

Bill: HB 1380 (Health Insurance - Prescriptions for Gender-Affirming Care and Hormone Therapy - Coverage and Dispensing Requirements)

Position: Favorable

Committee: Health

Hearing Date: 13 March 2026

Chair Bagnall and Members of the Committee,

My name is Mayday Lowry, and I am a resident of Baltimore, and a constituent of Delegate Rosenberg, living in district 41. I am writing to urge a favorable report on House Bill 1380.

I am a transgender woman and a disabled veteran. After 7 years, I was forcibly discharged from active duty in the United States Air Force. Before being discharged; the endocrinologist for all trans related care at Walter Reed military medical facility was able to prescribe a maximum total amount of 3 months of medicine in an effort to stock-pile and buy his patients some time to find a new provider for these essential medications. After this final prescription, no refills, he was quickly forced to retired.

As an honorably discharged veteran, it's been difficult to switch to a civilian provider because of the personal expense, and the 3 year long history of care. On 17 MAR 2025 the Veteran's Administration announced that it would be phasing out treatments for gender dysphoria unless: "Such Veterans are already receiving such care from VA, or such Veterans were receiving such care from the military as part of and upon their separation from military service and they are eligible for VA health care."

Due to this policy and the finality of my treatment plan at Walter Reed; it took far too long to see a VA medical doctor, I also had to convince them I was receiving treatment before separation. The medicine wasn't enough and I had to pay-out-of-pocket to see a civilian. The purpose of HB1380 is clear, this bill would enable peace of mind and compassionate care to patients who need it. A 12-month supply would help protect trans people when the federal government is looking to erase us.

The next time the federal government disproportionately attack gender-affirming care for trans people this bill would give enough medication for transgender Maryland citizens to figure out what to do next. On a day-to-day basis the provision of a 12-month supply also eases the burden on overbooked-understaffed clinics and pharmacies, and aids in the issue of transportation for the disabled by cutting down the amount of appointment/pharmacy trips required in a year.

To give HB 1380 a favorable report is to endorse evidence-based science and psychological care. In quoting the American Psychological Association, "APA is deeply concerned about federal actions that not only challenge the scientific understanding of gender identity but also potentially jeopardize the human rights, psychological health, and well-being of transgender and nonbinary individuals. These policy changes create significant challenges for both the individuals affected and the psychologists who serve these communities".

Thank you for your time and care in this issue,

Mayday Lowry