

Similar efforts have been made in the U.S. Congress. In 2024, Congress killed legislation that earmarked funds for LGBT organizations, including, for example, funds to build 74 new housing units for LGBT seniors in Massachusetts and to construct a new community center for the Gay Community Center of Philadelphia.⁹ In December 2024, the U.S. Senate passed the defense budget by an 85 to 14 vote, a bill that included a ban on TRICARE, the military's health care plan for service members, from covering medical treatment of gender dysphoria that the bill alleged "could result in sterilization" for children under 18.¹⁰ In January 2025, the House of Representatives passed a bill that would prohibit federal funding from going to K-12 schools that allow transgender girls on girls' sports teams, effectively barring transgender girls from female school sports teams.¹¹

These recent developments continue years of attacks on LGB, and especially transgender people. Such acts can lead to increased violence against LGBT people. For example, researchers found that following Trump campaign rallies in 2016, which the authors described as containing hate rhetoric, there was an increase in hate-motivated incidents in the counties where the rallies happened as compared to other counties and the same counties prior to the rally.¹² Similarly, after the 2016 presidential elections, transgender and gender non-conforming people reported experiences of hate speech and violence.¹³ Following online attacks on transgender care, hospitals and doctors faced increased harassment, including death threats.¹⁴ This rhetoric and the anti-LGBT sentiments it promotes can lead to adverse mental health outcomes for LGBT people.¹⁵

⁶ American Civil Liberties Union. (2023, December 21). *Mapping attacks on LGBTQ rights in U.S. state legislatures in 2023*. <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2023>; American Civil Liberties Union. (2024, December 6). *Mapping attacks on LGBTQ rights in U.S. state legislatures in 2024*. <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2024>

⁷ Choi, A. (2024, January 22). Record number of anti-LGBTQ bills were introduced in 2023. *CNN*. <https://www.cnn.com/politics/anti-lgbtq-plus-state-bill-rights-dg>

⁸ American Civil Liberties Union. (2025, February 2025). *Mapping attacks on LGBTQ rights in U.S. state legislatures in 2025*. ACLU. <https://www.aclu.org/legislative-attacks-on-lgbtq-rights-2025>

⁹ Edmondson, C. (2024, May 14). House G.O.P. defunds L.G.B.T.Q. centers by banning earmarks for nonprofits. *The New York Times*. <https://www.nytimes.com/2024/05/14/us/politics/gop-earmarks-lgbtq-centers.html>

¹⁰ Demirjian, K. (2024, December 18). Senate clears defense bill denying transgender care to minors. *The New York Times*. <https://www.nytimes.com/2024/12/18/us/politics/senate-defense-bill-transgender-care-minors.html>

¹¹ Karni, A. (2025, January 14). House passes bill to bar trans athletes from female school sports teams. *The New York Times*. <https://www.nytimes.com/2025/01/14/us/politics/house-trans-athletes.html>

¹² Feinberg, A., Branton, R., & Martinez-Ebers, V. (2022). The Trump effect: How 2016 campaign rallies explain spikes in hate. *PS: Political Science & Politics*, 55(2), 257–265. <https://doi.org/10.1017/S1049096521001621>

¹³ Veldhuis, C. B., Drabble, L., Riggall, E. D. B., Wootton, A. R., & Hughes, T. L. (2018). "I fear for my safety, but want to show bravery for others": Violence and discrimination concerns among transgender and gender non-conforming individuals after the 2016 presidential election. *Violence and Gender*, 5(1), 26–36. <https://doi.org/10.1089/vio.2017.0072>; cited in: Flores, A. R., Stotzer, R. L., Meyer, I. H., & Langton, L. L. (2022). Hate crimes against LGBT people: National Crime Victimization Survey, 2017–2019. *PloS one*, 17(12), e0279363. <https://doi.org/10.1371/journal.pone.0279363>

¹⁴ Human Rights Campaign. (2022). *Online harassment, offline violence: Unchecked harassment of gender-affirming care providers and children's hospitals on social media, and its offline violent consequences*. <https://hrc-prod-requests.s3-us-west-2.amazonaws.com/HRCF-OnlineHarassmentOfflineViolence.pdf>

¹⁵ Krueger, E. A., Westmoreland, D. A., Choi, S. K., Harper, G. W., Lightfoot, M., Hammack, P. L., & Meyer, I. H. (2021). Mental health among Black

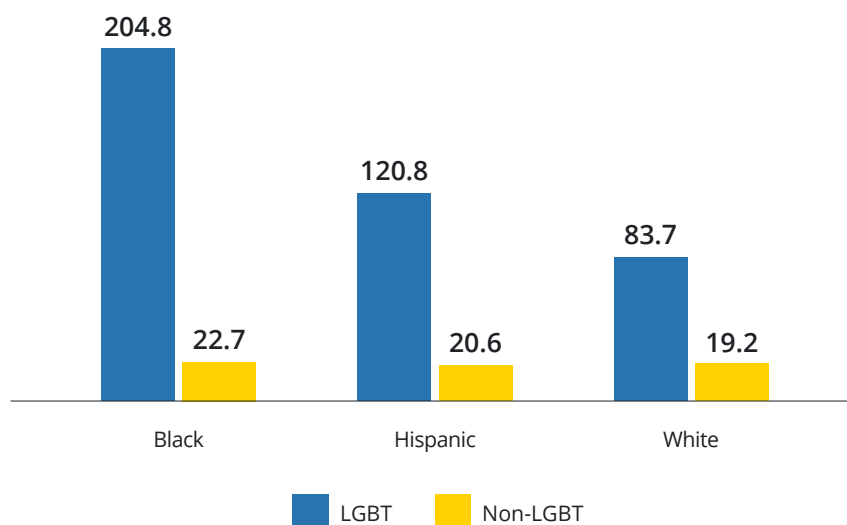
VIOLENT VICTIMIZATION OF LGBT PEOPLE IN THE UNITED STATES 2022-2023

In this report, we present our analysis of pooled National Crime Victimization Survey (NCVS) data from 2022 and 2023 (N = 540,732). NCVS is a survey that documents experiences with victimization in a representative sample of the United States population.¹⁶

We found that LGBT people experienced 106.4 violent victimizations¹⁷ per 1,000 persons, and transgender people experienced victimization at a rate of 93.7 per 1,000, compared with 21.1 per 1,000 among non-LGBT persons.¹⁸

LGBT rates of victimization by race/ethnicity show that Black (non-Hispanic) LGBT people had the highest rates of victimization overall, followed by Hispanic and White (non-Hispanic) LGBT people. Rates for cisgender straight populations were similar across these race/ethnicity groups (Figure 1).¹⁹

Figure 1. Disparities in violent victimization by sexual and gender minority (LGBT) status and race/ethnicity (rates per 1,000)



and Latinx sexual minority adults leading up to and following the 2016 US presidential election: Results from a natural experiment. *LGBT Health*, 8(7), 454-462 <https://doi.org/10.1089/lgbt.2020.0454>; Frost, D. M., & Fingerhut, A. W. (2016). Daily exposure to negative campaign messages decreases same-sex couples' psychological and relational well-being. *Group Processes & Intergroup Relations*, 19(4), 477-492. <https://doi.org/10.1177/1368430216642028>; Gonzalez, K. A., Ramirez, J. L., & Galupo, M. P. (2018). Increase in GLBTQ Minority Stress Following the 2016 US Presidential Election. *Journal of GLBT Family Studies*, 14(1-2), 130-151. <https://doi.org/10.1080/1550428X.2017.1420849>; Garrison, S. M., Doane, M. J., & Elliott, M. (2018). Gay and lesbian experiences of discrimination, health, and well-being: Surrounding the presidential election. *Social Psychological and Personality Science*, 9(2), 131-142. <https://doi.org/10.1177/1948550617732391>

¹⁶ Bureau of Justice Statistics. (n.d.). *National Crime Victimization Survey (NCVS)*. U.S. Department of Justice. <https://bjs.ojp.gov/programs/ncvs>

¹⁷ A violent victimization is an attack or threat of attack including simple assaults and acts of serious violence (e.g., rape or sexual assault, robbery, aggravated assault, or violence involving a weapon). Estimates represent respondents who reported on at least one incident within the past 6 months.

¹⁸ 95% confidence intervals (CI) for these estimates are: LGBT people (85.0, 127.8), transgender people (54.3, 133.1), and non-LGBT (cisgender straight) people (19.6, 22.7). The difference between sexual and gender minorities and the cisgender/straight populations are statistically significant; the odds ratio (95% CI) for LGBT vs. non-LGBT = 5.5 (4.3, 6.8), and for transgender vs. non-LGBT = 4.8 (2.5, 7.1).

¹⁹ 95% confidence intervals (CI) for these estimates are: Black LGBT people (102.3, 307.3), Hispanic LGBT people (73.9, 167.7), White LGBT people (62.3, 105.1), Black non-LGBT (cisgender straight) people (18.2, 27.2), Hispanic non-LGBT people (17.5, 23.7), White non-LGBT people (19.9, 23.5).

LGBT people experienced a higher rate of serious violence, defined as rape or sexual assault, robbery, or aggravated assault, than non-LGBT people (53.7 vs. 8.5 per 1,000),²⁰ including higher rates of violence involving a weapon (27.4 vs. 5.7 per 1,000)²¹ and serious violence resulting in injuries (21.3 vs. 2.4 per 1,000).²² LGBT people were also more likely to experience violent hate crimes (6.4 vs. 0.7 per 1,000).^{23, 24}

CONCLUSION

Consistent with prior findings, our results show that compared with non-LGBT people, LGBT people have been subject to disparities in exposure to violence, including hate crimes.²⁵ LGBT victims of violence are also more likely than non-LGBT people to experience attacks that are more violent and to suffer injuries because of these attacks. The curtailment and elimination of civil rights protections for LGBT people in the United States puts them at risk for increased victimization and hate crimes.

METHODOLOGY

The NCVS uses a stratified, multi-stage cluster sample of households in the United States that surveys individuals aged 12 years and older.²⁶ The purpose of the NCVS is to document the prevalence and characteristics of violent and property crimes in the U.S., regardless of whether such experiences were reported to the police. Data collection for the NCVS is performed on a continuous basis, with households probabilistically selected, recruited, and empaneled for 3.5 years and interviewed at six-month intervals. The U.S. Census Bureau field representatives conduct the NCVS interviews either in person or over the telephone. Usually, the first survey is conducted in person, while the follow-up surveys are conducted via telephone.

The NCVS documents sexual orientation and gender identity among individuals aged 16 years and older.²⁷ Sexual orientation was measured with the following question, “Which of the following best represents how you think of

²⁰ 95% confidence intervals for LGBT people (39.5, 67.9) and non-LGBT people (7.6, 9.5); odds ratio: 6.6 (4.5, 8.7).

²¹ 95% confidence interval for LGBT people (17.4, 37.4) and non-LGBT people (5.0, 6.5); odds ratio: 4.9 (2.8, 6.9).

²² 95% confidence interval for LGBT people (13.0, 29.6) and non-LGBT people (1.9, 2.8); odds ratio: 9.1 (5.1, 13.2).

²³ A hate crime follows the definition from the Bureau of Justice Statistics. Victims who suspect the incident may have been a hate crime are asked why they thought the incident was a hate crime. If victims say their attackers used hate language or symbols or if the police confirmed to the victim that the incident was a hate crime, then it is classified as a hate crime. Bureau of Justice Statistics. (n.d.). *Hate crime in the National Crime Victimization Survey (NCVS)*. <https://bjs.ojp.gov/topics/crime/hate-crime#:~:text=The%20National%20Crime%20Victimization%20Survey,hate%20crime%20in%20the%20NCVS>. Accessed February 10, 2025.

²⁴ 95% confidence interval for LGBT people (3.1, 9.7) and non-LGBT people (0.5, 0.9); odds ratio: 9.8 (4.1, 15.5).

²⁵ Truman, J. L., Morgan, R. E., & Coen, E. J. (2024). Characteristics and consequences of violent victimization in sexual and gender minority communities: An analysis of the 2017-2021 National Crime Victimization Survey. *LGBT Health*, 11(7), 552–562. <https://doi.org/10.1089/lgbt.2023.0110>; Flores, A. R., Wilson, B. D. M., Langton, L. L., & Meyer, I. H. (2023). Violent victimization at the intersections of sexual orientation, gender identity, and race: National Crime Victimization Survey, 2017-2019. *PloS one*, 18(2), e0281641, <https://doi.org/10.1371/journal.pone.0281641>; Flores, A. R., Stotzer, R. L., Meyer, I. H., & Langton, L. L. (2022). Hate crimes against LGBT people: National Crime Victimization Survey, 2017-2019. *PloS one*, 17(12), e0279363. <https://doi.org/10.1371/journal.pone.0279363>; Truman, J. L., & Morgan, R. E. (2022, June). *Violent victimization by sexual orientation and gender identity, 2017–2020* (NCJ 304277). Bureau of Justice Statistics. <https://bjs.ojp.gov/content/pub/pdf/vvsogi1720.pdf>

²⁶ Bureau of Justice Statistics (2022-2023). *National Crime Victimization Survey* [Data set]. <https://bjs.ojp.gov/data-collection/ncvs>

²⁷ Bureau of Justice Statistics. (2022). *National Crime Victimization Survey* [Questionnaires]. <https://bjs.ojp.gov/data-collection/ncvs#surveys-0>; Truman J.L., Morgan R.E., Gilbert T., & Vaghela, P. (2019). Measuring sexual orientation and gender identity in the National Crime Victimization Survey. *Journal of Official Statistics*, 35(4):835–858. <https://doi.org/10.2478/jos-2019-0035>

yourself?” with response options: “Lesbian or gay, Straight, that is, not lesbian or gay, Bisexual, Something else,” or “I don’t know the answer.” To measure gender identity, respondents were asked about their sex assigned at birth and their current gender identity. Respondents who indicated they were lesbian, gay, or bisexual, had a current gender identity that differed from their assigned sex at birth, or indicated their current gender identity was “transgender” were categorized as LGBT.²⁸ All others were considered as non-LGBT.

The NCVS asks respondents if they are of Hispanic origin and which race(s) they identify with. Response options include “White, Black/African American, American Indian/Alaska Native, Asian/Native Hawaiian/other Pacific Islander,” and “other race.”²⁹ For this analysis, respondents who indicated they were of Hispanic origin were categorized as Hispanic, regardless of race group chosen; respondents who identified as Black/African American were categorized as Black regardless of other race groups chosen (with the exception of Hispanic origin); respondents who chose White and no other race/ethnicity were categorized as White.

All analyses incorporated appropriate weight and design variables for population estimates.

²⁸ Respondents could refuse to answer their sex assigned at birth but also indicate their current gender is “transgender.” These respondents are included in our categorization of LGBT.

²⁹ Bureau of Justice Statistics. (2021). *Race and ethnicity in the National Crime Victimization Survey (NCVS)*. U.S. Department of Justice. <https://bjs.ojp.gov/topics/race-ethnicity#:~:text=The%20National%20Crime%20Victimization%20Survey,changed%20in%20the%202003%20NCVS>