$\begin{array}{c} \rm 2lr2126 \\ \rm CF~HB~746 \end{array}$

By: Senators Washington, Waldstreicher, Smith, Hettleman, Pinsky, Augustine, Kramer, Lee, King, Lam, Elfreth, and Hayes

Introduced and read first time: February 4, 2022

Assigned to: Finance

A BILL ENTITLED

1	AN ACT concerning					
2	·					
3	(Trans Health Equity Act of 2022)					
4	FOR the purpose of requiring, beginning on a certain date, the Maryland Medical					
5	Assistance Program to provide gender-affirming treatment; prohibiting the Program					
6	from issuing an adverse benefit determination related to gender-affirming					
7	treatment unless a health care provider with experience prescribing or delivering					
8	gender-affirming treatment has reviewed and confirmed the appropriateness of the					
9	determination; and generally relating to gender-affirming treatment and the					
10	Maryland Medical Assistance Program.					
11	BY repealing and reenacting, without amendments,					
12						
13	Section 15–103(a)(1)					
14	Annotated Code of Maryland					
15	(2019 Replacement Volume and 2021 Supplement)					
16	BY repealing and reenacting, with amendments,					
17	Article – Health – General					
18	Section 15–103(a)(2)(xvi) and (xvii)					
19	Annotated Code of Maryland					
20	(2019 Replacement Volume and 2021 Supplement)					
21	BY adding to					
22	Article – Health – General					
23	Section 15–103(a)(2)(xviii) and 15–150					
24	Annotated Code of Maryland					
25	(2019 Replacement Volume and 2021 Supplement)					



SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, 1 2 That the Laws of Maryland read as follows: 3 Article - Health - General 4 15–103. 5 The Secretary shall administer the Maryland Medical Assistance (1) (a) 6 Program. 7 (2) The Program: 8 (xvi) Beginning on January 1, 2021, shall provide, subject to the limitations of the State budget and § 15-855(b)(2) of the Insurance Article, and as permitted 9 by federal law, services for pediatric autoimmune neuropsychiatric disorders associated 10 with streptococcal infections and pediatric acute onset neuropsychiatric syndrome, 11 12 including the use of intravenous immunoglobulin therapy, for eligible Program recipients, 13 if pediatric autoimmune neuropsychiatric disorders associated with streptococcal infections 14 and pediatric acute onset neuropsychiatric syndrome are coded for billing and diagnosis purposes in accordance with § 15–855(d) of the Insurance Article; [and] 15 16 (xvii) Beginning on January 1, 2022, may not include, subject to federal 17 approval and limitations of the State budget, a frequency limitation on covered dental 18 prophylaxis care or oral health exams that requires the dental prophylaxis care or oral health exams to be provided at an interval greater than 120 days within a plan year; AND 19 20 (XVIII) BEGINNING ON JANUARY 1, 2023, SHALL PROVIDE GENDER-AFFIRMING TREATMENT IN ACCORDANCE WITH § 15-150 OF THIS 2122 SUBTITLE. 23 **15–150.** 24(A) **(1)** IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS 25INDICATED. 26**(2) (I)** "GENDER-AFFIRMING TREATMENT" **MEANS** ANY 27 MEDICALLY NECESSARY TREATMENT CONSISTENT WITH CURRENT CLINICAL 28 STANDARDS OF CARE PRESCRIBED BY A LICENSED HEALTH CARE PROVIDER FOR THE TREATMENT OF A CONDITION RELATED TO THE INDIVIDUAL'S GENDER 29

31 (II) "GENDER-AFFIRMING TREATMENT" INCLUDES:

32 1. HORMONE THERAPY, HORMONE BLOCKERS, AND

33 PUBERTY BLOCKERS:

IDENTITY.

30

- 2. 1 HAIR ALTERATION FOR THE PURPOSES OF ALTERING
- 2SECONDARY SEX CHARACTERISTICS AND SURGICAL SITE PREPARATION, INCLUDING
- 3 ELECTROLYSIS, LASER HAIR REMOVAL, HAIRPLASTY, HAIR TRANSPLANTATION, AND
- MEDICAL TATTOOING FOR HAIR RECONSTRUCTION AND APPEARANCE OF SCAR; 4
- 5 3. LARYNGOPLASTY, VOICE MODIFICATION SURGERY,
- 6 **VOICE THERAPY, AND VOICE LESSONS;**
- 7 ALTERATIONS TO ABDOMEN, CHEST, TRUNK, AND
- BUTTOCKS, INCLUDING ABDOMINOPLASTY, MASTECTOMY, BREAST REDUCTION AND 8
- 9 PROCEDURES, MASTOPEXY, **NIPPLE AUGMENTATION** AND
- 10 RECONSTRUCTION, LIPOSUCTION, EXCISION OF **EXCESSIVE** SKIN **AND**
- SUBCUTANEOUS TISSUE, PANNICULECTOMY, AUTOLOGOUS FAT GRAFTING, 11
- 12 PHOSPHATIDYLCHOLINE AND DEOXYCHOLATE LIPOLYTIC INTERVENTIONS,
- 13 PLACEMENT OF HIP AND OTHER IMPLANTS, AND MEDICAL TATTOOING FOR NIPPLE
- 14 RECONSTRUCTION AND APPEARANCE OF SCAR;
- **5.** SURGERY TO THE FACE AND NECK, INCLUDING 15
- FACIAL BONE RECONSTRUCTION, FACIAL BONE REMODELING, GENIOPLASTY, 16
- 17 **MANDIBULAR ANGLE** AUGMENTATION/CREATION/REDUCTION,
- LATERAL 18 RECONTOURING, CANTHOPEXY, LYSIS INTRANASAL SYNECHIA,
- 19 SEPTOPLASTY, **ORTHOGNATHIC** SURGERY, TRANSORAL
- 20 OSTEOPLASTY, PLACEMENT OF IMPLANTS TO THE CHEEK, FOREHEAD, CHIN, NOSE,
- JAW, AND LARYNGEAL PROMINENCE, BLEPHAROPLASTY, BROW LIFT, COLLAGEN 21
- 22INJECTIONS, INJECTION OF HYALURONIC ACID BASED SEMIPERMANENT
- 23MATERIALS. AUTOLOGOUS **FAT** GRAFTING, PHOSPHATIDYLCHOLINE

DEOXYCHOLATE LIPOLYTIC INTERVENTIONS, FACE AND FOREHEAD LIFTS,

- 25RHYTIDECTOMY, NECK TIGHTENING, LIP REDUCTION AND ENHANCEMENT, THYROID
- 26 CHONDROPLASTY, TRACHEAL SHAVE, REMOVAL \mathbf{OF} REDUNDANT SKIN,
- RHINOPLASTY, AND MEDICAL TATTOOING FOR LIP RECONSTRUCTION AND 27
- 28 APPEARANCE OF SCAR;

24

- 29 6. SURGERY **GENITALS** TO THE AND GONADS,
- 30 **INCLUDING** CLITOROPLASTY, COLOVAGINOPLASTY, GLANSPLASTY,
- 31 LABIAPLASTY, **AUTOLOGOUS FAT** GRAFTING, HYSTERECTOMY,
- 32 PHOSPHATIDYLCHOLINE AND DEOXYCHOLATE LIPOLYTIC INTERVENTIONS,
- 33 MEDICAL TATTOOING FOR GLANS RECONSTRUCTION AND APPEARANCE OF SCAR,
- 34 METOIDIOPLASTY, OOPHORECTOMY, ORCHIECTOMY, OVARIECTOMY, PENECTOMY,
- PHALLOPLASTY, PLACEMENT OF A TESTICULAR PROSTHESIS AND PENILE 35 36 **PROSTHESIS** SALPINGECTOMY, SALPINGO-OOPHORECTOMY, SCROTECTOMY,
- SCROTOPLASTY, URETHROPLASTY, VAGINECTOMY, VAGINOPLASTY, VULVECTOMY, 37
- 38 AND VULVOPLASTY;

1	7.	LASER	TREATMENT	FOR	SCARS	FROM

- 2 GENDER-AFFIRMING TREATMENT;
- 3 8. STANDARD FERTILITY PRESERVATION PROCEDURES,
- 4 AS SET FORTH IN § 15–810.1 OF THE INSURANCE ARTICLE;
- 9. REVISIONS TO PREVIOUS TREATMENTS AND
- 6 REVERSAL OF TREATMENTS;
- 7 10. COMBINATIONS OF GENDER-AFFIRMING
- 8 PROCEDURES; AND
- 9 11. OTHER TREATMENTS AS PRESCRIBED TO SUPPRESS
- 10 THE DEVELOPMENT OF ENDOGENOUS SECONDARY SEX CHARACTERISTICS, ALIGN
- 11 THE INDIVIDUAL'S APPEARANCE OR PHYSICAL BODY WITH GENDER IDENTITY, AND
- 12 ALLEVIATE SYMPTOMS OF CLINICALLY SIGNIFICANT DISTRESS RESULTING FROM
- 13 GENDER DYSPHORIA.
- 14 (III) "GENDER-AFFIRMING TREATMENT" MAY:
- 1. Include treatment described in the current
- 16 CLINICAL STANDARDS OF CARE FOR GENDER-AFFIRMING TREATMENT PUBLISHED
- 17 BY THE WORLD PROFESSIONAL ASSOCIATION FOR TRANSGENDER HEALTH; AND
- 18 2. BE PRESCRIBED TO TRANSGENDER, NONBINARY,
- 19 INTERSEX, TWO SPIRIT, AND OTHER GENDER DIVERSE INDIVIDUALS.
- 20 (3) "GENDER IDENTITY" HAS THE MEANING STATED IN § 20–101 OF
- 21 THE STATE GOVERNMENT ARTICLE.
- 22 (B) (1) THE PROGRAM SHALL PROVIDE COVERAGE FOR
- 23 MEDICALLY NECESSARY GENDER-AFFIRMING TREATMENT IN A
- 24 NONDISCRIMINATORY MANNER.
- 25 (2) THE GENDER-AFFIRMING TREATMENT SHALL BE ASSESSED
- 26 ACCORDING TO NONDISCRIMINATORY CRITERIA THAT ARE CONSISTENT WITH
- 27 CURRENT CLINICAL STANDARDS OF CARE.
- 28 (3) THE PROGRAM MAY NOT DENY OR LIMIT COVERAGE FOR
- 29 GENDER-AFFIRMING TREATMENT WHEN THAT TREATMENT IS:

$\frac{1}{2}$	(I) PRESCRIBED TO A PROGRAM RECIPIENT BECAUSE OF RELATED TO, OR CONSISTENT WITH THE RECIPIENT'S GENDER IDENTITY;					
3	(II) MEDICALLY NECESSARY; AND					
0	(II) MIDDIOIDEI MECESSIMI, IME					
4	(III) PRESCRIBED IN ACCORDANCE WITH CURRENT CLINICAL					
5	STANDARDS OF CARE.					
6	(4) THE PROGRAM MAY NOT EXCLUDE GENDER-AFFIRMING					
7	TREATMENT, INCLUDING REVISIONS TO PRIOR GENDER-AFFIRMING TREATMENT					
8	ON THE BASIS THAT THE TREATMENT IS A COSMETIC SERVICE.					
9	(5) THE PROGRAM MAY NOT ISSUE AN ADVERSE BENEFIT					
0	DETERMINATION DENYING OR LIMITING ACCESS TO GENDER-AFFIRMING					
1	TREATMENT UNLESS A HEALTH CARE PROVIDER WITH EXPERIENCE PRESCRIBING					
12	OR DELIVERING GENDER-AFFIRMING TREATMENT HAS REVIEWED AND CONFIRMED					
13	THE APPROPRIATENESS OF THE ADVERSE BENEFIT DETERMINATION.					
4	(c) (1) On or before December 1 each year, beginning in 2023.					
5	EACH MANAGED CARE ORGANIZATION SHALL SUBMIT TO THE DEPARTMENT A					
6	REPORT THAT INCLUDES:					
L 7	(I) THE NAME AND LOCATION OF EACH HEALTH CARE					
18	PROVIDER OFFERING GENDER-AFFIRMING TREATMENT WITH WHICH THE MANAGED					
19						
20	(II) THE TYPES OF GENDER-AFFIRMING TREATMENT PROVIDED					
<u>. 1</u>	BY EACH HEALTH CARE PROVIDER.					
22	(2) (I) ON OR BEFORE JANUARY 1 EACH YEAR, BEGINNING IN					
	2024, THE DEPARTMENT SHALL COMPILE AN ANNUAL REPORT ON GEOGRAPHIC					
24	ACCESS TO GENDER-AFFIRMING TREATMENT ACROSS THE STATE.					
25	(II) THE REPORT SHALL INCLUDE:					
) C	1 THE NAME AND LOCATION OF BACK REALTH CARE					
26 27	1. THE NAME AND LOCATION OF EACH HEALTH CARE PROVIDER OFFERING GENDER-AFFIRMING TREATMENT TO PROGRAM RECIPIENTS:					
4 (I ROVIDER OFFERING GENDER-AFFIRMING IREATMENT TO I ROGRAM RECIFIENTS.					
28	2. The managed care organizations that have					
29	ACTIVE CONTRACTS WITH EACH HEALTH CARE PROVIDER: AND					

30 3. The types of gender-affirming treatment Provided by each health care provider.

- 1 (III) THE DEPARTMENT SHALL PUBLISH THE REPORT IN A 2 CONSPICUOUS MANNER ON THE DEPARTMENT'S WEBSITE.
- 3 (3) THE DEPARTMENT AND EACH MANAGED CARE ORGANIZATION
 4 SHALL INCLUDE THE NAME, LOCATION, AND TYPES OF SERVICES FOR EACH
 5 PROVIDER OFFERING GENDER-AFFIRMING TREATMENT IN THEIR PROVIDER
 6 DIRECTORIES.
- SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect 8 October 1, 2022.