

Trans Healthcare Maryland

because you shouldn't have to know more than your doctor.

SUPPORT SB 738

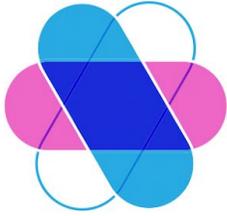
February 25, 2020

Health Care Providers and Health Benefit Plans - Discrimination in Provision of Services

Esteemed chair, vice chair, and members of the Health and Government Operations Committee. My name is Lee Blinder and I am the executive director of Trans Healthcare MD. We're an organization devoted to the wellbeing of transgender persons in the state of Maryland. For the last 2 years we have gathered stories of the treatment of our community members in health care facilities, currently not protected by the Fairness for All Marylanders Act of 2014 which added gender identity protections in places of public accommodation. Because there are no federal protections for gender identity, Marylanders are protected only when we codify those protections in our home state.

Our organization's membership of over 600 trans Marylanders has supported one another through many situations around accessing basic health care. From routine insurance denials for hormone replacement therapy, a lifesaving medical approach that some transgender persons need, to medically necessary surgery denials by insurance, the stories we hear are powerful reminders of the hierarchies of access, particularly for those who cannot cash pay for healthcare. Ensuring rules are in place to prohibit discrimination on the basis of gender identity would positively impact transgender Marylander's lives. I have spoken with several transgender men who have seen an endocrinologist in Baltimore who demands to inspect their genitals yearly, which is not part of any routine exam for an endocrinologist. Endocrinologists treat the endocrine system and provision hormone replacement therapy, this is unrelated to anyone's genitals. These exams are medically unnecessary, and cause the patient much anxiety. This provider even forced such an exam on one patient, refusing to allow the patient to deny the exam in order to be treated for their endocrine system disorder.

I am insured via the Maryland Health Connection, and I personally experience denials by my insurance plan regularly when I am attempting to fill my prescription for hormone replacement therapy, which is a medically necessary and lifesaving medication. I am lucky enough to see an experienced provider now whose office has enough staff to successfully appeal those denials, but many of my fellow community members aren't so lucky. I also was regularly misgendered by my former provider based in Montgomery County, and that provider made many excuses for why this kept occurring, without correcting the behavior. It made going to the doctor an



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exhausting and negative experience. I educate for a living, but it's impossible to educate when the other party isn't willing to learn.

For these reasons and more I ask the committee to provide a favorable report on SB 738.
Thank you.

Lee Blinder

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