

BILL: HOUSE BILL 1399  
TITLE: Health Occupations – Cross-Sex Hormone Therapy for Minors – Prohibition  
(Protect the Kids Act)  
DATE: March 11, 2025  
POSITION: UNFAVORABLE  
COMMITTEE: House Health & Government Operations

Dear Chair Pena-Melnyk, Vice Chair Cullison, and members of the Health and Government Operations Committee,

My name is Kathy Tomaszewski, and I am a longtime resident of District 12A. I am submitting testimony in opposition to HB1399.

During my 36-year career as a pediatric nurse, I had the great honor of caring for many of the state's vulnerable children and adolescents. One highlight of my career was joining my colleagues in formalizing the ongoing work we were doing with sexual and gender minority youth in 2017. I served as the Adolescent Nurse Coordinator for the Emerge Gender & Sexuality Clinic for Children, Adolescents and Young Adults, the pediatric arm of Johns Hopkins Center for Transgender Health, until my retirement in August 2021.

Our multidisciplinary team of physicians, nurses, social work, psychologists and psychiatrists could provide assessment, treatment, and referrals based on the patient's stage of development and desires. Families are central to the care of all pediatric patients and our clinic was structured to provide resources and support. Hormone-related therapy was only initiated when a minor's parent/guardian completed informed consent and a thorough psychological evaluation was conducted. Evidence-based guidelines for the medical care of our transgender, gender non-binary, and non-conforming patients came from the Standards of Care for the World Professional Association for Transgender Health (WPATH) and the Endocrine Society.

As the nurse coordinator, I completed the intakes and was the point of contact for anxious patients and families who had often searched for years to find care. Our referrals grew exponentially as the community came to know us, and it was heartbreaking to convey that our limited staffing meant an appointment might not be available for several months. Desperate parents would sometimes literally beg to be seen as quickly as possible, fearing for the safety and well-being of their child.

I also had the great fortune of working directly with the families as they came into our clinic - hearing about the patient's journey of self-discovery and acceptance, providing education, and administering prescribed treatments such as puberty-blockers, cross-hormone therapies, and medications to manage menstruation. The day we could initiate hormonal therapy was celebrated by patients as the next step in their journey, to the point of wanting photos or videos

to commemorate the joyful occasion. I never ceased to be humbled by the bravery, resilience, and fortitude of our patients and families.

Healthcare providers and researchers agree that hormonal therapies are crucial to the safe, comprehensive care of transgender and gender-minority youth. We need to support the training and expertise of providers who provide such specialized care. Restricting access to the appropriate use of puberty-blockers and cross-hormones for minors will have a chilling and life-threatening effect on our patients' long-term physical and mental health. Puberty blockers allow time and space for adolescent patients to explore their identity. Forcing them to wait until 18 years, the age of majority, means all the secondary sex characteristics will be in place that provoke severe mental health outcomes in folks whose physical traits do not align with their gender identity. This marginalized group is already at risk for suicide, anxiety, depression, bullying, homelessness, and other health disparities. Removing these medical tools and threatening skilled healthcare practitioners with felonies is a cruel and discriminatory rule that is not in the best interests of patients, parents, and practitioners. For these reasons, **I respectfully urge this committee to return an UNFAVORABLE report on HB1399.**

Respectfully,

Kathy Tomaszewski  
5153 Bonnie Acres Dr.  
Ellicott City, MD 21043