
Planned Parenthood of Maryland

February 14, 2024

The Honorable Pamela Beidle
Chair, Senate Finance Committee
3 East Miller Senate Office Building
11 Bladen St
Annapolis, Maryland 21401

Dear Chair Beidle:

My name is Stephanie Purnell, and I'm writing in my capacity as a staff physician at Planned Parenthood of Maryland in strong favor of Senate Bill 119 - Legally Protected Health Care - Gender-Affirming Treatment. This bill will protect providers, patients, and support networks for gender affirming care from out-of-state criminal or civil liability.

I entered the medical profession for numerous reasons, but primary among those is my knowledge and experience as a Black woman navigating a health system whose structures are just now catching up to the idea that Black women exist. I know what it means to be an "other" in my field, and I want to push back on that for my patients.

When I specialized in reproductive health, I knew there would be external barriers—barriers outside the standard bureaucracy of the health care delivery system. But I was grateful, upon graduating Howard University Medical School, to become a provider of sexual and reproductive health care for organizations that practiced in Maryland. The Maryland General Assembly has long been a staunch protector of reproductive health care, including abortion, for a generation now.

But today, when I head into patient appointments, I am still not fully protected from outside political forces. In addition to abortion care, vasectomies, and other reproductive health care, I am also a provider of gender affirming care.

In Fiscal Year 2023, PPM had nearly 1,000 gender affirming hormone therapy patient visits. FY 2024 is on pace for similar numbers. And in my experience, those visits are met with excitement from the patient. There is joy in the appointment, as patients access medical care crucial to their identity as human beings. Writing prescriptions for hormones that help my patients be authentic to themselves is one of the best parts of my day.

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But that joy is not total. Last year, the General Assembly protected the abortion care I provide to patients. But until those protections are extended to my role as a provider of gender affirming care, neither my patients nor I are truly protected.

I became a doctor to provide care to my patients. The health care decisions my patients make in consultation with me and their support networks are not the business of legislators or attorneys general from other states.

Maryland needs to protect my transgender patients, and all transgender people who come to Maryland for our top-of-the-line care. In addition, Maryland needs to protect my fellow providers and me, who have always practiced consistent with Maryland law. Adding Gender Affirming Treatment to the definition of legally protected health care does that. For the foregoing reasons, I urge a favorable report on SB 119.

Sincerely,
Stephanie Purnell, MD, MPH
Staff Physician