

STOP SUBSIDIZING EVIL: SEX OFFENDERS ON MEDICAID AND OBAMACARE

Brittany Madni, Executive Vice President
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Background

Currently, registered sex offenders are eligible for taxpayer-funded health care through Medicaid and Obamacare. Obamacare plans are subsidized by the Premium Tax Credit (PTC), which was supersized by [Biden's COVID Credits](#).

There are approximately 800,000 [registered](#) sex offenders nationwide, [94%](#) of whom are men. Unfortunately, these individuals demonstrably have no morals and can take advantage of woke ideology to access more victims.

To worsen matters, registered sex offenders are able to use their Medicaid and PTCs/COVID Credit-plus ups to pay for gender transitions on the taxpayers' dime. In other words, taxpayers are paying sex offenders to "transition" and expand their hunting ground with added legal protections – for the bad guys.

Evil on Display

It is becoming all too commonplace for state and local jurisdictions to allow biological men who identify as transgender to access women's and girls' private spaces such as locker rooms, pool shower areas, and bathrooms. This is particularly concerning related to single-gendered spaces in schools.

Countless times, parents have [raised the alarm](#) that these policies endanger all children and put women and girls in particular at risk of males who have nefarious intentions. There concerns were minimized and dismissed by President Biden and Congressional Democrats, who continue to [push for full access](#) based on "gender identity" claims.

Now, [the worst has happened](#) in Northern Virginia's D.C. suburbs, where a registered sex offender [exposed](#) himself – proving his biological male status – to women and girls at parks, pools, schools, and recreational centers across Fairfax and Arlington Counties. In spite of his biology and registered sex offender status, Fairfax County [refused to arrest](#) the man on the basis of being a protected transgender person.

According to the Fairfax County Chief of Police: "On November 3, 2024, he was in a shower, in a locker room... the policy of Parks and Rec allowed him and other persons...to use the locker room of the gender that they identify with, so a crime was not committed,

so he was not arrested by Fairfax County police officers.” Evidently, the county did not consider a registered sex offender violating his restriction on being at a children’s facility and indecent exposure by masturbating in front of little girls a crime.

This individual is eligible for – and very well may already receive – taxpayer-funded health care benefits to advance his transgender claims and give him even more unacceptable access to girls.

Taxpayer-Funded “Gender Affirming Care”

Both Medicaid and PTCs/COVID Credits through Obamacare plans cover “gender affirming care,” or gender transition-related therapies, hormones, surgeries, and related medical procedures. While there is some state-by-state variation, there is no federal ban on adults using taxpayer-funded health care benefits for transgender medical services.

There is likewise [no ban](#) on registered sex offenders or other convicted felons accessing the full spectrum of covered services on these plans. In fact, there is even a 60-day [Special Enrollment Period after release](#) from incarceration to ensure felons, including sex offenders, have access to taxpayer-funded health insurance.

Obamacare Subsidies & Biden’s COVID Credits

Obamacare [Premium Tax Credits](#) are subsidies transmitted directly from the Treasury to health insurance companies for the purpose of reducing premium costs for eligible enrollees in Obamacare marketplace plans. Original PTCs are [available](#) to those between 100 and 400 percent of the federal poverty line. The subsidy amount is based on the cost of a [benchmark plan](#) against a sliding income scale. Registered sex offenders between 100 and 400 percent of the federal poverty line would be able to qualify for this subsidy and use it for transgender care.

Biden’s COVID Credits [expanded PTCs](#) to increase the size of the premium subsidy amount and the number of people who qualify for the program. Under the COVID Credits, caps were removed on the PTCs, shifting benefits up the income scale to include households earning more than \$500,000 per year. These [expanded credits](#) mean fully subsidized Obamacare plans for 9 million individuals (42% of exchange enrollees). Thus, even wealthy registered sex offenders are eligible for subsidized health care, including transgender treatments, under this program at the expense of taxpayers.

The [largest insurance provider](#) in the Obamacare marketplace is Centene, with about 18 percent of the market share and [3.9 million](#) enrollees across [29 states](#). [According](#) to the Centene Corporation, gender affirming procedures are to be treated as “medically necessary” and therefore covered under one of their listed 149 separate billing codes.

The majority of gender-transition surgeries are done through “private” insurance, which includes marketplace plans.

Medicaid

Medicaid is a federal program administered by the states to provide health care coverage for low income Americans. The Affordable Care Act massively expanded the program far beyond its original intent.

While a few states restrict Medicaid coverage of some or all gender transition procedures and care, most do not. Approximately 276,000 transgender individuals are enrolled in Medicaid. This does not include individuals who have not already proclaimed their transgender identities.

Unfortunately, some men who would seek to abuse this woke policy will not make the claim until after they are confronted with the opportunity to abuse the system and enter private female spaces, as with the case in Virginia. In Virginia, Medicaid covers extensive services related to “gender dysphoria” for transgender enrollees. It would be tragic if Medicaid provided a way for abusers to further their false claims of a “right” to be in female spaces.

This makes it difficult to distinguish from Medicaid transgender care claims for those who have criminal intent from those who do not. Instead, it would be prudent to review uptake of Medicaid by registered sex offenders with a history of malfeasance and potentially limit their benefits altogether.

Likely Uptake

There are at least 800,000 registered sex offenders in the United States, although the “the actual figures could be much higher” due to under- and delayed reporting.

These convicted criminals are eligible for Medicaid, Obamacare PTCs, and Biden’s COVID Credits just like any other individual, but they have a higher likelihood of using the programs. This is because registered sex offenders have a well-documented likelihood of lower incomes and difficulty maintaining employment as a consequence of their criminal actions.

The UCLA School of Law Williams Institute found in a study of LGBTQ sex offenders: “Most people had lost a job due to being on the registry, and almost a third were denied a promotion.” The liberal Williams Institute also found in a 2022 report that 42 percent of all registered sex offenders were below 200 percent of the federal poverty line. For context, only about 26 percent of the total U.S. population is below 200 percent of the federal poverty line.

With lower income rates comes greater population eligibility for and utilization of Medicaid, PTCs, and COVID Credits. As such, the registered sex offender population of 800,000 criminals likely makes up a disproportionate share of taxpayer-funded health care beneficiaries. Therefore, they are also a more likely population to have access to government-subsidized or sponsored gender transition care.

Policy Options for Congress

Congress has several policy options for addressing this issue. Some of them are offered below, many of which could be combined or stacked.

Preventing Taxpayer-Funded Transgender Care for Sex Offenders

On Obamacare/COVID Credits:

1. *Remove eligibility for health insurance companies to receive PTCs paid out from the government to subsidize registered sex offenders.*
2. *Remove eligibility for health insurance companies to receive PTCs for plans that cover “gender affirming care.”*
3. *Allow the Biden COVID Credits to expire entirely to prevent enhanced access to these services on top of the regular Obamacare standard. This would need to be done in concert with limitations on the underlying PTCs related to registered sex offenders and transgender care.*

On Medicaid:

1. *Restrict Medicaid coverage for “gender affirming care” to either eliminate those services for all Medicaid enrollees or prohibit registered sex offenders from receiving them.*
2. *Remove registered sex offenders from Medicaid entirely.*

More Data Is Needed

In addition to the above, lawmakers may see the value in gathering additional information and reporting on this matter.

Congress could introduce legislation directing the Government Accountability Office (GAO), working alongside the Centers for Medicare & Medicaid Services and the U.S. Department of Justice (DOJ), to conduct a study. GAO’s report to Congress could assess how much spending so far has been spent from Medicaid on “gender affirming care.” This could be broken down by adult versus minor enrollees, type of service provided, and location of care. If the data provided in the study goes back a decade, Congress could then track this trend and establish if there are any corollary policies to review.

Congress could likewise direct the DOJ to produce a study on the uptake of various taxpayer-funded welfare programs by registered sex offenders. This should include Medicaid and Obamacare subsidies, but could also be expanded to shed light on sex offenders' access to and use of other welfare programs such as Food Stamps.

Similar study could be directed related to plans available in the Obamacare marketplace, although that data is likely more difficult to access and assess given the involvement of private insurance companies.

Saving Costs and Children

While there is not yet a Congressional Budget Office (CBO) cost estimate for each of the policy options outlined here, they would certainly all yield savings.

The House-passed version of the One Big Beautiful Bill would have eliminated Medicaid coverage for gender affirming care if enacted. CBO estimated that policy to yield approximately \$2.6 billion in savings over the budget window. Clearly, removing these medical procedures produces a decrease in outlays.

Congress should legislate to remove taxpayer funding for health care from registered sex offenders, particularly to prevent them from using woke transgender ideology to access even more victims. Lawmakers should also reevaluate the entire Obamacare PTC system to reduce wasteful spending and allows the Biden COVID Credits to expire at the end of the year.

The fiscally and morally responsible action to take is to stop subsidizing evil.