

HB 1380 - Health Insurance - Prescriptions for Gender-Affirming Care and Hormone Therapy - Coverage and Dispensing Requirements- In Support (FAV)

Lindsay Slawson, 509 Logan Street, Frederick MD, 21701, 240-344-6224

Members of the committee, my name is Lindsay Slawson and I am a resident of Frederick, MD. HB 1380 would impact myself and my family in a positive way. In January of 2014 I was diagnosed with papillary thyroid cancer. In March of that year I had my whole thyroid removed, along with half of my parathyroid and several of my lymphnodes. I take two different types of synthetic thyroid hormones a T3 medication and T4 medication. Without these medications, my body would slowly shut down. I have experienced going without my medication before. Not quite a year ago, my endocrinologist stopped taking my insurance. And I was unable to get a new prescription for my medication. During that time, I experienced hypothyroidism induced depression, in addition to tiredness, temperature sensitivity, weight gain, elevated cortisol levels, high blood pressure, and high cholesterol. These are not all of the symptoms but just the ones that impacted me the most. It felt like my body was betraying me because it would not do or work in the way it was supposed to. I am still recovering from that period of three months when I did not have my medication. My current doctor has informed me that it will probably be another year until I am back to normal. If I had an annual supply for my medication, I would have been able to stay on my medication until I had been established with a new endocrinologist. Getting established with a new doctor took most of the three months (when I was without medication), because I needed a primary care physician appointment for a referral and then the wait for availability for a new patient appointment with the new endocrinologist. The lack of medication changed the way I engaged with my friends and family. I have two children and because of the depression and fatigue that I experienced, I lost precious time in my children's childhood. I am not the only person in my family who has had thyroid issues though I am the only one without one anymore. My Mother and her sister who also live in Maryland both have hypothyroidism, and I know with their fixed incomes having access to an annual supply of this medication would be beneficial for their planning. I also have two sisters who are on other hormone medications. Before their dosage was established and had access to the medication, their mental health was terrible. They were in therapy they took anxiety and depression medications. That medication never seemed to work. When the eldest of my younger sisters started her hormone treatments within three months, she was no longer on anxiety or depression medications. She was someone who would loathe going outside and socializing. Now she is a social butterfly, and she lives with her loving boyfriend. Our youngest sister started a similar medication regimen to our middle sister about six months after she found success. She too is no longer on depression or anxiety medication. She is the most doting of aunts to my children and looks for joy in her day-to-day life. The security of having an annual supply of our prescribed gender-affirming care and hormone therapy would

give us peace of mind that our medication is available. This way we can truly thrive instead of just getting by and because of this I hope you have a favorable opinion of HB 1380.