



NATIONAL LGBT HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE



Insurance Considerations for Navigating Gender Affirming Care

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Our Roots

Fenway Health

- Independent 501(c)(3) FQHC
- Founded 1971
- Mission: To enhance the wellbeing of the LGBT community as well as people in our neighborhoods and beyond through access to the highest quality health care, education, research and advocacy
- Integrated Primary Care Model, including HIV services

The Fenway Institute

- Research, Education, Policy





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Today's Faculty

Cei Lambert, MFA – Program Manager, The National LGBT Health Education Center, a program of The Fenway Institute

Disclosure

I have no financial conflicts of interest to disclose.

Today's Learning Objectives

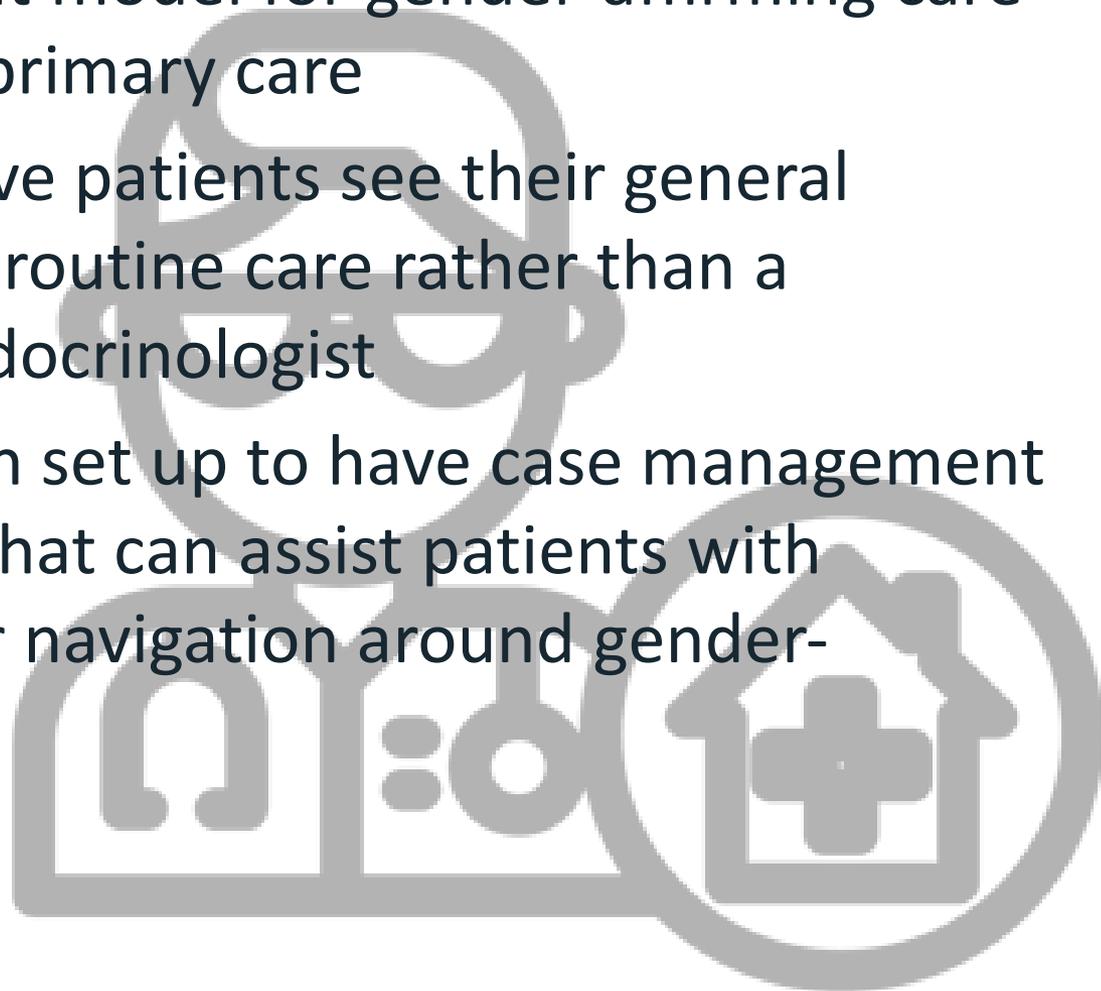
1. Participants will understand common insurance coverage challenges faced by gender-diverse people seeking medical gender affirmation.
2. Participants will learn strategies and become familiar with tools for navigating insurance with patients, creating letters and other supporting documents for gender-affirming care, and how to speak with other providers about care for gender-diverse patients.
3. Participants will develop a general understanding of laws and policies that affect insurance coverage for gender-affirming medical and behavioral health care.

Health Centers and Care Providers



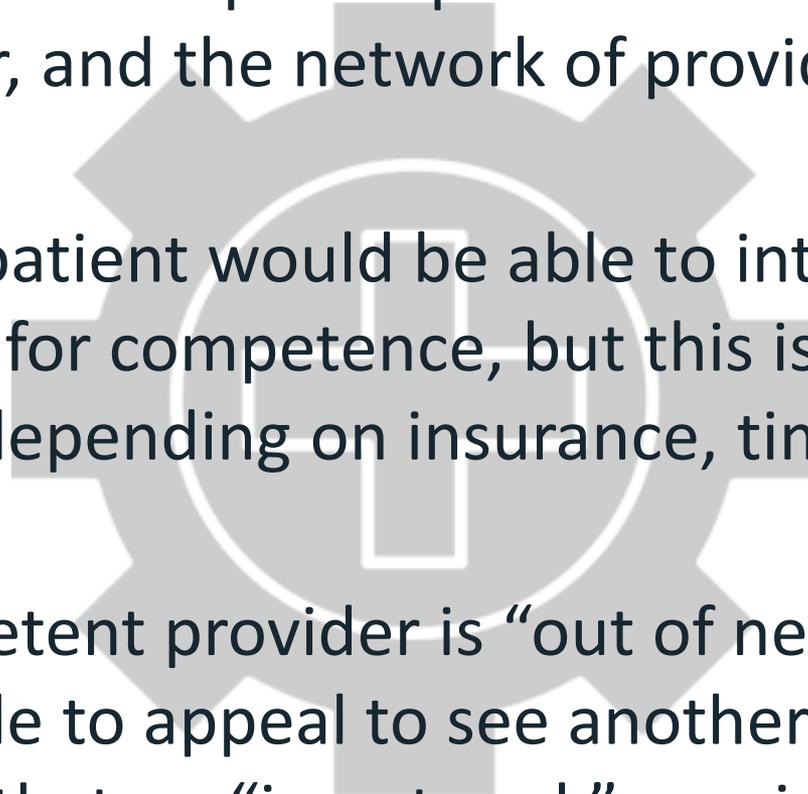
Primary Care

- An informed consent model for gender-affirming care can easily fold into primary care
- It is beneficial to have patients see their general practitioner for this routine care rather than a specialist like an endocrinologist
- Primary care is often set up to have case management and other services that can assist patients with insurance and other navigation around gender-affirmation



Competent Providers

- Many insurances require a patient to declare a primary care provider, and the network of providers may be limited
 - Ideally a patient would be able to interview and vet providers for competence, but this is not always possible depending on insurance, time, location, and more
 - If a competent provider is “out of network”, it may be possible to appeal to see another provider on the basis that no “in network” provider is proficient in the care needed



Insurance Benefits of Care in a Health Center Setting

- Often health centers, as opposed to smaller clinics, can take a wider variety of insurance
 - Gender-diverse people are historically un- and under-insured as compared to the rest of the U.S. population
- Access to case management
- Access to a wider range of providers— it may be that not all primary care providers in a center are comfortable working with gender-diverse clients, but they may have a colleague who is



Gender-Affirming Hormone Therapy



Gender-Affirming Hormone Therapy

- How to get started with hormones if you are over 18 using the informed consent model
- Criteria for hormone therapy treatment
- Considerations before and during treatment



Gender-Affirming Hormone Therapy

- Does your insurance support informed consent?
- Does your insurance cover appointments AND hormone prescriptions?
- Generally you do not need a diagnosis of “gender dysphoria” to access hormone therapy, but your insurance may reject the claim initially



Gender-Affirming Hormone Therapy

Further Considerations:

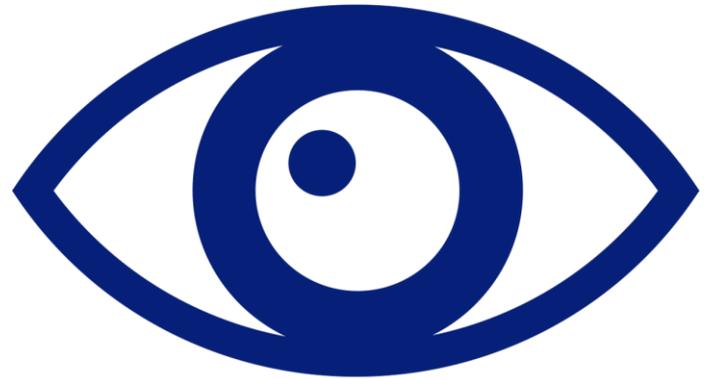
- “Preferred” delivery method is not the same as the appropriate delivery method for patients
- Initial denial of payment
 - Appeal process
- Hormone disorder vs. gender dysphoria as diagnosis code for hormones
- Listed sex with insurance versus gender identity



Gender-Affirming Hormone Therapy

Moving your care to another clinic: What should you look for?

- Competence
- Confidence
- Ability/Availability
- Internal and external company commitment
- “Bridging” care
- Knowledge of insurance!



Health Insurance and Gender-Affirming Care

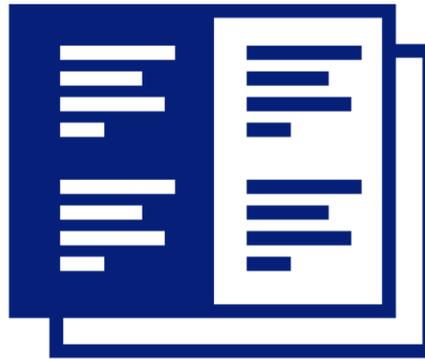
Insurance

- Health Insurance 101
 - Private versus Public Insurance
 - Federal versus State Funded Public Insurance
 - Health Maintenance Organizations (HMOs) vs. Preferred Provider Organizations (PPOs) vs. Point of Service (POS), vs.....
 - Non-discrimination protections



Insurance

- How to look for gender affirming services coverage in your plan
- Distinguishing specific exclusion, coincidental exclusion, and purposeful inclusion of gender affirming services



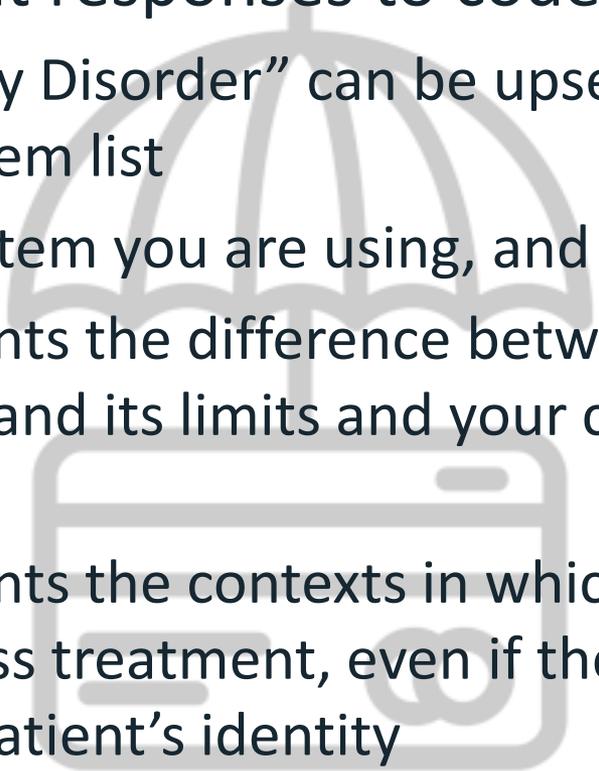
Insurance Codes

- Gender Dysphoria (DSM-5): 302.85
- Gender Identity Disorder (ICD 10): F64.9
- ICD-11 Revision removes “transsexualism”, and moves gender incongruence codes from mental health designation to sexual health designation. Code will remain F64.9, but will refer to “Gender Dysphoria”, though many electronic medical records will still populate automatically with “Gender Identity Disorder”



Insurance Codes Continued

- Managing patient responses to codes and language
 - “Gender Identity Disorder” can be upsetting when it shows up on the problem list
 - Know which system you are using, and how codes show up
 - Explain to patients the difference between your electronic medical record and its limits and your competence as a provider
 - Explain to patients the contexts in which certain codes are needed to access treatment, even if they are not accurately reflective of a patient’s identity



Insurance



- Care for your body
 - Insurance considerations for care of organs you retain
 - Sex as listed with insurance versus gender identity and gender as listed on other documentation
 - “Coming out” to insurers

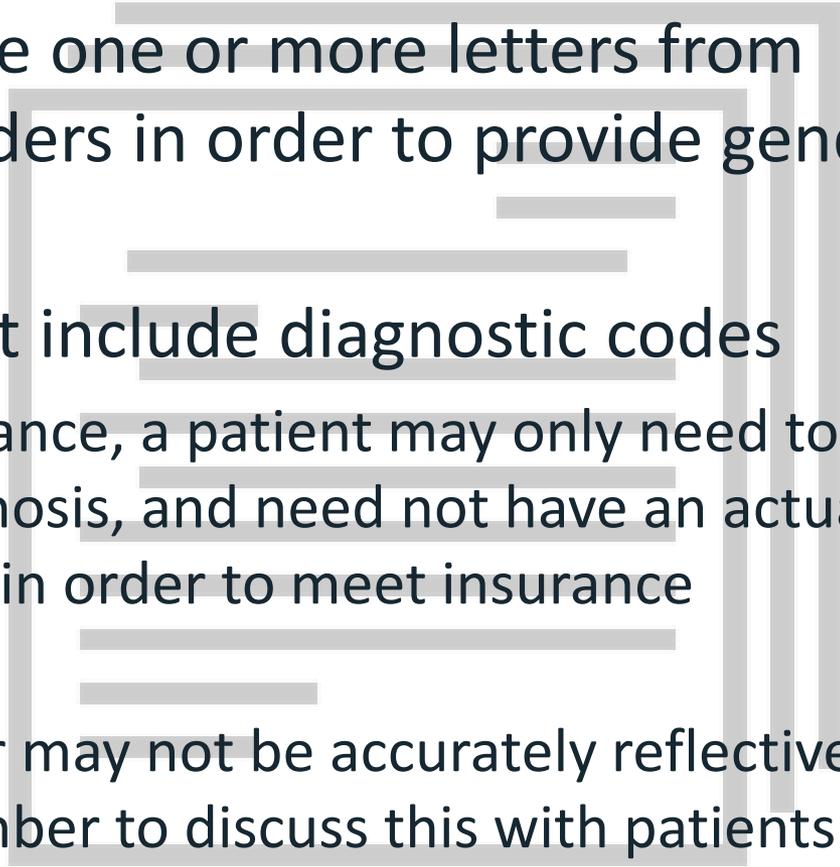


Letters, Assessments, and Insurance



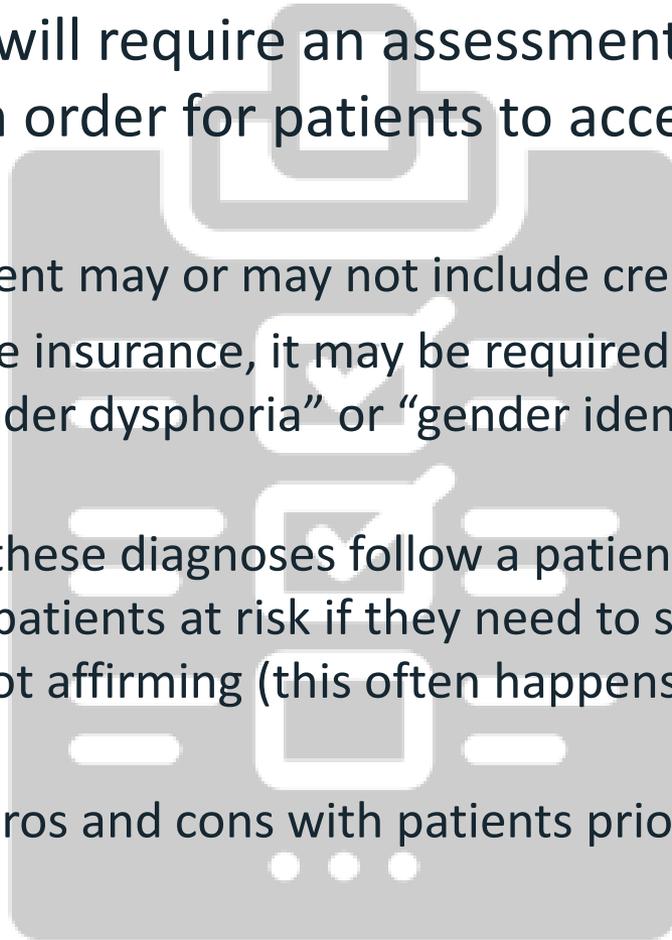
Letters in Support of Gender-Affirming Care

- Many insurances require one or more letters from behavioral health providers in order to provide gender-affirming services
- Often these letters must include diagnostic codes
 - Depending on the insurance, a patient may only need to “meet criteria” for diagnosis, and need not have an actual diagnosis in their chart, in order to meet insurance requirements
 - Diagnostic codes may or may not be accurately reflective of patient identity— remember to discuss this with patients prior to sending letters



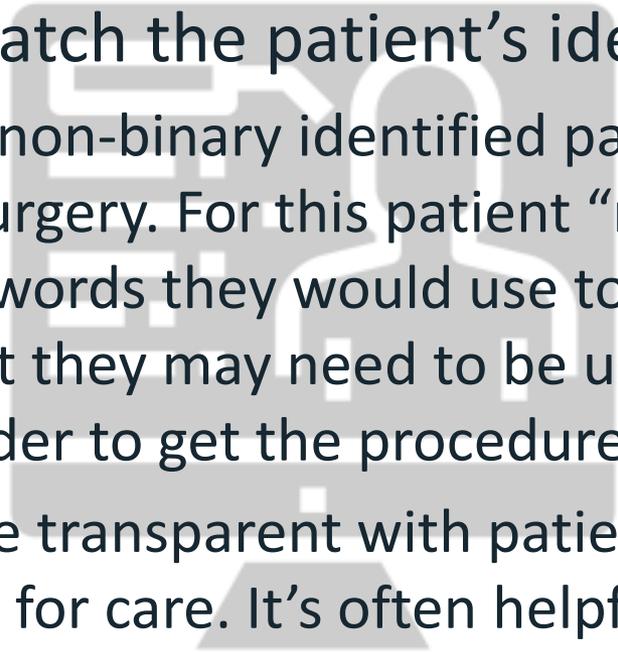
Assessments for care

- Many insurances will require an assessment that results in the discussed letter in order for patients to access gender-affirming care
 - Such an assessment may or may not include creating a diagnosis
 - Depending on the insurance, it may be required that the patient have a diagnosis of “gender dysphoria” or “gender identity disorder” in order to receive care
 - Remember that these diagnoses follow a patient via their medical chart, which can place patients at risk if they need to seek medical care at clinics that are not affirming (this often happens when patients move to a new state)
 - Discuss the pros and cons with patients prior to adding such diagnoses



Assessments and Letters Continued

- For some care, the assessment, letter, and diagnostic code may not match the patient's identity
 - For example, a non-binary identified patient may be seeking affirming top surgery. For this patient “masculinizing” and “man” are not words they would use to describe themselves, but they may need to be used in a letter to insurance in order to get the procedure covered
 - Make sure to be transparent with patients as you prepare documentation for care. It's often helpful to share a letter you have written with your patient before sending it to an outside provider or insurance



Other Insurance and Cost Considerations

- Does your plan cover the care you need?
- What is your deductible? Your co-pay?
- What problem codes are acceptable for billing for your care?
- Prior Authorization- What's that?



Other Cost Considerations

- Managing costs and preparing for care
 - Lifestyle changes
 - Work and Time Off
 - Aftercare
 - Over-the-counter medical costs
 - Assistance with activities of daily living
 - Reimbursement, Care Credit, and other strategies



Planning for the Unexpected



Gender-affirming Care that is Challenging to Get Covered

- Hair removal
- Procedures that are considered “cosmetic”
- Sometimes behavioral health care, especially group therapy
- Sometimes supportive services for family, partners, children etc.



Uncovered Tools and Care

- Non-medical gender-affirming aids such as packers, binders, shapewear, wigs, makeup, gaffs, etc.
- Wardrobe and clothing updates to reflect gender identity
- Lost wages or job loss related to transition
- Online therapy



Behavioral Health Care and Insurance



Insurance and Behavioral Health

- Assessing your needs
- Therapy Structures and Durations
 - Ongoing, one-on-one
 - Short term
 - Group
 - Evaluative
- Types of Therapy
 - Cognitive Behavioral Therapy, Dialectical Behavioral Therapy, Psychodynamic Therapy, Behavioral Activation, etc.

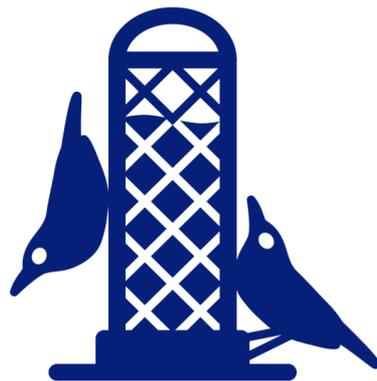


Behavioral Health

- The myth of the “Gender Therapist”
- Finding someone who is competent and confident
- LICSW, LMHC, PhD, PsyD, EdD, APRN, MD... what do they all mean? What can they all do?
- Asking an existing therapist if they can support you through your gender affirmation



Questions?



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