

CAUSE NO. 493-07676-2024

THE STATE OF TEXAS,
Plaintiff,

v.

MAY C. LAU, M.D.,
Defendant.

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IN THE DISTRICT COURT OF

COLLIN COUNTY, TEXAS

493rd JUDICIAL DISTRICT

**PLAINTIFF’S THIRD AMENDED PETITION AND
REQUEST FOR INJUNCTIVE RELIEF**

1. The debate in Texas on the legality of dangerous and experimental medical procedures seeking to transition or affirm a child’s belief that their gender identity is inconsistent with their biological sex is over.

2. Texas law prohibits surgeries, puberty blockers, and cross-sex hormones for the purposes of transitioning a child’s biological sex or affirming a child’s belief that their gender identity is inconsistent with their biological sex. Tex. Health & Safety Code § 161.702.

3. The Supreme Court of Texas held that the law was constitutional. *State v. Loe*, 692 S.W.3d 215 (Tex. 2024).

4. Texas will not sit idly by while scofflaws harm children in the State of Texas. Texas will continue to protect children through enforcement of state law against those who have violated the law by providing, prescribing, administering, or dispensing cross-sex hormones to minors for the purposes of transitioning their biological sex or affirming the child’s belief that their gender identity is inconsistent with their biological sex.

5. Plaintiff, STATE OF TEXAS, by and through the Attorney General of Texas, KEN PAXTON, complains of Defendant, MAY C. LAU, M.D. (“Lau”) and will show Lau has

engaged in deceptive trade practices, including by misleading pharmacies, insurance providers, and/or patients by falsifying medical records, prescriptions, and billing records to represent that her testosterone prescriptions are for something other than transitioning a child's biological sex or affirming a child's belief that their gender identity is inconsistent with their biological sex. The State will further show that Lau has fraudulently billed Texas Medicaid for transgender interventions on children and young adults contrary to Texas law and regulations.

6. Lau is a scofflaw who is putting the health and safety of minors at risk by prescribing testosterone, a controlled substance, to biological female minors and estrogen to a biological male minor for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex in violation of Tex. Health & Safety Code § 161.702(3). *See* Tex. Occ. Code § 164.052(a)(24) (each violation separately violates the Texas Medical Practice Act); *see also* Tex. Occ. Code § 164.0552 (each violation serves as an independent ground for revocation of Lau's medical license).

7. Lau is also violating Tex. Bus. & Com. Code §§ 17.46(a), (b)(5), (24), by engaging in false, misleading, and deceptive acts and practices to mislead pharmacies, insurance providers, and/or patients by falsifying medical records, prescriptions, and billing records to represent that her testosterone prescriptions are for something other than transitioning a child's biological sex or affirming a child's belief that their gender identity is inconsistent with their biological sex.

8. Lau has knowingly committed unlawful acts under the Texas Health Care Program Fraud Prevention Act, Tex. Hum. Res. Code § 36.001, *et seq.* (THFPA), which resulted in Texas Medicaid paying claims for transgender interventions that violate State law and are specifically barred by Texas Medicaid regulations. Tex. Hum. Res. Code § 36.002(1), (2) & (4)(B).

9. Lau must be held accountable for her use, on at least 22 minor patients, of these illegal, dangerous, and experimental medical procedures for the purposes of transitioning their biological sex or affirming their belief that their gender identities are inconsistent with their biological sex.

I. PARTIES

10. Defendant is MAY C. LAU, M.D. (NPI# 1750351375), an employee of the University of Texas Southwestern Medical Center (“UT Southwestern”) in Dallas, Texas. She holds hospital privileges at Children’s Medical Center Dallas and Children’s Medical Center Plano (Children’s).

II. DISCOVERY CONTROL PLAN

11. Discovery in this case should be conducted under Level 3 pursuant to Tex. R. Civ. P. 190.4. This case is not subject to the restrictions of expedited discovery under Tex. R. Civ. P. 169 because Texas seeks nonmonetary injunctive relief.

12. Additionally, Texas claims entitlement to monetary relief in an amount greater than **\$1,000,000**, including civil penalties, reasonable attorney’s fees, litigation expenses, restitution, and costs.

III. JURISDICTION AND VENUE

13. Texas Occ. Code § 161.706(b) provides that venue is proper in “the county where the violation occurred or is about to occur.”

14. Venue of this suit lies in Collin County, Texas pursuant to Texas Bus. & Com. Code § 17.47(b), because transactions forming the basis of this suit occurred in Collin County, Texas and Lau’s unlawful conduct occurred in Collin County, Texas.

15. Venue also lies in Collin County, Texas pursuant to Tex. Hum. Res. Code § 36.052(d), which provides that venue is proper under the THFPA “in a county in which any part of the unlawful act occurred.”

IV. PUBLIC INTEREST

16. Lau violated Tex. Health & Safety Code § 161.702, Tex. Bus. & Com. Code § 17.46(a) and is engaged in unlawful practices, as set forth in this petition.

17. Texas has reason to believe that Lau is engaging in, has engaged in or is about to engage in, the unlawful acts or practices set forth below. Texas has further reason to believe Lau has caused injury, loss, and damage to Texas by endangering the health of its citizens. Therefore, the Consumer Protection Division of the Office of the Attorney General of the State of Texas is of the opinion that these proceedings are in the public interest.

V. TRADE AND COMMERCE

18. At all times described below, Lau engaged in conduct, the purported practice of medicine, which constitutes “trade” and “commerce” as defined in Tex. Bus. & Com. Code § 17.45(6).

VI. NO NOTICE BEFORE SUIT

19. The Consumer Protection Division has reason to believe that Lau “is engaging in, has engaged in, or is about to engage in any act or practice declared to be unlawful ... and that proceedings would be in the public interest....” Tex. Bus. & Com. Code § 17.47(a).

20. The Consumer Protection Division did not contact Lau before filing suit to notify her “in general of the alleged unlawful conduct” because it is the opinion of the Consumer

Protection Division that Lau likely “would destroy” or alter “relevant records if prior contact were made.” *Id.*

VII. APPLICABLE LAW

21. Texas Bus. & Com. Code § 17.46(a) prohibits “false, misleading, or deceptive acts or practices in the conduct of any trade or commerce.”

22. Texas Bus. & Com. Code § 17.47 authorizes the Consumer Protection Division to bring an action for temporary and permanent injunction whenever it has reason to believe that any person is engaged in, in has engaged in, or is about to engage in any act or practice declared unlawful under Chapter 17 of the Business and Commerce Code.

23. Under the THFPA, a person commits an unlawful act if the person:

- a. “knowingly makes or causes to be made a false statement or misrepresentation of a material fact to permit a person to receive a benefit or payment under a health care program that is not authorized or that is greater than the benefit or payment that is authorized.” Tex. Hum. Res. Code at § 36.002(1).
- b. “knowingly conceals or fails to disclose information that permits a person to receive a benefit or payment under a health care program that is not authorized or that is greater than the benefit or payment that is authorized.” *Id.* at § 36.002(2).
- c. “knowingly makes, causes to be made, induces, or seeks to induce the making of a false statement or misrepresentation of material fact concerning: . . . information required to be provided by a federal or state law, rule, regulation,

or provider agreement pertaining to a health care program.” *Id.* at § 36.002(4)(B).

24. Tex. Hum. Res. Code § 36.051(b) provides “[i]f the attorney general has reason to believe that a person is committing, has committed, or is about to commit an unlawful act, the attorney general may institute an action for an appropriate order to restrain the person from committing or continuing to commit the act.”

25. Penalties assessed for violations of the THFPA include the amount of any monetary benefit provided under a health care program resulting from an unlawful act, liability for double the utilization, prejudgment interest, and civil monetary penalties per violation. *Id.* at §36.052(a).

VIII. FACTUAL BACKGROUND

A. *Texas Prohibits the Provision of Puberty Blockers and Cross-Sex Hormones to Minors for Gender-Transition Purposes.*

26. On May 17, 2023, the Legislature added Subchapter X to the Health and Safety Code, entitled “Gender Transitioning and Gender Reassignment Procedures and Treatments for Certain Children (SB 14).” Act of May 17, 2023, 88th Leg., R.S., ch. 335; *Loe*, 692 S.W.3d at 223.

27. SB 14 prohibits physician and health care providers from performing certain procedures or treatments when performed to (1) “transition[] a child’s biological sex as determined by the sex organs, chromosomes, and endogenous profiles of the child”; or (2) “affirm[] the child’s perception of the child’s sex if that perception is inconsistent with the child’s biological sex.” Tex. Health & Safety Code § 161.702.

28. The effective date for SB 14 was September 1, 2023.

29. SB 14 added Tex. Health & Safety Code § 161.702(3), which prohibits physicians from knowingly prescribing the following to transition a child’s biological sex or affirm a child’s

perception of their sex if it is different from their biological sex: “(A) puberty suppression or blocking prescription drugs to stop or delay normal puberty; (B) supraphysiologic doses of testosterone to females; or (C) supraphysiologic doses of estrogen to males.”

30. Physicians were permitted to prescribe to patients already subject to a continuing course of treatment that began prior to June 1, 2023, and who attended at least 12 mental health counseling or psychotherapy sessions over a period of at least six months prior to starting treatment, provided that the prescriptions were for the purpose of “wean[ing] off the prescription drug over a period of time and in a manner that is safe and medically appropriate and that minimizes the risk of complications.” Tex. Health & Safety Code § 161.703(b)-(c).

31. SB 14 also added Tex. Occ. Code § 164.052(a)(24), which proscribed physicians from “perform[ing] a gender transitioning or gender reassignment procedure or treatment in violation of [Tex. Health & Safety Code § 161.702].”

32. SB 14 added Tex. Occ. Code § 164.0552, which commands that the Texas Medical Board “*shall revoke* the license or other authorization to practice medicine of a physician who violates [Tex. Health & Safety Code § 161.702].” (emphasis added).

33. SB 14 further mandates that “[p]ublic money may not directly or indirectly be used, granted, paid, or distributed,” to any health care provider, medical school, hospital, or any other entity that “provides or facilitates the provision of a procedure or treatment.” Tex. Health & Safety Code § 161.704. Accordingly, SB 14 prohibits Texas health care programs, including Texas Medicaid and CHIP, from providing reimbursement to physicians and health care providers for procedures or treatments that violate SB-14. *Id.*

B. *The Texas Supreme Court Held That SB 14 is Constitutional.*

34. Before SB 14 took effect several minors, parents of minors, and physicians brought suit in Travis County, TX, alleging a variety of constitutional challenges to the law. *Loe*, 692 S.W.3d at 222.

35. On August 25, 2023, a Travis County District Court entered a temporary injunction enjoining enforcement of SB 14. *Id.*

36. Texas appealed directly to the Texas Supreme Court, thereby dissolving the temporary injunction. *Id.*

37. On September 1, 2023, the Texas Supreme Court allowed SB 14 to take effect during the pendency of the appeal. *Id.*

38. On June 28, 2024, the Supreme Court of Texas reversed and vacated the trial court's Temporary Injunction Order after rejecting each of the plaintiffs' constitutional challenges to SB 14. *Id.* at 239.

C. *Lau is a Radical Gender Activist.*

39. Lau "specializes in adolescent female and male sexual and reproductive health, including ... gender dysphoria" *Biography of May Lau, M.D.*, UT Southwestern (accessed October 8, 2024), <https://tinyurl.com/259556bc>.

40. Lau serves as "Medical Director of the Adolescent and Young Adult clinic at Children's Medical Center Dallas." *Id.*

41. Lau has published extensively advocating for the medical transition of children's biological sex, contributing to the following:

- i. Tri Pham, *et al.*, *Transition from Pediatric to Adult Care for Transgender Youth: A Qualitative Study of Patient, Parent, and Provider Perspectives*, LGBT Health (May-Jun 2021), <https://tinyurl.com/5n8jbc6n>.

- ii. Bethany G. Hart, *et al.*, *Developing a Curriculum on Transgender Health Care for Physician Assistant Students*, *Journal of Physician Assistant Education* (Mar. 2021), <https://tinyurl.com/mvbh8e>.
- iii. Lauren R. Shaffer, *et al.*, *Gender-affirming hormone therapy in cystic fibrosis – A case of new Pseudomonas infection*, *Respiratory Medicine Case Reports* (2021), <https://tinyurl.com/mv4jp85>.
- iv. Laura E. Kuper, *et al.*, *Body Dissatisfaction and Mental Health Outcomes of Youth on Gender-Affirming Hormone Therapy*, *Pediatrics* (2020), <https://tinyurl.com/5n8s75v8>.
- v. Laura E. Kuper, *et al.*, *Baseline Mental Health and Psychosocial Functioning of Transgender Adolescents Seeking Gender-Affirming Hormone Therapy*, *Journal of Developmental and Behavioral Pediatrics* (Oct/Nov 2019), <https://tinyurl.com/4wxxzes5>.

42. Approximately 20% of the publications listed in Lau’s biography relate to gender transitioning. *Biography of May Lau, M.D.*, <https://tinyurl.com/259556bc>.

43. On January 8, 2020, Lau and her physician’s assistant, Patti Pagels MPAS, PA-C, gave a presentation entitled *Transgender Care of Adolescents and Adults*, Youtube (Jan. 8, 2020), <https://tinyurl.com/mkt4pzs3> wherein they asserted:

- i. That Lau alters her patient’s medical records to reflect their preferred name, sex, and pronouns, which can change on a visit-to-visit basis, something that is apparently “fairly typical [and] kind of persists into adulthood” for her patients. 20:59-22:40.
- ii. That “adolescents’ gender identity is fluid so from one day or one point in time they say no, I’m this, I’m female, but then realize later on that I’m male.” 28:08-28.
- iii. That “we’re not sure about the safety and long-term effects of puberty suppression in youth with gender dysphoria we do know that this is safe to use in youth with precocious puberty, but we don’t know if we can translate those side effects and the long-term effects to those with gender dysphoria and who are using puberty suppression for those reasons.” 28:28-46.
- iv. That “some of the consequences of hormone therapy are permanent.” 29:57-30:09.
- v. That biological females that take testosterone to transition their biological sex “will get some atrophy of the vagina ... [and thereafter for the duration

of their life] they'll need some sort of water-based lubricant if they're going to still use the vagina as part of sex" 32:41-52.

- vi. That "it's so important that these folks get identified in childhood because when they come to me and are 30 or 40 years old and they've been under the influence of their gender hormones all this time it's very hard to reverse it. I can't take somebody that's, you know, five-foot ten and very muscular uh and make them a woman overnight even if they use the clothing and so forth "33:05-39.
- vii. That "testosterone is a powerful hormone, so I tell them that the effect of estrogen is like a feather, you know, just it's just a whiff and whereas testosterone you give a little bit [and] you get a lot of effect." 33:39-59.
- viii. That "I want you to look at the graphic to see that the number of surgeries has increased and continue to increase and many of our patients ... are getting them done. There are more surgeries for the affirm females than the affirm males and we may not know how many people actually are getting gender affirming surgery because some of them are going to Thailand, they're going to Europe, they're going to other counties to get this done because its much cheaper." 37:37-38:13.
- ix. "There's a recent study May 2018 that suggests the timing of top surgery or breast surgery for affirm males should be based on physical and mental health status of the youth not by a specific age and *I will tell you that we have had youth in our clinic come in who have had top surgery before they have even started hormone treatment.*" 39:39-40:05 (emphasis added).

44. Lau was previously associated with the now dissolved Gender Education and Care Interdisciplinary Support (GENECIS) Program, which was dedicated to using medical interventions to transition the biological sex of children or affirm a child's beliefs that their gender identity is inconsistent with their biological sex. May Lau, M.D., and Patti Pagels MPAS, PA-C, *Transgender Care of Adolescents and Adults*, Mid-Atlantic Chapter of the Medical Library Association (Jan. 8, 2020), <https://tinyurl.com/mry8wtv9>.

45. Ximena Lopez, M.D., the founder of the GENECIS, shuttered the program and high-tailed it to California shortly after SB 14 was enacted. Paul Hunter, *Texas ban on gender-affirming care leaves trans teens without options*, CBC News (July 5, 2023),

<https://tinyurl.com/4r6c8kr5> (Lopez declaring that medically transitioning children is “one of the most important things I’ve done in my life” and stating that she was leaving Texas because she thinks the whole state is “crazy.”).

46. Lopez and Lau are co-authors on several publications advocating for the medical transition of minors diagnosed with gender dysphoria. *Biography of May Lau, M.D.*, <https://tinyurl.com/259556bc>.

47. Lau and the staff of GENECIS were thanked for assisting with a medical student’s dissertation on transitioning minors from their biological sex. Antoinette Moore, *Health Related Quality of Life of Transgender Adolescents Undergoing Hormonal Transition or Elective Pubertal Delay*, UT Southwestern (2018), <https://tinyurl.com/y225drwp>.

48. Lau’s practices, publications, and presentations betrays an entrenched commitment to a gender ideology that desires to medically transition the biological sex of children or affirm the belief that a child’s gender identity is inconsistent with their biological sex.

D. *The Texas Medicaid Program*

49. In accordance with Title XIX of the Social Security Act of 1965, 42 U.S.C. §§ 1396 *et seq.*, the Medicaid Program provides medical care to certain low-income and disabled persons. Medicaid is funded jointly by the federal government and state governments.

50. States participating in Medicaid enact their own standards regarding beneficiary eligibility, provider credentials, services covered, and program administration within federal parameters. 42 U.S.C. §§ 1396, 1396a. Texas participates in Medicaid and administers the program through the Texas Health and Human Services Commission (“HHSC”).

51. The vast majority of Texas Medicaid beneficiaries receive care through managed care organizations (“MCOs”) which contract with HHSC. Tex. Health & Hum. Servs. Comm’n, *Texas Medicaid and CHIP Reference Guide 4* (2024), <https://tinyurl.com/4c34yv3v>.

52. Pursuant to federal regulations and Texas Medicaid Program rules, MCOs and enrolled providers must record and submit accurate encounter data regarding Medicaid-provided services to HHSC, which then must submit the same to the U.S. Department of Health and Human Services Centers for Medicare and Medicaid Services (“CMS”). 42 C.F.R. §§ 438.604, .818; *see also* 1 Tex. Admin. Code §§ 354.1001, 371.1663. Failure to timely report accurate encounter data to CMS can result in the loss of federal funding for Medicaid-provided services. 42 C.F.R. §§ 438.604, .818; *see also* 1 Tex. Admin. Code §§ 354.1001, 371.1663.

53. HHSC promulgates the Texas Medicaid Provider Procedures Manual (“TMPPM”). To enroll as a provider in Texas Medicaid, the applicant must, among other things, submit a signed provider agreement, certifying that the applicant will abide by all terms and conditions of the provider agreement. 1 Tex. Admin. Code § 352.7. The provider agreement stipulates that providers “[have] a duty to become educated and knowledgeable with the contents and procedures contained in the Provider Manual [TMPPM].” Tex. Health & Hum. Servs. Comm’n, *HHSC Provider Agreement* ¶ 1.1 (2018), <https://tinyurl.com/3kj3ta2k>.

54. Moreover, a provider must agree “to comply with all of the requirements of the Provider Manual [TMPPM], as well as all state and federal laws governing or regulating Medicaid, and provider further acknowledges and agrees that the provider is responsible for ensuring that all employees and agents of the provider also comply.” *Id.* Providers also agree to submit accurate claims and encounter data as required by state and federal laws and regulations and in accordance with HHSC billing guidelines and procedures. *Id.* at ¶ 1.3.

E. *HHSC Prohibitions and Restrictions on Gender Transition Services*

55. The TMPPM specifies certain “services, supplies, procedures, and expenses” that are excluded from program coverage as being “not benefits of Texas Medicaid.” 1 Tex. Health & Hum. Servs. Comm’n, Texas Medicaid Provider Procedures Manual § 1.11 (2025), <https://tinyurl.com/3v3f647u>. According to the TMPPM, the list of exclusions “is *not* all inclusive.” *Id.* (emphasis original).

56. Since December 1, 2024 Texas Medicaid has specifically excluded:

- a. “Prescription medications and surgical procedures used for the purposes of transitioning biological sex, including sex change operations, except when provided to individuals with a medically verifiable genetic disorder of sex development;”
- b. “Procedures and treatments as defined by Chapter 161, Section §161.702 of the Texas Health and Safety Code;” and
- c. “Procedures, services, supplies, treatments, and prescription medications prohibited by Texas state law.”

Tex. Medicaid & Healthcare P’ship, Updates to the TMPPM Provider Enrollment and Responsibilities Handbook Available December 1, 2024 (Oct. 11, 2024), <https://tinyurl.com/2u9j4za2>.

57. In addition, after SB 14, HHSC added new prior authorization criteria, effective March 2024, requiring denial of certain drugs associated with gender transitioning if the patient had a gender dysphoria diagnosis within the past two years. Tex. Medicaid & Healthcare P’ship, Prior Authorization Criteria for Hormonal Therapy Agents Effective March 1, 2024 (Dec. 15, 2023), <https://tinyurl.com/4fny92yt>.

58. Effective March 1, 2024, the TMPPM was also updated to exclude certain hormonal therapy agents when submitted with the following gender identity diagnosis codes: F64.0 (Transsexualism), F64.1 (Dual role transvestism), F64.2 (Gender identity disorder of

childhood), F64.8 (Other gender identity disorders), and F64.9 (Gender identity disorder, unspecified). *Id.*

59. These hormonal agents include 15 billing codes for non-oral medications in clinical settings, including various forms of injectable and implantable puberty blockers, testosterone, and estrogen. 2 Tex. Health & Hum. Servs. Comm'n, Texas Medicaid Provider Procedures Manual: Outpatient Drug Services Handbook § 6.62 (2025), <https://tinyurl.com/jx8kwaxf>.

IX. VIOLATIONS OF SB 14.

60. Lau has knowingly violated Tex. Health & Safety Code § 161.702(3) and § 161.704.

A. *Cross-Sex Hormones to Transition Biological Sex or Affirm a Child's Belief that their Gender Identity is Inconsistent with their Biological Sex.*

61. High dose cross-sex hormones are commonly used by gender activists to transition the biological sex of children or affirm a child's belief that their gender identity is inconsistent with their biological sex.

62. High dose cross-sex hormones are prescribed to induce a supraphysiologic state where the hormone levels are greater than would otherwise normally be present in the child's body.

63. As a result of the hormones, the child will develop secondary sex characteristics.

64. Testosterone is a cross-sex hormone that is prescribed to transition biological females to biological females with irreversible male secondary sex characteristics.

65. Testosterone is a Schedule III controlled substance.

66. Radical gender activists within the medical profession rely on the so-called "Standards of Care" promulgated by the World Professional Association of Transgender Health (WPATH) as guidelines for transitioning the biological sex of children or affirming a child's belief that their gender identity is inconsistent with their biological sex. *See, e.g.*, Selena Simmons-Duffin,

Rachel Levine calls state anti-LGBTQ bills disturbing and dangerous to trans youth, NPR (Apr. 29, 2022) (claiming that the standard for treating gender dysphoria is set by the WPATH), <https://tinyurl.com/3jxymtum>.

67. WPATH recommends that a doctor transitioning the biological sex of children or affirming a child's belief that their gender identity is inconsistent with their biological sex prescribe enough testosterone to induce the same level that would be present in a biological male. Standards of Care 8, WPATH pg. 110 (2023), <https://tinyurl.com/32z3bnhr>.

B. *Lau's Testosterone Prescribing*

68. WPATH recommends transitioning the biological sex of children or affirming a child's belief that their gender identity is inconsistent with their biological sex by prescribing injectable testosterone cypionate at 100-200 mg/ml so as to induce a state of male puberty in a biological female such that she will develop irreversible male secondary sex characteristics, *Standards of Care 8*, WPATH App'x C, <https://tinyurl.com/mwe9kru4>.

69. WPATH recommends "induction of male puberty" in a biological female minor by prescribing testosterone esters at "25mg/m²/2 weeks (or alternatively half this dose weekly). Increase by 25 25mg/m²/2 weeks every 6 months until adult dose and target testosterone levels achieved." *Id.*

70. WPATH alternatively recommends the following testosterone regime for biological females to induce male secondary sex characteristics, "testosterone enanthate/cypionate 50-100 IM/SQ weekly or 100-200 IM every 2 weeks." *Id.*

71. A "testosterone cypionate injection is use[d] to treat **males** whose bodies do not make enough natural testosterone, a condition called hypogonadism. Testosterone is a male hormone responsible for the growth and development of the male sex organs and maintenance of

secondary sex characteristics. **This medicine is not for use in female patients.**”

TESTOSTERONE CYPIONATE, Mayo Clinic (emphasis added), <https://tinyurl.com/558b8fcv>.

72. The Federal and Drug Administration warns that testosterone cypionate “**is contraindicated in pregnant women and not indicated for use in females.**” TESTOSTERONE CYPIONATE INJECTION, FDA (June 2022) (emphasis added), <https://tinyurl.com/pph966z7>.

73. Lau has violated the law by providing, prescribing, administering, dispensing, or facilitating prescriptions of testosterone to minor patients for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex:

Patient One¹

74. Patient One resides in Collin County, TX.

75. Patient One was 17 years old during the relevant time.

76. Lau identifies Patient One as a biological female.

77. On October 2, 2023, after SB 14 went into effect, Lau wrote Patient One a prescription for a 14-day supply of 200 mg/ml of testosterone cypionate.

78. The purpose is for transitioning her biological sex or affirming her belief that her gender identity is inconsistent with her biological sex.

79. On October 12, 2023, Patient One filled the prescription at a pharmacy located in Collin County, TX.

80. Later, Patient One turned 18 years old and, thereafter, Lau continued to provide, prescribe, administer, or dispense testosterone.

¹ Pseudonyms are used throughout to protect the identity of the victim minor patients.

81. The purpose is for transitioning her biological sex or affirming her belief that their gender identity is inconsistent with her biological sex.

Patient Two

82. Patient Two resides in Collin County, TX.

83. Patient Two was 17 years old during the relevant time.

84. Lau identifies Patient Two as a biological female.

85. On October 9, 2023, after SB 14 went into effect, Lau wrote Patient Two a prescription for a 90-day supply of 200 mg/ml of testosterone cypionate.

86. The purpose is for transitioning her biological sex or affirming her belief that her gender identity is inconsistent with her biological sex.

87. The same day, Patient Two filled the prescription at a pharmacy located in Collin County, TX.

Patient Three

88. Patient Three resides in Denton County, TX.

89. Patient Three was 17 years old during the relevant time.

90. Lau identifies Patient Three as a biological male, but upon information and belief, Patient Three may be a biological female.

91. On August 25, 2023, Lau wrote Patient Three a prescription for a 21-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

92. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

93. On January 7, 2024, 135-days after the prescription was written and after SB 14 went into effect, Patient Three filled the prescription at a pharmacy located in Denton County, TX.

94. On February 23, 2024, Lau wrote Patient Three a prescription for a 30-day supply of 200 mg/ml of testosterone cypionate.

95. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

96. On February 25, 2024, Patient Three filled the prescription at a pharmacy located in Denton County, TX.

97. Later, Patient Three turned 18 years old and, thereafter, Lau continued to provide, prescribe, administer, or dispense testosterone to them.

98. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

Patient Four

99. Patient Four resides in Dallas County, TX.

100. Patient Four was 16 during the relevant time.

101. Lau identifies Patient Four as a biological female.

102. On August 31, 2023, Lau wrote Patient Four two prescriptions for a 28-day supplies of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

103. The purpose is for transitioning her biological sex or affirming her belief that her gender identity is inconsistent with her biological sex.

104. On September 1, 2023, after SB 14 went into effect, Patient Four filled the prescription at a pharmacy located in Travis County, TX.

105. On October 28, 2023, Patient Four refilled the prescription at a pharmacy located in Travis County, TX.

106. On March 26, 2024, Lau wrote Patient Four two prescriptions for a 28-day supply of 200 mg/ml of testosterone cypionate.

107. On March 28, 2024, Patient Four filled the prescription at a pharmacy located in Travis County, TX.

108. On July 26, 2024, Patient Four refilled the prescription at a pharmacy located in Travis County, TX.

Patient Five

109. Patient Five resides in Collin County, TX.

110. Patient Five was 16 years old at the relevant time.

111. Lau identifies Patient Five as a biological male, but upon information and belief, Patient Five may be a biological female.

112. On August 17, 2023, Lau wrote Patient Five a prescription for a 28-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription both before and after SB 14 took effect.

113. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

114. On October 7, 2023, after SB 14 went into effect, Patient Five filled the prescription at a pharmacy located in Collin County, TX.

115. On November 14, 2023, Lau wrote Patient Five a prescription with five refills for 28-day supplies of 200 mg/ml of testosterone cypionate.

116. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

117. The same day, Patient Five filled the prescription at a pharmacy located in Collin County, TX.

118. On December 11, 2023, Patient Five refilled the prescription at a pharmacy located in Collin County, TX.

119. On January 17, 2024, Patient Five refilled the prescription at a pharmacy located in Collin County, TX.

120. On March 11, 2024, Patient Five refilled the prescription at a pharmacy located in Collin County, TX.

121. On April 12, 2024, Patient Five refilled the prescription at a pharmacy located in Collin County, TX.

122. On June 21, 2024, Lau wrote Patient Five multiple prescriptions for 22-day supplies of 200 mg/ml of testosterone cypionate.

123. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

124. On June 24, 2024, Patient Five filled the prescription a pharmacy located in Collin County, TX.

125. On July 13, 2024, Patient Five refilled the prescription a pharmacy located in Collin County, TX.

126. On August 18, 2024, Patient Five refilled the prescription a pharmacy located in Collin County, TX.

Patient Six

127. Patient Six resides in Collin County, TX.

128. Patient Six was 17 years old at the relevant time.

129. Lau identifies Patient Six as a biological male, but upon information and belief, Patient Six may be a biological female.

130. On August 30, 2023, Lau wrote Patient Six one prescription with one refill for 84-day supplies of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

131. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

132. On October 24, 2023, 55-days after Lau wrote the prescription and after SB 14 went into effect, Patient Six filled the prescription at a pharmacy located in Collin County, TX.

133. On January 22, 2024, Patient Six refilled the prescription at a pharmacy located in Collin County, TX.

134. Later, Patient Six turned 18 years old and, thereafter, Lau continued to provide, prescribe, administer, or dispense testosterone to them.

135. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

Patient Seven

136. Patient Seven resided in Wise County, TX.

137. Patient Seven was 17 at the relevant time.

138. Lau identifies Patient Seven as a biological female.

139. On August 31, 2023, Lau wrote Patient Seven a prescription for an 84-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

140. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

141. On September 1, 2023, after SB 14 went into effect, Patient Seven filled the prescription at a pharmacy located in Wise County, TX.

142. Later, Patient Seven turned 18 years old and, thereafter, Lau continued to provide, prescribe, administer, or dispense testosterone to them.

143. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

Patient Eight

144. Patient Eight resides in Dallas County, TX.

145. Patient Eight was 16 years old at the relevant time.

146. Lau identifies Patient Eight as a biological male, but upon information and belief, Patient Eight may be a biological female.

147. On August 28, 2023, Lau wrote Patient Eight a prescription for a 28-day supply of 200 mg/ml of Depo-testosterone with orders to fill the prescription after SB 14 took effect.

148. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

149. On October 16, 2023, 61-days after Lau wrote the prescription and after SB 14 went into effect, Patient Eight filled the prescription at a pharmacy located in Dallas County, TX.

Patient Nine

150. Patient Nine resides in Dallas County, TX.

151. Patient Nine was 14 years old at the relevant time.

152. Lau identifies Patient Nine as a male, but upon information and belief, Patient Nine may be a biological female.

153. On July 5, 2023, Lau wrote Patient Nine a prescription for a 21-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

154. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

155. On October 27, 2023, 114-days after Lau wrote the prescription and after SB 14 went into effect, Patient Nine filled the prescription at a pharmacy located in Dallas County, TX.

Patient Ten

156. Patient Ten resides in Tarrant County, TX.

157. Patient Ten was 14 years old at the relevant time.

158. Lau identifies Patient Ten as a biological female.

159. On August 29, 2023, Lau wrote Patient Ten two prescriptions for either a 7-day or 28-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

160. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

161. On October 2, 2023, after SB 14 went into effect, Patient Ten filled the prescription at a pharmacy located in Tarrant County, TX.

162. On November 1, 2023, Patient Ten refilled the prescription at a pharmacy located in Tarrant County, TX.

163. On December 4, 2023, Patient Ten refilled the prescription at a pharmacy located in Tarrant County, TX.

164. On January 5, 2024, Patient Ten filled the second prescription at a pharmacy located in Tarrant County, TX.

165. On February 12, 2024, Patient Ten refilled the prescription at a pharmacy located in Tarrant County, TX.

Patient Eleven

166. Patient Eleven resides in Kaufman County, TX.

167. Patient Eleven was 14 years old at the relevant time.

168. Lau identifies Patient Eleven as a biological female.

169. On August 29, 2023, Lau wrote Patient Eleven four prescriptions for 28-day supplies of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

170. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

171. On September 5, 2023, after SB 14 went into effect, Patient Eleven filled the prescription at a pharmacy located in Kaufman County, TX.

172. On October 15, 2023, Patient Eleven refilled the prescription at a pharmacy located in Kaufman County, TX.

173. On November 17, 2023, Patient Eleven refilled the prescription at a pharmacy located in Kaufman County, TX.

174. On January 7, 2024, Patient Eleven refilled the prescription at a pharmacy located in Kaufman County, TX.

Patient Twelve

175. Patient Twelve resides in Rockwall County, TX.

176. Patient Twelve was 14 years old at the relevant time.

177. Lau identifies Patient Twelve as a biological female.

178. On August 31, 2023, Lau wrote Patient Twelve a prescription for a 90-day supply of testosterone 1.62% Gel Pump with orders to fill the prescription after SB 14 took effect.

179. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

180. On January 19, 2024, 141-days after Lau wrote the prescription and after SB 14 took effect, Patient Twelve filled the prescription at a pharmacy located in Rockwall County, TX.

Patient Thirteen

181. Patient Thirteen resides in Dallas County, TX.

182. Patient Thirteen was 15 years old at the relevant date.

183. Lau identifies Patient Thirteen as a biological female.

184. On July 11, 2023, Lau wrote Patient Thirteen several prescriptions for a 90-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

185. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

186. On October 13, 2023, 94-days after Lau wrote the prescription and after SB 14 went into effect, Patient Thirteen refilled the prescription at a pharmacy located in Dallas County, TX.

Patient Fourteen

187. Patient Fourteen resides in Denton County, TX.

188. Patient Fourteen was 15 years old at the relevant time.

189. Lau identifies Patient Fourteen as a biological female.

190. On August 21, 2023, Lau wrote Patient Fourteen a prescription for a 34-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

191. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

192. On October 27, 2023, 67-days after Lau wrote the prescription and after SB 14 went into effect, Patient Fourteen filled the prescription at a pharmacy located in Denton County, TX.

Patient Fifteen

193. Patient Fifteen resides in Dallas County, TX.

194. Patient Fifteen was 15 years old at the relevant time.

195. Lau identifies Patient Fifteen as a biological female.

196. On June 23, 2023, Lau wrote Patient Fifteen a prescription for a 21-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

197. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

198. On September 11, 2023, 80-days after Lau wrote the prescription and after SB 14 went into effect, Patient Fifteen filled the prescription at a pharmacy located in Dallas County, TX.

Patient Sixteen

199. Patient Sixteen resides in Tarrant County, TX.

200. Patient Sixteen was 15 years old at the relevant time.

201. Lau identifies Patient Sixteen as a biological female.

202. On August 23, 2023, Lau wrote Patient Sixteen a prescription for an 84-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

203. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

204. On January 7, 2024, 137-days after Lau wrote the prescription and after SB 14 went into effect, Patient Sixteen filled the prescription at a pharmacy located in Tarrant County, TX.

Patient Seventeen

205. Patient Seventeen resides in Potter County, TX.

206. Patient Seventeen was sixteen years old at the relevant time.

207. Lau identifies Patient Seventeen as a biological female.

208. On August 31, 2023, Lau wrote Patient Seventeen a prescription for a 42-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

209. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

210. On September 1, 2023, after SB 14 went into effect, Patient Seventeen filled the prescription at a pharmacy located in Potter County, TX.

Patient Eighteen

211. Patient Eighteen resides in Collin County, TX.

212. Patient Eighteen was 16 years old at the relevant time.

213. Lau identifies Patient Eighteen as a biological male, but upon information and belief, Patient Eighteen may be a biological female.

214. On August 24, 2023, Lau wrote Patient Eighteen a prescription for an 80-day supplies of 200 mg/ml of testosterone 12.5 mg/1.25 g with orders to fill the prescription after SB 14 took effect.

215. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

216. On October 27, 2023, 64-days after Lau wrote the prescription and after SB 14 went into effect, Patient Eighteen filled the prescription at a pharmacy located in Saint Louis County, MO.

Patient Nineteen

217. Patient Nineteen resides in Collin County, TX.

218. Patient Nineteen was 16 years old at the relevant time.

219. Lau identifies Patient Nineteen as a biological male, but upon information and belief, Patient Nineteen may be a biological female.

220. On August 31, 2023, Lau wrote Patient Nineteen a prescription for a 14-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

221. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

222. On October 24, 2023, 54- days after Lau wrote the prescription and after SB 14 went into effect, Patient Nineteen filled the prescription at a pharmacy located in Collin County, TX.

Patient Twenty

223. Patient Twenty resides in Dallas County, TX.

224. Patient Twenty was 17 years old at the relevant time.

225. Lau identifies Patient Twenty as a biological female.

226. On August 31, 2023, Lau wrote Patient Twenty a prescription for a 21-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

227. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

228. On November 22, 2023, 83-days after Lau wrote the prescription and after SB 14 went into effect, Patient Twenty filled the prescription at a pharmacy located in Dallas County, TX.

Patient Twenty-One

229. Patient Twenty-One resides in Dallas County, TX.

230. Patient Twenty-One was 17 years old at the relevant time.

231. Lau identifies Patient Twenty-One as a biological female.

232. On August 15, 2023, Lau wrote Patient Twenty-One a prescription for a 14-day supply of 200 mg/ml of testosterone cypionate with orders to fill the prescription after SB 14 took effect.

233. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

234. On September 10, 2023, after SB 14 went into effect, Patient Twenty-One filled the prescription at a pharmacy located in Dallas County, TX.

235. Later, Lau identifies the now 18-year-old Patient Twenty-One, as a biological male.

Patient Twenty-Two

236. On information and belief, Patient Twenty-Two residents in Tarrant County, Texas.

237. Patient Twenty-Two was 15 years old at the relevant time.

238. Lau identifies Patient Twenty-Two as a biological male.

239. On August 28, 2023, Lau wrote Patient Twenty-Two a prescription for a 30-day supply of estradiol 1 mg tablets with orders to fill the prescription after SB-14 took effect.

240. The purpose is for transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

241. On September 20, 2023, October 16, 2023, July 7, 2024, and July 31, 2024, after SB-14 went into effect, Patient Twenty-Two filled the prescription at a pharmacy located in Tarrant County, Texas.

* * *

242. Paragraphs 74-235 describe 22 minor patients who Lau has unlawfully treated with testosterone for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex in violation of SB 14.

243. Paragraphs 236-241 describe a minor patient to whom Lau has unlawfully prescribed estradiol for the purposes of transitioning the Patient's biological sex or affirming their belief that their gender identity is inconsistent with their biological sex in violation of SB 14.

244. Paragraphs 74-241 describe minor patients to whom Lau has provided—or facilitated the provision of—illegal gender-transition services in violation of SB 14. *See* Tex. Health & Safety Code § 161.704.

245. Some of Lau's medical records for the patients identified in the preceding paragraphs indicate that biological female patients are male, but upon information and belief, Patients One through Twenty-One are all biological females and Patient Twenty-Two is a biological male whose records identify him as female. The prescriptions were for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent

with their biological sex. *See also supra* ¶ 43(i) (Lau admitting that she commonly changes the biological sex of her patients in her medical records).

246. Lau cannot circumvent SB 14 by writing prescriptions to her patients prior to SB 14 taking effect with orders to fill or refill the prescriptions after it takes effect, *see* 22 Tex. Admin. Code § 315.3(b)(2) (Schedule III Controlled Substances can be refilled up to five times within six months of the date of issuance). First, SB 14 prohibits the use of public money to any health care provider who “provides or facilitates the provision of medical interventions” that violates SB 14. Tex. Health & Safety Code § 161.704. Moreover, a “prescription” order is not a singular discrete act; it is a continuing act of treatment that begins with the prescription being written and continues through the pharmacist filling the prescription and the drug being used as directed by the patient, or until the written prescription expires or is cancelled. What’s more, by issuing prescriptions with orders to fill them after the effective date of SB 14, Lau is “providing” the prescribed medication to the patient at the time they fill and use the prescription as directed, which they could not do otherwise without the prescription.

247. Each and every prescription provided, prescribed, administered, or dispensed by Lau on or after September 1, 2023 for the purpose of transitioning a child’s biological sex violates Tex. Health & Safety Code § 161.702(3). Each and every prescription provided, administered, or dispensed to a patient on or after September 1, 2023 for the purpose of transitioning a child’s biological sex based on a prescription written by Lau violates SB 14. *See* Tex. Health & Safety Code § 161.704–.705 (prohibiting the granting of public money, including Medicaid reimbursements, to providers who “facilitate[] the provision of a procedure or treatment to a child that is prohibited under Section 161.702”).

X. FALSE, MISLEADING, OR DECEPTIVE ACTS

248. Texas incorporates and adopts by reference the allegations contained in each and every preceding paragraph of this Petition.

249. Lau, as alleged herein, has in the course of trade and commerce engaged in false, misleading, and deceptive acts and practices declared unlawful in violation of Tex. Bus. & Com. Code §§ 17.46(a), (b)(5), (24).

250. Texas Bus. & Com. Code § 17.46(a) prohibits “false, misleading, or deceptive acts or practices in the conduct of any trade or commerce.”

251. As illustrated in the representative example below, Lau deceptively misleads pharmacies, insurance providers, and/or the patients by falsifying patient medical records, prescriptions, and billing records to indicate that the use of puberty blockers for minor patients are for something other than transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

252. Lau also likely deceptively misled pharmacies, insurance providers and/or the patients by falsifying patient medical records, prescriptions and billing records to indicate the use of Testosterone for minor Patients One through Twenty-One for something other than transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

253. Texas Bus. & Com. Code § 17.46(b)(5) prohibits “representing that goods or services have sponsorship, approval, characteristics, ingredients, uses, benefits, or quantities which they do not have or that a person has a sponsorship, approval, status, affiliation, or connection which the person does not.”

254. As illustrated in the representative example below, Lau deceptively represents that goods or services have approval, characteristics, uses, or benefits which they do not or that a person has a sponsorship, approval, status, affiliation, or connection which the person does not have by falsifying patient medical records, prescriptions, and billing records for something other than transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

255. Texas Bus. & Com. Code § 17.46(b)(24) prohibits “failing to disclose information concerning goods or services which was known at the time of the transaction if such failure to disclose such information was intended to induce the consumer into a transaction if such failure to disclose such information was intended to induce the consumer into a transaction into which the consumer would not have entered had the information been disclosed.”

256. As illustrated in the representative example below, Lau deceptively induces pharmacies, insurance providers, and/or the patients into entering into transactions by falsifying patient medical records, prescriptions, and billing records to indicate that treatments are for something other than transitioning a child’s biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

A. *Lau uses false diagnoses and billing codes on transgender patients.*

Patient Twenty-Three

257. Patient Twenty-Three, a 15-year-old minor, was first seen by Lau in January 2023.

258. Lau represented that Twenty-Three was identified in the medical records as a male at the time.

259. Lau falsely billed Patient Twenty-Three’s insurance using the diagnostic code for an endocrine disorder, unspecified (E34.9).

260. In fact, Lau diagnosed Twenty-Three with gender dysphoria and began “treatment” for that condition by prescribing and inserting a puberty blocker device in the patient for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

261. On August 3, 2023, Lau changed Twenty-Three’s sex to female in the medical and billing records—further proof that Lau was transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

262. Less than a week later, Twenty-Three met with Lowell, the founder of Queer Med and who exclusively treats transgender patients, *see* What We Do, QueerMed, <https://tinyurl.com/2rr2ff7e>, for a fertility preservation counseling visit.

263. Lowell used the same false diagnostic billing code for endocrine disorder, unspecified (E34.9), when she was actually providing treatment to Patient Twenty-Three for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

264. Two weeks later, on August 18, 2023, Twenty-Three visited Lau who falsely billed for the removal and reinsertion of a puberty blocker for the treatment of an endocrine disorder, unspecified (E34.9)—when in fact Lau was using puberty blockers for the purposes of transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

265. The same day, Patient Twenty-Three was seen by a different provider at Children's who correctly used billing codes for gender identity disorder, unspecified (F64.9).

266. Patient Twenty-Three had follow up visits with Lowell of QueerMed in January and March 2024, where her diagnosis was again falsely billed as an endocrine disorder, unspecified (E34.9).

267. Thus, even prior to September 1, 2023, and despite other providers correctly diagnosing Twenty-Three with gender identity disorder, unspecified (F64.9), Drs. Lau and Lowell demonstrated a pattern of false, misleading, and deceptive acts by choosing to falsify Patient Twenty-Three's biological sex, medical records, diagnoses, treatment plan, prescriptions, and billing records to conceal that they were transitioning Patient Twenty-Three's biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

B. *Gender dysphoria is not an endocrine disorder.*

268. E34.9 or "endocrine disorder, unspecified" is an ICD-10 diagnosis code used for billing both private insurance and federal and state programs. It falls within the E codes for "Endocrine, nutritional and metabolic diseases," subpart E20-E35 "Disorders of other endocrine glands," and E34 for "Other endocrine disorders."

269. It should only be used when the patient has a discrete, quantifiable endocrine disorder that is observable and pathological.

270. CMS issues the ICD-10 Official Guidelines for Coding and Reporting, which provide that "specific diagnosis codes should be reported when they are supported by the available medical record documentation and clinical knowledge of the patient's health condition. . . . Each healthcare encounter should be coded to the level of certainty known for that encounter." Centers

for Medicare and Medicaid Services, “ICD-10-CM Official Guidelines for Coding and Reporting” FY 2024, 17 (updated April 1, 2024) <https://tinyurl.com/5n7rx6t5>. “Codes titled ‘unspecified’ are for use when the information in the medical record is insufficient to assign a more specific code.” *Id.* at 9.

271. Other codes within the E34 category include carcinoid syndrome (E34.0), ectopic hormone secretion (E34.2), primary insulin-like growth factor deficiency (E34.321), androgen insensitivity syndrome (E34.5), etcetera. All of these are genuine endocrine disorders that require laboratory testing for confirmation of diagnosis. E34.9 is for similar, quantifiable endocrine disorders that are not specified in the ICD-10.

272. A patient’s belief that he or she should have the opposite sex’s hormones is not an endocrine disorder. Gender identity disorders are psychological disorders that cannot be objectively observed or measured like the disorders in this category.

273. The ICD-10 already contains 5 different diagnosis codes for “Gender identity disorders,” which are part of the ICD F codes for “Mental, behavioral, and neurodevelopmental disorders,” subpart F60-69 for “Disorders of adult personality and behavior.”

274. The American Psychiatric Association’s Diagnostic and Statistical Manual of Mental Disorders, now on its fifth edition (“DSM-5”), reiterates that “gender dysphoria” is a psychiatric diagnosis – not a physiological one. The DSM-5 is the standard classification for mental disorders used by mental health professionals and incorporates the ICD-10.

275. It defines “gender dysphoria” as “[a] marked incongruence between one’s experienced/expressed gender and natal gender of at least 6 months in duration,” manifested by two out of six criteria regarding the person’s subjective experiences and desires regarding the

opposite sex. Am. Psychiatric Ass'n, Diagnostic and Statistical Manual of Mental Disorders (5th ed.) (2013).

276. An endocrine disorder results from the improper function of the endocrine system.

277. Children normally enter puberty reflecting their biological sex. There is no disorder at all. Rather, the disorder results when a physician intervenes in a child's natural puberty to induce through puberty blockers and cross-sex hormones a state of puberty naturally occurring in the opposite sex. Such physician causes a disorder rather than treats one, by introducing supraphysiological dose of a cross-sex hormone to force a child's body (a biological reality) to fit that child's gender identity (a mental construct).

278. Gender activist organizations have encouraged the use of E34.9 and other false diagnosis codes to mislead insurance companies into paying for transgender interventions that otherwise would not be covered.

279. For instance, a document titled "Insurance Coding Alternatives for Trans Healthcare" purports to "help guide providers about insurance codes for trans healthcare that are commonly accepted and rejected." Campaign for Southern Equality, *Trans in the South: A Guide to Resources and Services* 51 (October 2017), <https://tinyurl.com/2k3jy75p>.

280. The guide states that certain codes like F64 (gender identity disorder) and intersex codes are "commonly rejected by insurance providers."

281. However, it identifies E34.9 and Z79.899 (Other long term (current) drug therapy) as "commonly accepted by insurance providers."

282. The Campaign for Southern Equality specifically contemplates Medicaid coverage for transgender interventions, noting:

“[m]ost insurers have an exclusion of coverage for transition-related coverage as their standard language and do not remove it unless a state has issued guidance that says that exclusions of trans care are illegal, or the plan receives federal funds to pay for premiums (or payment for a third party administrator), such as a federal or state marketplace plan, Medicare or Medicaid programs (many states are out-of-compliance with the federal rules for their Medicaid programs). This is the most common, and most folks don’t know they have an exclusion until they are told where to look. This does not mean that it is impossible to get care covered, but the appeals process is much harder.”

Id. at 52 (emphasis added).

283. Per the guide, this information comes from a toolkit created by the “Transgender Medicine Model National Coverage Determination Working Group,” which advised CMS in January 2016 on Medicare coverage for transgender surgeries.

284. Upon information and belief, Lau is using this diagnostic billing code to falsely represent that she’s treating patients for an unspecified endocrine disorder, when in fact she is transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex—something that is not an endocrine disorder.

285. Here, Lau is engaging in false, misleading, or deceptive practices, by falsely diagnosing and billing patients using the endocrine disorder, unspecified, code instead of the F64 gender related diagnosis codes to conceal that she is transitioning their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex in violation of Tex. Bus. & Com. Code §§ 17. 46(a), (b)(5), (24).

XI. UNLAWFUL ACTS UNDER THE THFPA

286. Texas incorporates and adopts by reference the allegations contained in each and every preceding paragraph of this Petition.

287. Lau is a Texas Medicaid provider.

288. As a condition of enrollment, Medicaid providers must sign the HHSC Medicaid Provider Agreement. Tex. Health & Hum. Servs. Comm'n, Medicaid Provider Agreement (Revised: September 1, 2018), <https://tinyurl.com/3kj3ta2k>.

289. In Section XII of the Provider Agreement, the provider:

“agrees to abide by all Medicaid regulations, program instructions, and Title XIX of the Social Security Act. . . . Provider understands that payment of a claim by Medicaid is conditioned upon the claim and the underlying transaction complying with such laws, regulations, and program instructions (including, but not limited to, the Federal anti-kickback statute and the Stark law) . . . and on the provider’s compliance with all applicable conditions of participation in Medicaid.” *Id.*

290. Lau was a physician employed by UT Southwestern who physically worked at Children’s in Dallas and Plano. Both UT Southwestern and Children’s submitted claims to Texas Medicaid where Lau was the rendering provider (the provider who performs the service listed on the claims) or the prescribing provider for medications.

291. Texas Medicaid paid UT Southwestern and Children’s for transgender interventions by Lau on both minors and young adults – interventions that were not authorized by Texas Medicaid. Lau made or caused to be made false statements or misrepresentations of material fact and concealed or failed to disclose information regarding (1) her compliance with State law and regulation and (2) the use of false or misrepresentative diagnoses to obscure illegal and unallowable transgender medical interventions. For the reasons described below, her actions are unlawful acts under Texas Hum. Res. Code § 36.002(1), (2), and (4)(b).

A. *Texas Medicaid Prohibits Reimbursement for Lau’s Claims that Violate SB-14.*

292. UT Southwestern and Children’s billed claims to Texas Medicaid for claims where Lau prescribed testosterone and estrogen in violation of Tex. Health & Safety Code §161.702(3).

293. Tex. Health & Safety Code § 161.704 prohibits public money from being “used, granted, paid, or distributed” “directly or indirectly” “to any health care provider, medical school, physician, or any other entity, organization, or individual that provides or facilitates the provision” of illegal transgender services to minors.

294. SB 14 expressly prohibits Texas Medicaid reimbursement to physicians and health care providers for procedures or treatments that violate SB-14. Tex. Health & Safety Code § 161.705

295. In the Provider Agreement, Lau certified her compliance with Texas law, regulations, and all applicable conditions of participation in Medicaid.

296. Texas Medicaid paid UT Southwestern and Children’s for the prescriptions identified above related to Patients Eleven, Fourteen, Twenty, and Twenty-Two. Lau’s prescriptions in violation of SB 14 are unlawful acts under the THFPA, Tex. Hum. Res. Code § 36.002(1), (2), and (4)(b).

B. *Lau Used False, Inappropriate, and Misrepresentative Diagnosis Codes to Bill Texas Medicaid for Illegal and Unallowable Gender-Transition Services.*

297. As described in Section IX(E) *supra*, the TMPPM excludes from Texas Medicaid’s coverage transgender services that violate SB 14, and drugs and procedures provided to transition biological sex.

298. Nonetheless, UT Southwestern and Children’s billed claims where Lau was the rendering or prescribing provider for testosterone for biological females and estrogen for biological males given for the purpose of transitioning their biological sex.

299. The ICD-10 codes include F64 diagnosis codes specifically for “Gender identity disorders,” including the following: F64.0 (Transsexualism), F64.1 (Dual role transvestism),

F64.2 (Gender identity disorder of childhood), F64.8 (Other gender identity disorders), and F64.9 (Gender identity disorder, unspecified).

300. None of Lau's claims made for gender-transition services using the F64 codes after December 1, 2024 were eligible for Medicaid reimbursement.

301. Further, as illustrated by the representative examples below, Lau used various other codes, including E34.9 (Endocrine disorder, unspecified), to obtain reimbursement for illegal transgender services.

302. In addition to the fact that these claims were submitted with false or misrepresentative diagnoses, Lau also committed unlawful acts in connection with them because her false diagnoses allowed for Medicaid reimbursement for transgender medical services and drugs that are not covered.

303. As described in Section XI(B) *supra*, E34.9 (Endocrine disorder, unspecified) should only be used where there is no other ascertainable diagnosis. Lau's use of E34.9 to obscure transgender medical interventions violates Texas Medicaid regulations and is a false statement or misrepresentation of material fact.

304. In addition to the testosterone and estradiol prescriptions identified in Section X *supra*, Texas Medicaid paid the following claims for Patients Eleven, Fourteen, Twenty, and Twenty-Two, all minors during the relevant time, using false diagnosis codes where Lau was the rendering provider:

- **Patient Eleven:** On June 15, 2023, August 24, 2023, and November 16, 2023, Texas Medicaid paid nine claims for outpatient office visits with Lau and lab tests ordered by Lau under the principal diagnosis code E34.9 with N94.89 (Other specified

conditions associated with female genital organs and menstrual cycle) as an additional diagnosis.

- **Patient Fourteen:** On May 12, 2023, and November 20, 2023, Texas Medicaid paid three claims for outpatient office visits with Lau under the principal diagnosis code E34.9 with N94.89 (Other specified conditions associated with female genital organs and menstrual cycle) and F39 (Unspecified mood [affective] disorder]) as additional diagnoses.
- **Patient Twenty:** On August 31, 2023, February 29, 2024, and May 16, 2024, Texas Medicaid paid five claims for outpatient office visits with Lau under the principal diagnosis code E34.9 with F64.2 (Gender identity disorder of childhood) and F33.3 (Major depressive disorder, recurrent, severe with psychotic symptoms) as additional diagnoses.
- **Patient Twenty-Two:** On July 6, 2023, Texas Medicaid paid eight claims for outpatient office visits with Lau and lab tests ordered by Lau under the principal diagnosis code E34.9. On February 1, 2024, Texas Medicaid paid a claim for an outpatient office visit with Lau under the principal diagnosis code F39 (Unspecified mood [affective] disorder) with E34.9 as an additional diagnosis. On September 13, 2024, Texas Medicaid paid two claims for outpatient office visits with Lau under the principal diagnosis code T7432XD (Child psychological abuse, confirmed, subsequent encounter) with E34.9 and F39 as additional diagnoses.

305. The following representative, non-exhaustive examples also demonstrate how Lau billed Texas Medicaid using E34.9 and other fraudulent diagnosis codes for gender transitions on young adults that are excluded by Texas Medicaid.

Patient Twenty-Four

306. Lau identifies Patient Twenty-Four as a biological male.

307. On December 8, 2023, Texas Medicaid paid two claims for Patient Twenty-Four's outpatient office visit with Lau, which was billed under the diagnosis code E34.9 (endocrine disorder, unspecified).

308. Also on December 8, 2023, Lau wrote Patient Twenty-Four at least two separate prescriptions for 30-day supplies of estradiol 1 mg tablets and estradiol 2 mg tablets,

309. The purpose is for transitioning or facilitating the transition of their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

310. Patient Twenty-Four filled the prescriptions on December 13, 2023, January 12, 2024, February 11, 2024, and March 10, 2024 at a pharmacy located in Dallas County, Texas. All eight prescriptions were paid by Texas Medicaid.

Patient Twenty-Five

311. Lau identifies Patient Twenty-Five as a biological male.

312. On December 21, 2023, Texas Medicaid paid eight claims for Patient Twenty-Five's outpatient office visit with Lau and labs all billed under the principal diagnosis code E34.9 (Endocrine disorder, unspecified), with additional diagnoses of F41.9 (Anxiety disorder, unspecified), and F32A (Depression, unspecified), amongst others.

313. On December 27, 2023, Lau wrote Patient Twenty-Five a prescription for a 30-day supply of estradiol 1 mg tablets.

314. The purpose is for transitioning or facilitating the transition of their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

315. Patient Twenty-Five filled the prescription on December 28, 2023 and January 24, 2024 at a pharmacy located in McLennan County, Texas. The prescriptions were paid by Texas Medicaid.

Patient Twenty-Six

316. Lau identifies Patient Twenty-Six as a biological female.

317. On October 26, 2023, Texas Medicaid paid a claim for Patient Twenty-Six's outpatient telemedicine visit with Lau under the principal diagnosis code R59.1 (Generalized enlarged lymph nodes), with additional diagnoses of F64.9 (Gender identity disorder, unspecified), E34.9 (Endocrine disorder, unspecified), and F41.9 (Anxiety disorder, unspecified).

318. The same day, Lau wrote Patient Twenty-Six a prescription for a 21-day supply of testosterone cypionate 200 mg/ml.

319. The purpose is for transitioning or facilitating the transition of their biological sex or affirming their belief that their gender identity is inconsistent with their biological sex.

320. Patient Twenty-Six filled the prescription on October 26, 2023, at a pharmacy located in Taylor County, Texas. The prescription was paid by Texas Medicaid.

321. Lau knowingly made or caused to be made false statements or misrepresentations of material fact concerning her compliance with SB-14 and the patients' diagnoses, which

permitted UT Southwestern and Children's to receive payment from Texas Medicaid that was not authorized.

322. She also knowingly concealed or failed to disclose information concerning these claims, *i.e.* her compliance with SB-14 and the patients' actual diagnoses, which permitted UT Southwestern and Children's to receive payment from Medicaid that was not authorized. Finally, Lau made, caused to be made, induced, or sought to induce the making of a false statement or misrepresentation of material fact by UT Southwestern and Children's concerning information about these claims that is required to be provided by state law, rule, regulation, or the provider agreement, namely their compliance with applicable law and regulation and the veracity of the patients' diagnoses.

323. Texas Medicaid paid these claims on the assumption that the claims were lawful, but in fact, they were transgender medical interventions billed covertly billed to Texas taxpayers.

XII. APPLICATION FOR TEMPORARY AND PERMANENT INJUNCTIONS

324. Texas incorporates and adopts by reference the allegations contained in each and every preceding paragraph of this Petition.

325. Texas has reason to believe that Lau is engaging in, has engaged in, or is about to engage in acts and practices declared to be unlawful under Tex. Health & Safety Code § 161.702(3), Tex. Bus. & Com. Code §§ 17. 46(a), (b)(5), (24), and Texas Hum. Res. Code § 36.002(1), (2), (4)(b) and believes these proceedings to be in the public interest.

326. Texas is entitled to, and seeks, temporary and permanent injunctions pursuant to Tex. Health and Safety Code § 161.702, Tex. Bus. & Com. Code § 17.47, and Tex. Hum. Res. Code § 36.051.

327. Cessation of unlawful conduct by Lau shall not render such court action moot under any circumstances. Tex. Bus. & Com. Code § 17.47.

328. Immediate injunctive relief is necessary to prevent continuing harm prior to trial.

329. In addition to the above-requested relief, pursuant to Tex. Civ. Prac. Rem. Code § 65.011 *et seq.* and Tex. R. Civ. P. 680, to preserve the status quo pending a full trial on the merits, *see Butnaru v. Ford Motor Co.*, 84 S.W.3d 198, 204 (Tex. 2002), the State of Texas requests a temporary injunction against Lau that enjoins her from the following until final resolution of this matter:

- i. Prescribing or facilitating the prescription of puberty blockers and testosterone or estrogen to minors for the purposes of transitioning the minor's biological sex or affirming the minor's belief that their gender identity or sex is inconsistent with their biological sex;
- ii. Deceptively misleading pharmacies, insurance providers, and/or the patients as to the correct medical diagnosis by writing prescriptions and billing for treatments to transition a child's biological sex under false diagnoses, such as endocrine disorder, unspecified, rather than gender dysphoria (or other similarly related diagnosis); and,
- iii. Billing or facilitating the billing to a Texas health care program, including Texas Medicaid, for (a) procedures, services, or treatments that violate Tex. Health & Safety Code § 161.702 and § 161.704, including testosterone and estrogen prescriptions for minors, (b) procedures, services, or treatments for gender-transition purposes that are not reimbursable under the Texas Medicaid Provider Procedures Manual, and (c) procedures, services, or treatments for gender-transition purposes billed under false or misrepresentative diagnosis codes, including billing gender transition claims under E34.9 (Endocrine disorder, unspecified).

XIII. PRAYER FOR RELIEF

330. NOW THEREFORE Texas prays that Lau be cited to appear and that after due notice and hearing, a temporary injunction be issued, and that upon final hearing a permanent injunction be issued, restraining and enjoining Lau and all persons in active concert or participation with her, who receive actual notice of the injunction by personal service or otherwise from engaging

in unlawful acts under the THFPA, Tex. Hum. Res. Code § 36.002(1), (2), (4)(b), and from engaging in false, misleading or deceptive acts and practices declared to be unlawful by Tex. Health and Safety Code §§ 161.702, Tex. Bus. & Com. Code § 17. 46(a), (b)(5), (24), including but not limited to:

- i. Prescribing or facilitating the provision of supraphysiologic doses of testosterone and estrogen to minors for the purpose of transitioning their biological sex;
- ii. Deceptively misleading pharmacies, insurance providers, and/or the patients as to the correct medical diagnosis by writing prescriptions and billing for treatments to transition a child's biological sex under false diagnoses, such as endocrine disorder, unspecified, rather than gender dysphoria (or other similarly related diagnosis); and,
- iii. Billing or facilitating the billing to any Texas health care program, including Texas Medicaid, for (a) procedures, services, or treatments that violate Tex. Health & Safety Code § 161.702 or § 161.704, including testosterone and estrogen prescriptions for minors for gender-transition purposes, (b) procedures, services, or treatments for gender-transition purposes that are not reimbursable under the Texas Medicaid Provider Procedures Manual, and (c) procedures, services, or treatments for gender-transition purposes that are billed using false or misrepresentative diagnosis codes, including billing gender-transition claims under E34.9 (Endocrine disorder, unspecified).

331. TEXAS FURTHER PRAYS that upon final hearing, this Court order:

- i. Adjudge against Lau civil penalties in favor of the State in the amount of not more than \$10,000 per violation of Tex. Bus. & Com. Code § 17. 46(a), (b)(5), (24);
- ii. Adjudge against Lau under the THFPA
 - a. The value of any payments or the value of any monetary or in-kind benefits provided under a Texas health care program, including Medicaid, directly or indirectly, as a result of Lau's unlawful acts, including any payment made to a third party;
 - b. Interest on the value in (ii)(a);
 - c. For each unlawful act Lau committed, civil penalties in an amount not less than \$5,500.00 or more than \$11,000.00 or the maximum amount imposed by 31 U.S.C. § 3729(a), if that amount exceeds \$15,000; and,
 - d. Two times the value in (ii)(a);

- iii. Order Lau to pay Texas's attorneys' fees and costs of court pursuant to Tex. Gov't Code § 402.006(c) and Tex. Hum. Res. Code § 36.007;
- iv. Order Lau to pay both pre-judgment ad post-judgment interest on all money awards as provided by law; and
- v. Grant all other and further relief Texas may show itself entitled to.

Respectfully submitted,

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ATTORNEYS FOR TEXAS

CERTIFICATE OF SERVICE

I hereby certify that on the 5th day of December 2025, a copy of the foregoing document was served to all counsel of record in accordance with the Texas Rules of Civil Procedure.

/s/ Andrea C. Haim
Andrea C. Haim
Assistant Attorney General

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Pauline Sisson on behalf of Jacob Przada

Bar No. 24125371

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Envelope ID: 108800959

Filing Code Description: Amended Petition

Filing Description: Plaintiff's Third Amended Petition and Request for Injunctive Relief

Status as of 12/9/2025 9:07 AM CST

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Filing Code Description: Amended Petition

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