

I am writing in opposition to SB 460, “Maryland Medical Assistance Program — Gender Affirming Treatment (Transgender Health Equity Act)” for the following reasons:

- Maryland Medicaid already covers a long list of gender-affirming treatments for those over the age of 18, including hormone replacement therapy and gender reassignment surgery.
- The proposed bill does not specify any age restrictions, so teenagers whose brains are not developed enough to make life-altering decisions would be allowed to undergo radical surgeries and hormone treatments.
- “Gender-affirmation” approaches ignore other co-morbidities, such as depression and anxiety. Many also suffer from adversity or traumatic childhood events. For decades, “watchful waiting” and/or psychotherapy successfully addressed children’s gender dysphoria. In up to 88% of these situations, the child’s gender dysphoria resolved by puberty.*
- The fact that sex is imprinted on the every cell in a person’s body and cannot change. Therefore, the NIH requires its 80,000 research grant applicants to account for sex as a biological variable in all animal and human studies. Men and women respond differently to medications and have differing susceptibilities to illnesses, including heart disease, cancer, depression and anxiety.
- In 2019, a transgender man admitted to an emergency room with severe abdominal pain was assessed as a man, therefore missing the fact that “he” was actually a woman in late-stage labor. The result was the stillbirth of a human child that might have been saved but for the hospital staff conforming to gender identity politics. Imagine the anguish felt by the staff who made that mistake.
- Most of the treatments proposed in the bill are of a cosmetic nature and would add a large expense to the Maryland taxpayer. According to the bill’s Fiscal and Policy Note, cost estimates per person could exceed \$50,000.
- One of the benefits in the bill would be coverage for fertility preservation, which are not covered by Medicaid even for cancer patients. Passage of the bill would most likely lead to large numbers of residents lobbying for fertility preservation for any reason, further increasing costs to the Maryland taxpayer.

For all of these reasons, I ask for an unfavorable report on this bill. Thank you.

*Singh, D., Bradley, S.J., & Zucker, K.J. (2021). A Follow-Up Study of Boys With Gender Identity Disorder. *Frontiers in psychiatry*.