

Testimony in Support of HB 283
Maryland Medical Assistance Program – Gender-Affirming Treatment
Trans Health Equity Act of 2023
Health and Government Operations Committee
February 14, 2023

Ren DeBrosse
Baltimore City, District 40

Chair Peña-Melnyk and Members of the Committee,

My position is FAVORABLE for HB238 to be heard by the House Health and Government Operations committee on February 14th, 2023. My name is Ren DeBrosse and I am a resident of District 40. I am also a third-year medical student at the Johns Hopkins University School of Medicine, a researcher in patient-centered care with a focus on transgender and gender diverse people's needs, and queer person. My views and words are my own and do not reflect the views of the Johns Hopkins University School of Medicine.

In my clinical experience working with transgender and gender diverse people, I have led focus groups with at least 2 dozen trans people, all who had different goals for their gender expression and many of whom required medical support to meet those goals. Among necessary medical support, procedure-based therapies such as laser hair removal, top and bottom surgery, and facial feminization surgery come up frequently. All patients that have wanted these procedures done and received them that I have spoken with have felt better afterwards than they did pre-procedure, and folks often share that they face less discrimination at work and in the world as they are able to get procedures that help their body to align with their identity. I have seen the peace and wellbeing that being able to get the procedure brings to a person.

The Trans Health Equity Act (THEA) addresses a critical gap in the healthcare of transgender Marylanders by ensuring Medicaid coverage for gender-affirming healthcare. While top and bottom surgery are covered under Maryland's current Medicaid plans, these are not the only procedures that patients need, and they are sometimes less prioritized by the patient than procedures that are currently not covered, such as hair removal or electrolysis, facial feminization surgery or tracheal shave. In fact, the National Transgender Survey in 2015 found that 95% of transgender women and 67% of non-binary respondents assigned male on their original birth certificate surveyed wanted hair removal one day or had already have it. Furthermore, surgeries that have been historically deemed "aesthetic" are in reality life-saving-trans folks have the highest rates of suicide of any gender group in the US, and being able to access procedures that help to relieve gender dysphoria can protect against suicide.

To support HB283 is to uphold key principles of biomedical ethics: autonomy, beneficence, and justice. Covering gender-affirming procedures beyond top and bottom surgery in the Maryland Medical Assistance Program is critical to access to this life-saving care and the of ability transgender and gender diverse Marylanders to choose the right medical care for themselves.

I strongly urge you to support HB283.

Thank you for your consideration,

Ren DeBrosse

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