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Attorneys for Plaintiff/Petitioner Alec Esquivel

IN THE CIRCUIT COURT FOR THE STATE OF OREGON FOR MARION COUNTY

ALEC ESQUIVEL,
Plaintiff/Petitioner,

vs.

STATE OF OREGON, by and through
the **OREGON JUDICIAL**
DEPARTMENT, COURT OF
APPEALS, and by and through the
PUBLIC EMPLOYEES' BENEFIT
BOARD,

Defendant,

and

PUBLIC EMPLOYEES' BENEFIT
BOARD,

Respondent.

CASE NO. 11C17487

AMENDED COMPLAINT

(Violation of O.R.S. 659A.030 and O.R.S. 174.100(6) - Discrimination on the Basis of Gender Identity; Judicial Review of PEBB Order)

NOT SUBJECT TO
MANDATORY ARBITRATION

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Plaintiff/Petitioner alleges as follows:

1.

This case is about a State of Oregon employee whom the State of Oregon categorically excludes from employee health insurance coverage for medically necessary care because of his gender identity, where the State of Oregon routinely insures the same medical care for employees based on other reasons of medical necessity. The State of Oregon, through its Insurance Division of the Oregon Department of Consumer & Business Services, already has taken the position that private insurers violate state antidiscrimination law in these circumstances, and Plaintiff/Petitioner seeks redress for the same discrimination as a State of Oregon employee.

2.

At all material times, Plaintiff/Petitioner Alec Esquivel was and is a resident of the County of Multnomah and the State of Oregon. Jurisdiction is proper in this Court pursuant to O.R.S. § 14.030 because the Court has jurisdiction of the parties, and pursuant to O.R.S. § 183.484 for judicial review of a final decision of Respondent Public Employees' Benefit Board. Venue is proper pursuant to O.R.S. § 14.060 because the cause of the suit arose in Marion County, where Alec Esquivel was and still is employed.

**First Claim for Relief
Against Defendant State of Oregon
(Violation of O.R.S. § 659A.030(1)(b); O.R.S. § 174.100(6)
Gender Identity Discrimination)**

3.

Plaintiff/Petitioner's first claim for relief, alleging employment discrimination pursuant to O.R.S. § 659A.030 and O.R.S. § 174.100(6), is against the State of Oregon. At all material times, the State of Oregon was and still is Plaintiff/Petitioner's employer, as evidenced in part by the fact that Plaintiff/Petitioner receives his paychecks from the "State of Oregon."

4.

The State of Oregon has and continues to discriminate as an employer against

1 Plaintiff/Petitioner by acting through the Oregon Judicial Department, Court of Appeals
2 (“OJD”) and the Public Employees’ Benefit Board (“PEBB”).

3 5.

4 Through OJD, the State of Oregon maintains the Court of Appeals that is
5 Plaintiff/Petitioner’s workplace.

6 6.

7 Through PEBB, the State of Oregon administers state employee health insurance plans by
8 selecting, negotiating the terms of, and contracting for such plans. Pursuant to O.R.S. § 243.135,
9 the State of Oregon, through PEBB, must contract for health insurance plans best designed to
10 meet the needs and provide for the welfare of eligible employees and the state, and must place an
11 emphasis on, *inter alia*, employer flexibility in plan design and contracting, plan benefits as part
12 of total employee compensation, and the improvement of employee health.

13 7.

14 As described herein, the State of Oregon bears responsibility for discriminating as an employer
15 against Plaintiff/Petitioner through both OJD and PEBB. Plaintiff/Petitioner refers hereafter to
16 Defendant State of Oregon, and its actions as an employer through OJD and PEBB, as the
17 “State” or “Defendant.”

18 8.

19 On or about August 15, 2009, Alec Esquivel began employment with the State as a Law Clerk
20 for OJD at the Court of Appeals. In this capacity, Alec Esquivel has and continues to work for
21 the State in Marion County.

22 9.

23 Alec Esquivel’s work has been, and continues to be, well-received and Alec Esquivel is a valued
24 employee of the State.

25 10.

26 As compensation for, and as a term, condition or privilege of employment, the State provides to

1 employees, including Alec Esquivel, the opportunity to participate in one of several health
2 insurance plans, including the self-insured “Statewide Plan” (Group #108601) for State
3 employees administered by Providence Health Plans (“Providence”) on behalf of the State, (“the
4 Plan”). Because the Plan is self-insured, the State retains control over developing, formalizing
5 through contract, and administering the terms under which particular types of medical care will,
6 and will not be, insured through the Plan.

7 11.

8 Alec Esquivel enrolled for, and began receiving health coverage through the Plan as soon as it
9 became available on January 1, 2010. He continues to receive insurance coverage through the
10 Plan.

11 12.

12 Gender identity is a deeply-rooted, internal psychological identification as male or female.
13 Contemporary medical knowledge, and the consensus among experts in the field, indicates that
14 gender identity cannot be changed, and that attempts to change a person’s gender identity are
15 futile and unethical.

16 13.

17 Although Alec Esquivel was assigned the sex of female at birth, he has a strong, consistent and
18 deeply-rooted male gender identity.

19 14.

20 In 2001, Alec Esquivel was diagnosed with Gender Identity Disorder (“GID”), sometimes known
21 as gender dysphoria or transsexualism.

22 15.

23 GID is a recognized, serious medical condition identified in the American Psychiatric
24 Association’s *Diagnostic and Statistical Manual of Mental Disorders* (4th ed. Text Revision
25 2000) (“DSM-IV”).
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16.

The DSM-IV’s diagnostic criteria for GID include a strong and consistent cross-gender identification and a persistent discomfort with one’s anatomical sex, causing clinically significant distress or impairment.

17.

The World Professional Association for Transgender Health (“WPATH”) is the leading professional association for surgeons, doctors, medical researchers and others who specialize in the medical treatment of people with GID.

18.

Based on decades of clinical experience and research, WPATH has promulgated medical standards of care for treating patients with GID.

19.

The WPATH Standards of Care for Gender Identity Disorders (“Standards of Care”) recognize that treatment is medically necessary for most people with GID. The Standards of Care provide for an individualized assessment of medically necessary treatment for GID. The components of treatment may include the administration of hormone therapy; the “real-life experience” (living full-time presenting in the gender corresponding with the person’s gender identity); and sex reassignment surgery.

20.

WPATH has issued clarifying guidance to confirm that the professional consensus about the psychiatric, psychological, medical and surgical management of GID is that, for some transgender individuals, a “complete hysterectomy” (including removal of the uterus, fallopian tubes, cervix, and ovaries) is a medically necessary sex reassignment surgery, and in those circumstances, the surgery cannot be understood as cosmetic, elective or optional.

21.

Alec Esquivel’s doctors have confirmed that a hysterectomy and oophorectomy (removal of

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ovaries) are medically necessary for him to reduce harmful health risks he has suffered and will continue to suffer in the absence of the procedure, and to align his body with his deep-seated gender identity as a male.

22.

After Alec Esquivel was diagnosed with GID in 2001, he began receiving medically necessary treatment to help him transition to the sex consistent with his gender identity, in accordance with the WPATH Standards of Care. Alec Esquivel underwent a bilateral mastectomy procedure, and as an ongoing part of his treatment, Alec Esquivel receives hormone replacement therapy (“HRT”) in the form of weekly injections of the masculinizing hormone, testosterone. HRT often is medically necessary for an individual with GID to live successfully in accordance with his or her gender identity, and is a critical part of Alec Esquivel’s gender expression as a male. Alec Esquivel has consistently lived as a man since he started his transition in 2001.

23.

Between 2001 and 2010, Alec Esquivel wished to continue his full transition with a hysterectomy and oophorectomy, but he was unable to pay for it.

24.

Throughout this period, Alec Esquivel experienced increasing anxiety, distress, and loss of sleep from the incongruity between his deeply felt gender identity, which was now fully outwardly expressed as male, and his internal female reproductive organs. In addition to this psychological distress, the annual gynecological exams he had to endure caused Alec Esquivel severe discomfort and emotional pain.

25.

On February 19, 2010, Alec Esquivel had a medical appointment with Dr. Carol Blenning, a family practice physician, at the Oregon Health & Science University, Family Medicine at Richmond clinic. Dr. Blenning examined Alec Esquivel and concluded that a hysterectomy and oophorectomy were medically indicated and are medically necessary treatments for his GID.

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26.

Dr. Blenning indicated that these procedures are medically necessary for several reasons, including to prevent a serious risk of ovarian and uterine cancer. Additionally, because ovaries produce estrogen, Alec Esquivel must receive elevated doses of testosterone for the HRT to have an adequately masculinizing effect. These elevated doses carry health risks, including but not limited to high blood pressure, high cholesterol and potential liver conditions. Dr. Blenning concluded that an oophorectomy is medically necessary to allow Alec Esquivel to reduce his testosterone dosage and thereby reduce the health risks of maintaining a higher dose.

27.

Removal of the female reproductive organs also is very important for Alec Esquivel’s overall mental and physical health because continuing to live with organs that are not aligned with his gender identity causes psychological distress, in addition to necessitating annual exams that are extremely physically uncomfortable, painful and difficult for him.

28.

Dr. Blenning referred Alec Esquivel to Dr. Elizabeth Newhall, a prominent obstetrician and gynecologist in Portland to perform the hysterectomy and oophorectomy surgery.

29.

On April 26, 2010, Dr. Newhall examined Alec Esquivel and formulated a surgical plan. Dr. Newhall then submitted a request for insurance coverage to the State, through its third-party administrator Providence. She indicated through codes on the request form that the procedures were required for reasons related to Alec Esquivel’s gender identity.

30.

In a letter dated June 21, 2010, the State denied the request for coverage through correspondence from its third-party administrator, Providence, stating, “[s]ervices related to a sex-change operation, including evaluation, surgery and follow-up services are not a covered benefit of your plan.”

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31.

The Plan’s Member Handbook, adopted on January 2, 2010, states on page forty-three that the Plan categorically excludes “all Services related to sexual disorders or dysfunctions regardless of gender, including all Services related to a sex-change operation, including evaluation, surgery and follow-up Services.” The Plan’s current Member Handbook, which revises the Plan’s coverage effective April 1, 2011, contains an identical categorical exclusion of coverage.

32.

Two other health plans are available to full-time State employees such as Alec Esquivel, including a Kaiser Permanente HMO Full-Time Plan and a Providence Choice Plan. Both plans contain a similar exclusion of medical treatment related to one’s gender identity. Alec Esquivel thus has no health insurance option through his employer that allows non-discriminatory access to his medically necessary hysterectomy and oophorectomy procedures.

33.

The State routinely insures medically necessary hysterectomy and oophorectomy procedures sought by other State employees when they are indicated for reasons other than participants’ gender identity.

34.

In a letter dated December 21, 2010 upholding the denial of insurance coverage to Alec Esquivel, Providence confirmed on behalf of the State that “[a] hysterectomy is covered for treatment of a uterine leiomyoma; recurrent abnormal uterine bleeding refractory to medical therapy or surgical intervention; incapacitating dysmenorrhea or pelvic pain refractory to medical management; endometriosis; pelvic inflammatory disease, cancer in situ, adenocarcinoma; in conjunction with a vaginal repair of cystocele, rectocele or enterocele; or symptomatic uterine prolapsed.”

35.

The same letter verified that the denial of coverage to Alec Esquivel is based on the blanket

1 restriction of coverage for medically necessary treatment related to one’s gender identity, and
2 thus is because of Alec Esquivel’s gender identity. The letter stated that the “primary reason for
3 [Alec Esquivel’s] hysterectomy and bilateral oophorectomy [is] for the purpose of completing
4 the transition to a male gender and not for any of the reasons outlined above,” and thus the
5 requested procedures fall within the Plan’s exclusion.

6 36.

7 Since 2007, Oregon law has prohibited discrimination in the terms of employment, including
8 employee health insurance coverage, based on gender identity. O.R.S. § 659A.030(b); O.R.S. §
9 174.100(6). Alec Esquivel requested insurance coverage for procedures that are routinely
10 covered for other Plan participants. The only factor that distinguishes Alec Esquivel from others
11 who receive this coverage is that Alec Esquivel requires the care based on his gender identity.

12 37.

13 The hysterectomy and oophorectomy procedures that are medically necessary for some
14 transgender individuals based on their gender identity, including Alec Esquivel, are not different
15 in any material way from the hysterectomy and oophorectomy procedures necessary to treat the
16 conditions confirmed as covered in the State’s December 21, 2010 letter.

17 38.

18 Aside from the discriminatory, blanket exclusion for health care based on gender identity in the
19 Plan, the procedures Alec Esquivel seeks would qualify for coverage under the terms of the Plan.
20 The Plan covers “medically necessary” care, and Alec Esquivel’s hysterectomy and
21 oophorectomy procedures fall within the guidelines in Section 3.6 of the Plan’s Member
22 Handbook for such care, including the following:

23 38.1 “All medical Services that are appropriate and necessary for the diagnosis and
24 treatment of symptoms, illness, disease, injury or condition that is harmful or threatening to Your
25 life or health;”
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38.2 “Services that are within the standard of good medical practice within the organized medical community;”

38.3 “Services at the most appropriate level that can safely be provided;”

38.4 Services that are not “primarily for Your convenience or the convenience of Your Provider, Hospital, or any other health care provider” (such as staying “an extra day in the Hospital only because the relative who will help You during recovery cannot pick You up until the next morning”).

39.

The Plan further defines “Medically Necessary” care in Section 15 to include the following:

39.1 The Service is medically indicated according to the following factors:

- A. The Service is necessary to diagnose or to meet the reasonable health needs of the Member;
- B. The expected health benefits from the Service are clinically significant and exceed the expected health risks by a significant margin;
- C. The Service is of demonstrable value, and that value is superior to other Services and to the provision of no Services; and
- D. Expected health benefits can include:
 - i. Increased life expectancy;
 - ii. Improved functional capacity;
 - iii. Prevention of complications; or
 - iv. Relief of pain.

39.2 The Qualified Practitioner recommends the Service.

39.3 The Service is rendered in the most cost-efficient manner and type of setting consistent with nationally recognized standards of care, with consideration for potential benefits and harms to the patient.

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39.4 The Service is consistent in type, frequency and duration with scientifically based guidelines of national medical, research, or health care coverage organizations or governmental agencies that are accepted by the Plan.

40.

The hysterectomy and oophorectomy procedures requested by Alec Esquivel are medically necessary within the Plan’s definition.

40.1 They are appropriate and necessary to reduce the serious health risks of ovarian and uterine cancer associated with Alec Esquivel’s continuing to have female sex organs, including a uterus and ovaries, while receiving ongoing HRT, and the significant health risks associated with the elevated testosterone doses Alec Esquivel must take while still living with a uterus and ovaries, including but not limited to high blood pressure, high cholesterol and potential liver conditions.

40.2 These expected health benefits are clinically significant and significantly exceed the minimal risks involved in a hysterectomy and oophorectomy procedure.

40.3 Hysterectomy and oophorectomy procedures are within the standard of good medical practice within the organized medical community, as recognized by WPATH’s clarifying guidance to its authoritative and definitive Standards of Care, which confirms the nationally recognized standards of care and professional consensus that for some transgender individuals a hysterectomy and oophorectomy are medically necessary procedures for the treatment of GID.

40.4 The same guidance clarifies that the procedures cannot be understood in these circumstances as cosmetic, elective or optional, and thus the procedures are not primarily for Alec Esquivel’s convenience.

40.5 As a qualified practitioner, Dr. Blenning recommended this treatment, consistent with the scientifically based guidelines for such care. Alec Esquivel’s request to have the

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procedures performed by a qualified surgeon such as Dr. Newhall are at the most appropriate and cost-efficient level that safely can be provided.

41.

Alec Esquivel appealed the Plan’s denial of coverage to the Providence Health Plans Appeals and Grievance Department on December 15, 2010 and again on February 2, 2011, and then appealed to the Plan’s Grievance Committee on April 4, 2011, in accordance with the Plan’s specified appeal procedures. Each of these appeals was denied.

42.

The last of these denials was made in a letter from the Grievance Committee dated April 29, 2011. The letter stated that it was the “final” decision of the Plan.

43.

The State’s repeated, considered, and knowing decisions to deny him the same benefits and privileges of employment that it provides to other State employees, solely on the basis of his gender identity, caused Alec Esquivel further emotional distress, anxiety, and loss of sleep.

44.

On February 15, 2011, Alec Esquivel filed an employment discrimination complaint with the Bureau of Labor and Industries (“BOLI”) against, *inter alia*, the State. On June 10, 2011 Alec Esquivel withdrew from that administrative process and timely filed this complaint within 90 days of BOLI’s mailing of a 90-day notice.

45.

Alec Esquivel duly complied in a timely manner with the notice requirements of the Oregon Tort Claims Act by sending a notice of his claims against the State, which was received by the State on December 16, 2010, within the required 180 day period. O.R.S. § 30.275.

**First Claim For Relief, Count One
Disparate Treatment**

Alec Esquivel realleges the allegations set forth in paragraphs 1 through 45 above and incorporates them by reference as if fully set forth herein.

46.

The State has been continuously discriminating against, and continues to discriminate against, Alec Esquivel in compensation and in the terms, conditions or privileges of his employment because of his gender identity by excluding him from insurance coverage for care that is routinely provided to other Plan participants, solely on the basis of Alec Esquivel’s gender identity. The Plan’s blanket exclusion of gender identity-related care denies to a specific, targeted group the care that is uniquely required by those, such as Alec Esquivel, whose “gender identity, appearance, expression or behavior differs from that traditionally associated with the individual’s sex at birth.” O.R.S. § 174.100(6).

47.

The continuing failure of the State to cover Alec Esquivel’s medically necessary procedure, despite full knowledge of these actions and their basis, is intentional disparate treatment based on gender identity, in violation of O.R.S. § 659A.030(1)(b) and O.R.S. § 174.100(6).

48.

As a result of the State’s discriminatory denial of insurance coverage, Alec Esquivel has suffered and will suffer in the future economic losses because of increased health care costs. The amount of these losses are unknown at this time and this Complaint will be amended before trial to set forth the amounts.

49.

As a result of the State’s failure to cover his medically necessary procedures, Alec Esquivel has suffered adverse health effects and adverse health risks. As a further result of the State’s discrimination Alec Esquivel has suffered emotional distress, loss of dignity, anxiety,

1 humiliation, and loss of enjoyment of life. These adverse consequences entitle Alec Esquivel to
2 an award of compensatory damages in the amount of \$250,000.

3 50.

4 As a result of the State’s discriminatory actions, Alec Esquivel is entitled to an award of his
5 reasonable attorney fees and costs pursuant to O.R.S. § 659A.885.

6 **First Claim for Relief, Count Two**
7 **Disparate Impact**

8 Alec Esquivel realleges the allegations set forth in paragraphs 1 through 50 above and
9 incorporates them by reference as if fully set forth herein.

10 51.

11 The State’s exclusion from coverage for “all Services related to sexual disorders or dysfunctions
12 regardless of gender, including all Services related to a sex-change operation, including
13 evaluation, surgery and follow-up Services” has a disparate impact on transgender employees
14 such as Alec Esquivel because it has the effect of denying medically necessary care to
15 transgender employees at a significantly higher rate than non-transgender employees.
16 Transgender employees therefore do not enjoy the same privileges of employment that other
17 state employees receive.

18 52.

19 As a result of the State’s discriminatory denial of insurance coverage, Alec Esquivel has suffered
20 and will suffer in the future economic losses because of increased health care costs. The amount
21 of these losses are unknown at this time and this Complaint will be amended before trial to set
22 forth the amounts.

23 53.

24 As a result of the State’s failure to cover his medically necessary procedures, Alec Esquivel has
25 suffered adverse health effects and adverse health risks. As a further result of the State’s
26 discrimination Alec Esquivel has suffered emotional distress, loss of dignity, anxiety,

1 humiliation, and loss of enjoyment of life. These adverse consequences entitle Alec Esquivel to
2 an award of compensatory damages in the amount of \$250,000.

3 54.

4 As a result of the State’s discriminatory actions, Alec Esquivel is entitled to an award of his
5 reasonable attorney fees and costs pursuant to O.R.S. § 659A.885.

6 **Second Claim for Relief**
7 **Against Respondent Public Employees’ Benefit Board**
8 **(Judicial Review of Order of PEBB)**

9 Alec Esquivel realleges the allegations set forth in paragraphs 1 through 54 above and
10 incorporates them by reference as if fully set forth herein.

11 55.

12 The final decision of PEBB’s Grievance Committee to uphold the denial of coverage to Alec
13 Esquivel based on his gender identity, reflected in the April 29, 2011 correspondence from
14 PEBB’s Grievance Committee described above, constitutes a final order (“Order”).

15 56.

16 Alec Esquivel has filed this petition in the Circuit Court of Marion County within sixty days of
17 the date of service of the Order, to obtain judicial review of the Order pursuant to O.R.S. §
18 183.484.

19 57.

20 Alec Esquivel duly complied in a timely manner with the notice requirements of the Oregon Tort
21 Claims Act by sending a notice of his claims against PEBB, which was received by the State on
22 December 16, 2010, within the required 180 day period. O.R.S. § 30.275. The State has
23 knowingly and intentionally ratified its actions by and through PEBB by, for example, sending a
24 responsive letter to Alec Esquivel dated January 26, 2011 finding “[n]o liability” on the part of
25 the State and denying Alec Esquivel’s claims.

26 58.

Alec Esquivel sought, and through PEBB’s Order has been denied, insurance coverage for a

1 medically necessary hysterectomy and oophorectomy for treatment of his gender identity,
2 procedures that are routinely provided for other medically necessary reasons.

3 59.

4 As a subdivision of the State, exercising its authority on behalf of the State, PEBB and
5 the State are indivisible. Because PEBB's actions are in fact those of the State acting by
6 and through the agency, PEBB shares the same liability for the State's violation of O.R.S.
7 § 659A.030 as described above.

8 60.

9 In the alternative, PEBB has acted and continues to act as the agent of the State in denying Alec
10 Esquivel's request for coverage, and the State is liable for that denial. The State has the right to
11 control PEBB's performance of its duties because the State acts by and through PEBB. In
12 particular, the State has the right to control the conduct that forms the basis of this complaint
13 because the State's own actions, by and through PEBB, give the State control over whether the
14 State's self-insured health plan discriminatorily denies coverage to those who need it for medical
15 care based on their gender identity, while extending the same coverage to others who need the
16 same medical care for reasons not related to their gender identity. The State authorizes and
17 intends that PEBB act on the State's behalf with respect to the discriminatory denial of coverage
18 challenged here because the State has given PEBB exclusive authority to select, contract for,
19 adopt and administer health plans pursuant to O.R.S. § 243.061 *et seq.*, including the Plan that
20 refuses Alec Esquivel coverage.

21 61.

22 PEBB acted without a reasonable basis in fact or in law in making its Order. Its Order is in
23 violation of O.R.S. § 659A.030 in that it effectuates discrimination on the basis of gender
24 identity on behalf of the State as an employer.

25 62.

26 As a result of PEBB's discriminatory denial of insurance coverage, Alec Esquivel has suffered

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and will suffer in the future economic losses because of increased health care costs. The amount of these losses are unknown at this time and this Complaint will be amended before trial to set forth the amounts.

63.

As a result of PEBB’s failure to cover his medically necessary procedures, Alec Esquivel has suffered adverse health effects and adverse health risks. As a further result of PEBB’s discrimination Alec Esquivel has suffered emotional distress, loss of dignity, anxiety, humiliation, and loss of enjoyment of life. These adverse consequences entitle Alec Esquivel to an award of compensatory damages in the amount of \$250,000.

64.

As a result of PEBB’s discriminatory actions Alec Esquivel is entitled to an award of his reasonable attorney fees and costs pursuant to O.R.S § 183.497.

WHEREFORE, Plaintiff/Petitioner Alec Esquivel prays for judgment in his favor and against Defendant State of Oregon, by and through the Oregon Judicial Department, Court of Appeals and by and through the Public Employees’ Benefit Board, and against Respondent Public Employees’ Benefit Board, to include the following relief:

1. With respect to the First and Second Claims for Relief, an order finding and declaring that the Defendant’s and Respondent’s courses of conduct, policies and practices as described herein were unauthorized by law and violate O.R.S. § 659A.030(1)(b) and O.R.S. § 174.100(6), in that the courses of conduct, policies and practices discriminated against Alec Esquivel in his employment on the basis of his gender identity.
2. With respect to the First Claim for Relief, injunctive and all such other equitable relief to which Alec Esquivel is entitled, including, but not limited to: an order directing the State of Oregon and all of its agencies, boards, officials and

1 employees who are engaged in the discrimination to cease all discriminatory
2 practices, and to provide employment health insurance that covers the same
3 medical care for employees based on their gender identity that is covered for
4 employees based on other underlying medical reasons;

- 5 3. An order awarding Alec Esquivel compensatory damages in the amount of
6 \$250,000; and
- 7 4. An order directing the State to pay Alec Esquivel costs and reasonable attorney
8 fees pursuant to O.R.S. § 659A.885(1) and O.R.S § 183.497.
- 9 5. Such other relief as the Court may deem just and equitable.

10 DATED this _____ day of August, 2011.

11
12 LAMBDA LEGAL DEFENSE AND EDUCATION
13 FUND, INC.

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