

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

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Baltimore/Baltimore City

Chair Peña-Melnik and Members of the Committee,

Thank you for the chance to testify in support of House Bill 283. My name is Diane Jung. I am a resident of District 7. I am submitting this testimony in support of HB 283, the Trans Health Equity Act, which would expand Maryland Medicaid to cover lifesaving gender-affirming care.

The Trans Health Equity Act (THEA) addresses a critical gap in the healthcare of transgender Marylanders by ensuring Medicaid coverage for gender-affirming healthcare. Currently, Maryland Medicaid excludes many gender-affirming procedures. There is consensus in the medical community that these procedures are medically necessary and reduce suicide, abuse, discrimination, and harassment. THEA is a low-cost solution that improves the quality of life of trans Marylanders, brings Maryland Medicaid into compliance with federal law, and meets current medical standards.

I believe that HB 283 is important because receipt of gender-affirming care, including puberty blockers and gender-affirming hormones, is associated with 60% lower odds of moderate or severe depression and 73% lower odds of suicidality over a 12-month follow-up. (Tordoff et al. Mental Health Outcomes in Transgender and Nonbinary Youths Receiving Gender-Affirming Care. JAMA Netw Open. 2022;5(2):e220978. doi:10.1001/jamanetworkopen.2022.0978). Hormone therapy was associated with increased QOL, decreased depression, and decreased anxiety (Baker, K. E. et al. J. Endocr. Soc. 5, bvab011 (2021).). TGD people with a history of gender-affirming surgery had significantly lower odds of past-month psychological distress, past-year tobacco smoking, and past-year suicidal ideation compared with TGD people with no history of gender-affirming surgery (Almazan, A. N. et al. JAMA Surg. 156, 611–618 (2021).) As a Johns Hopkins medical student, I have witnessed many patients who suffer from severe depression and suicidal ideation because they cannot afford gender affirming care. HB 283 is critical to the well being of these patients. The views expressed here are my own and do not necessarily reflect the policies or positions of Johns Hopkins University and Medicine, although I am pleased to note that Johns Hopkins does officially support this legislation.

Please do what you can to support this community/fix this issue.
I strongly urge you to support HB 283.

Thank you for your consideration,

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