



**House Bill 1399**  
**Health Occupations - Cross Sex Hormone Therapy for Minors - Prohibition**  
**March 11, 2025**  
**Unfavorable**

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

The Trans Rights Advocacy Coalition (TRAC) is a Maryland-led group of organizations, health care providers, and advocates seeking to improve the wellbeing of transgender Marylanders and ensure health equity across the state. TRAC has led legislative efforts to enact bills to provide and protect gender-affirming care in Maryland. These bills, along with Governor Moore's executive order declaring Maryland a Trans Sanctuary State, demonstrate clear support for the health and well being of transgender Marylanders.

TRAC **strongly opposes HB 1399** which would reverse well established medical practice by banning gender affirming care for transgender youth, effectively allowing legislators to dictate medical care for discriminatory political purposes. ***It is inappropriate for legislators to interfere with medical care decisions between families and their doctors.*** HB 1399 is inaccurate and contrary to medical research supported by all medical organizations.<sup>1</sup> Most significantly, this dangerous bill would critically harm young transgender Marylanders by denying them life saving care.

The medical community has well developed gender affirming care (GAC) standards based on decades long research.<sup>234</sup> The language used in HB 1399 is inaccurate and political. The DSM-5

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<sup>1</sup> A4TE [Medical Organization Statements](#)

<sup>2</sup> [Standards of Care for the Health of Transgender and Gender Diverse People. Version 8](#)

<sup>3</sup> T. Zachary Huit, Claire Coyne, Diane Chen, [State of the Science: Gender-Affirming Care for Transgender and Gender Diverse Youth, Behavior Therapy](#), Volume 55, Issue 6, 2024, Pages 1335-1347, ISSN 0005-7894, <https://doi.org/10.1016/j.beth.2024.02.010>.

<sup>4</sup> [Gender Affirming Care Is Evidence Based for Transgender and Gender-Diverse Youth](#) Budge, Stephanie L. et al. Journal of Adolescent Health, December 2024, Volume 75, Issue 6, 851 - 853



states that “gender nonconformity” is not a mental disorder.<sup>5</sup> The medical community does not refer to puberty blockers or hormone therapy as “cross-sex hormones” or “cross-sex hormone therapy” as defined in the bill. The inaccurate language also fails to take into account care for intersex youth.

GAC includes many social and environmental changes, such as hairstyle, clothing, names, and pronouns that align with their preferred gender.<sup>6</sup> Long before medicine is prescribed, medical professionals provide therapeutic care.<sup>78</sup> If a doctor prescribes hormones or puberty blockers, it is with caregiver involvement and based on well founded scientific research.<sup>910</sup>

All major medical associations support GAC, including the American Medical Association, the American Psychological Association, the American Academy of Pediatrics, the American Academy of Child & Adolescent Psychiatry, and the Yale School of Medicine, who together represent over 1.3 million US doctors.<sup>1112</sup> The consensus is that GAC is safe and medically necessary, and that puberty blockers are reversible.<sup>1314</sup>

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<sup>5</sup> American Psychiatric Association [Gender Dysphoria Diagnosis Guide](#)

<sup>6</sup> [KFF/Washington Post Trans Survey](#) March 24, 2023

<sup>7</sup> [Gender-Affirming Medications Among Transgender Adolescents in the US, 2018-2022](#) Landon D. Hughes, PhD<sup>1</sup>; Brittany M. Charlton, ScD<sup>2</sup>; Isa Berzansky, MSc<sup>2</sup>; *et al* Jae D. Corman, PhD<sup>3</sup> *JAMA Pediatr.* 2025;179(3):342-344. doi:10.1001/jamapediatrics.2024.6081

<sup>8</sup> [Few Transgender Minors Receive Gender Affirming Care](#) Medicines NPR January 26, 2025

<sup>9</sup> Rafferty, Jason, et al. “[Ensuring Comprehensive Care and Support for Transgender and Gender-Diverse Children and Adolescents](#).” *Pediatrics*, vol. 142, no. 4, Oct. 2018, p. e20182162. DOI.org (Crossref), <https://doi.org/10.1542/peds.2018-2162>.

<sup>10</sup> Hembree, Wylie C., et al. “[Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society\\* Clinical Practice Guideline](#).” *The Journal of Clinical Endocrinology & Metabolism*, vol. 102, no. 11, Nov. 2017, pp. 3869–903. DOI.org (Crossref), <https://doi.org/10.1210/je.2017-01658>.

<sup>11</sup> A4TE [Medical Organization Statements](#)

<sup>12</sup> HRC [Get the Facts on Gender Affirming Care](#)

<sup>13</sup> Thornton P, Silverman LA, Geffner ME, Neely EK, Gould E, Danoff TM. Review of outcomes after cessation of gonadotropin-releasing hormone agonist treatment of girls with precocious puberty. *Pediatr Endocrinol Rev.* 2014 Mar;11(3):306-17. PMID: 24719967.

<sup>14</sup> de Nie I, Mulder CL, Meißner A, Schut Y, Holleman EM, van der Sluis WB, Hannema SE, den Heijer M, Huirne J, van Pelt AMM, van Mello NM. Histological study on the influence of puberty suppression and hormonal treatment on developing germ cells in transgender women. *Hum Reprod.* 2022 Jan 28;37(2):297-308. doi: 10.1093/humrep/deab240. PMID: 34791270; PMCID: PMC8804334.



Research unequivocally shows GAC reduces depression and suicidal ideation in transgender and nonbinary youth.<sup>1516</sup> A 2020 study found that when youth have access puberty blockers, they have lower odds of lifetime suicidal ideation.<sup>17</sup> Another study found that trans adolescents without puberty blockers have worse psychological well being than their peers, but after puberty blockers, they have similar or better psychological well being than their non-transgender peers.<sup>18</sup> Withholding GAC causes harm and some pediatricians suggest that prohibiting GAC should be considered a form of child maltreatment.<sup>19</sup>

Transgender and nonbinary youth in Maryland are harmed by the hostile environment created by legislators who target them.<sup>20</sup> It's essential for the health and well being of 8,000 transgender and nonbinary young Marylanders, and their families, that gender affirming care is protected from political attacks.<sup>21</sup> **The Trans Rights Advocacy Coalition strongly urges an unfavorable report on HB 1399.**

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<sup>15</sup> [Association of Gender-Affirming Hormone Therapy With Depression, Thoughts of Suicide, and Attempted Suicide Among Transgender and Nonbinary Youth](#) Green, Amy E. et al. Journal of Adolescent Health, 2020, Volume 70, Issue 4, 643 - 649

<sup>16</sup> Tordoff DM, Wanta JW, Collin A, Stepney C, Inwards-Breland DJ, Ahrens K. 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;

<https://jamanetwork.com/journals/jamanetworkopen/fullarticle/2789423>

<sup>17</sup> Pubertal Suppression for Transgender Youth and Risk of Suicidal Ideation Jack L. Turban, MD, MHS; Dana King, ALM; Jeremi M. Carswell, MD; Alex S. Keuroghlian, MD, MPH *Pediatrics* (2020) 145 (2): e20191725. <https://doi.org/10.1542/peds.2019-1725>

<sup>18</sup> Anna I.R. van der Miesen, Thomas D. Steensma, Annelou L.C. de Vries, Henny Bos, Arne Popma, [Psychological Functioning in Transgender Adolescents Before and After Gender-Affirmative Care Compared With Cisgender General Population Peers](#), Journal of Adolescent Health, Volume 66, Issue 6, 2020, Pages 699-704, ISSN 1054-139X, <https://doi.org/10.1016/j.jadohealth.2019.12.018>.

<sup>19</sup> Emily Georges, Emily C.B. Brown, Rachel Silliman Cohen; [Prohibition of Gender-Affirming Care as a Form of Child Maltreatment: Reframing the Discussion](#). *Pediatrics* January 2024; 153 (1): e2023064292. 10.1542/peds.2023-064292

<sup>20</sup> 2024 Trevor Project [US National Survey on the Mental Health of LGBTQ+ Young People](#)

<sup>21</sup> Herman, J.L., Flores, A.R., O'Neill, K.K. (2022). [How Many Adults and Youth Identify as Transgender in the United States?](#) The Williams Institute, UCLA School of Law