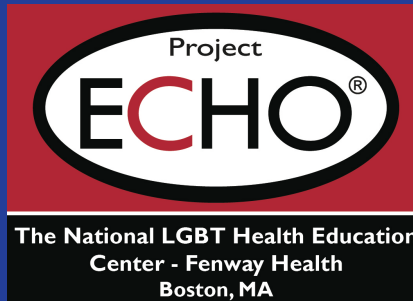




NATIONAL LGBT HEALTH
EDUCATION CENTER

A PROGRAM OF THE FENWAY INSTITUTE



TRANSECHO

Surgery Assessments, Referral Letters, Document Changes

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Surgical Assessments

Perspective

- Some people experience significant discomfort with their bodies, some do not – be aware of internal bias and expectations for how a trans or non-binary person relates to their body
- The need to affirm one's gender identity can supersede other health concerns

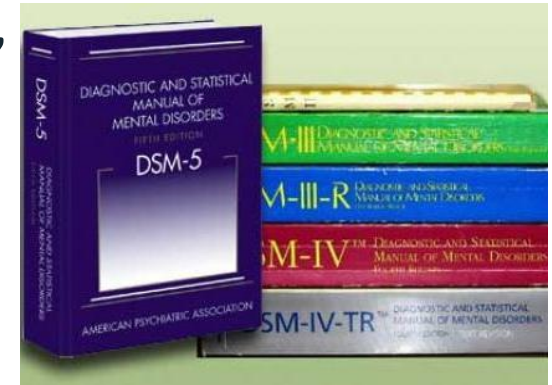
Bockting, et al., 1998; Hendricks & Testa, 2012



DSM¹-5 Gender Dysphoria (F64._)

¹DSM=Diagnostic and Statistical Manual of the American Psychiatric Association

- A. A marked incongruence between one's experienced/expressed gender and assigned gender, of at least 6 months duration ...
- B. The condition is associated with clinically significant distress or impairment in social, occupational, or other important areas of functioning, or with a significantly increased risk of suffering, such as distress or disability



.0 adolescence & adulthood .8 other gender identity disorders .9 unspecified

Criteria for Surgery in WPATH¹ SOC²

- Persistent and well documented gender dysphoria
 - Age of majority
 - Capacity to make a fully informed decision and consent to treatment
 - Any significant mental health or medical concerns are reasonably well controlled for non-genital/sterilizing
 - Any significant mental health or medical concerns are well controlled for genital/sterilizing surgeries
- * recommended trans-feminine people have 12 months of hormone treatment before augmentation

¹WPATH = World Professional Association for Transgender Health

²SOC = Standards of Care

(WPATH, 2011. SOC, v. 7)

Criteria for Genital/Sterilizing Surgery (Continued)

- ALL the previous criteria plus:
 - 12 continuous months of living in a gender role that is congruent with the person's gender identity*

* It is recommended that individuals have regular visits with a mental health or other medical professional before and after surgery. Documentation of this criteria is expected and may be verified by other outside sources. Criteria may also be varied based on health insurance [and surgeon requirements].

(WPATH, 2011. *SOC*, v. 7)

List of Common Areas to Assess

- Gender Identity History
- Mental Health
 - Eating disorders
 - Depression
 - Self-injury
 - Anxiety
 - Isolation
 - Suicidality
- Minority stress impact
- History of adverse events
- Other Diagnoses/Issues
 - Autism spectrum
 - Domestic violence
 - Sexual health
 - Substance use/abuse
 - Alcohol use/abuse
- Medical complications
- Homelessness
- Supports
- Overall functioning

Assess Realistic Expectations

- Genital reconstructive surgery (GRS) has high chance of exacerbating a hx of sexual trauma and/or DID
- Family Medical Leave Act (FMLA) procedures and options
- Overseas/out-of-state travel and care
- Flying home after genital surgery; with implants
- Dilating at work and long-term
- Financing surgery & associated costs
- Sexual functioning and expectations
- Significant other, family, friends, ally' (SOFFA) responses
- Complications, multi-stage procedures, swelling
- Bowel and bladder complications
- Time expectations and recovery realities
- Age and health concerns
- Stamina to withstand appeals
- Allergic reactions & planning
- Religious considerations
- Hot flashes and blood clots
- 'Utopia,' complications, and revisions
- Timelines for letters and insurance



Referral Letters

Many templates for letters are available through your
TransECHO participant portal!

Surgery Support Letters

- **2 LETTERS** + 1 letter and/or clinical note from primary care provider (PCP)
 - Genital and Sterilization Surgeries (often covered)
- **1 LETTER** + 1 letter and/or clinical note from PCP
 - Chest and Breast Surgeries (commonly covered)
 - Facial Feminization/Masculinization (limited coverage)
 - Hair Removal (rare coverage)

Other Support Letters

- NO criteria for coverage of hair removal
 - Rarely covered for facial hair removal
 - Few cover pre-genital surgery hair removal (w/ derm referral)
- Other letters
 - prosthetics for traveling with a prosthetic penis (packer) or prosthetic breasts
 - documentation for school support for bathrooms and clothing
 - carry letters for hormones and “cross” gender presentation or clothing

Surgery Referral Letters Details

- State whether patient has met criteria for/is diagnosed with Gender Dysphoria
- Note any actions already completed to affirm gender
- State length of time on hormone treatments or reason for any variance
- Report development and challenges as needed

PCP letters may be accepted by insurance carriers and a few surgeons as a mental health assessment

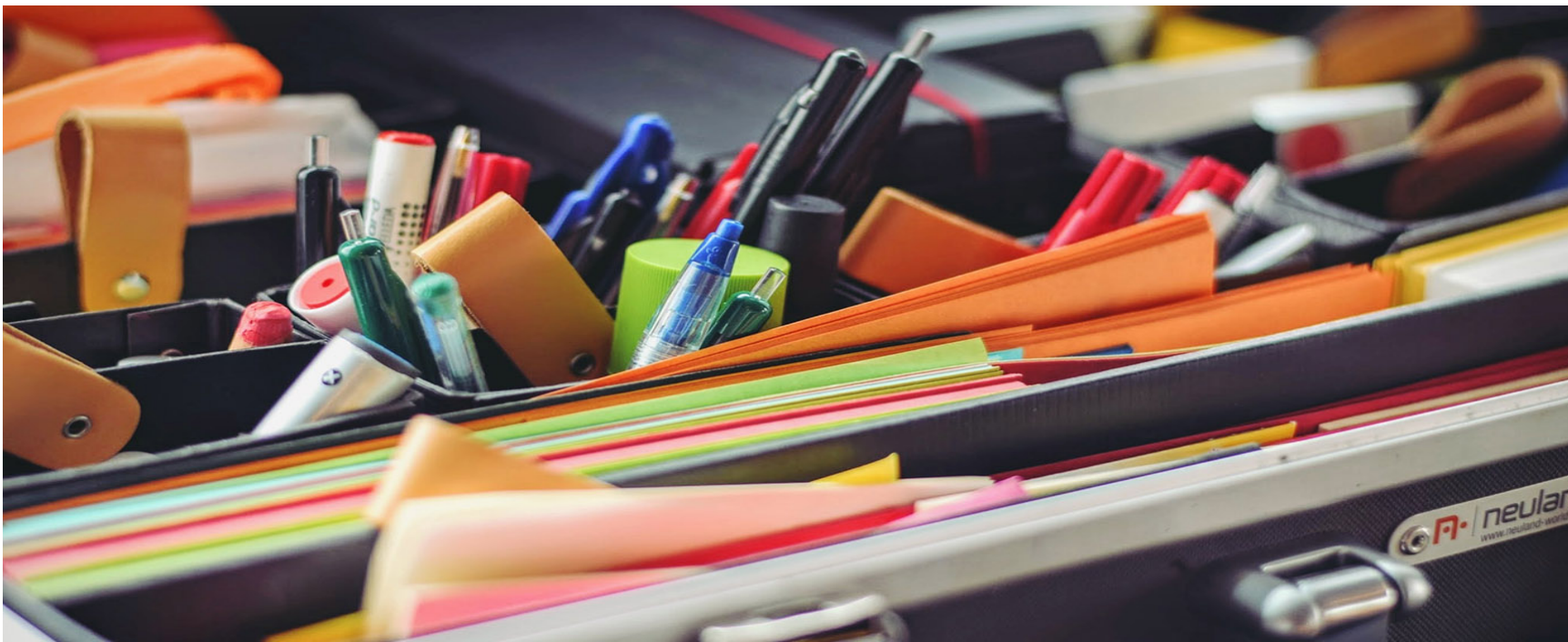
PCP medical clearance letters are welcome

Establish Medical Necessity

- Report how this surgery supports relief of or prevention of health issues, dysphoria, and distress
- Report any co-occurring medical or mental health diagnoses, and all medications (over-the-counter or prescribed)
- Invite contact from the surgeon and *provide the information to reach you!*

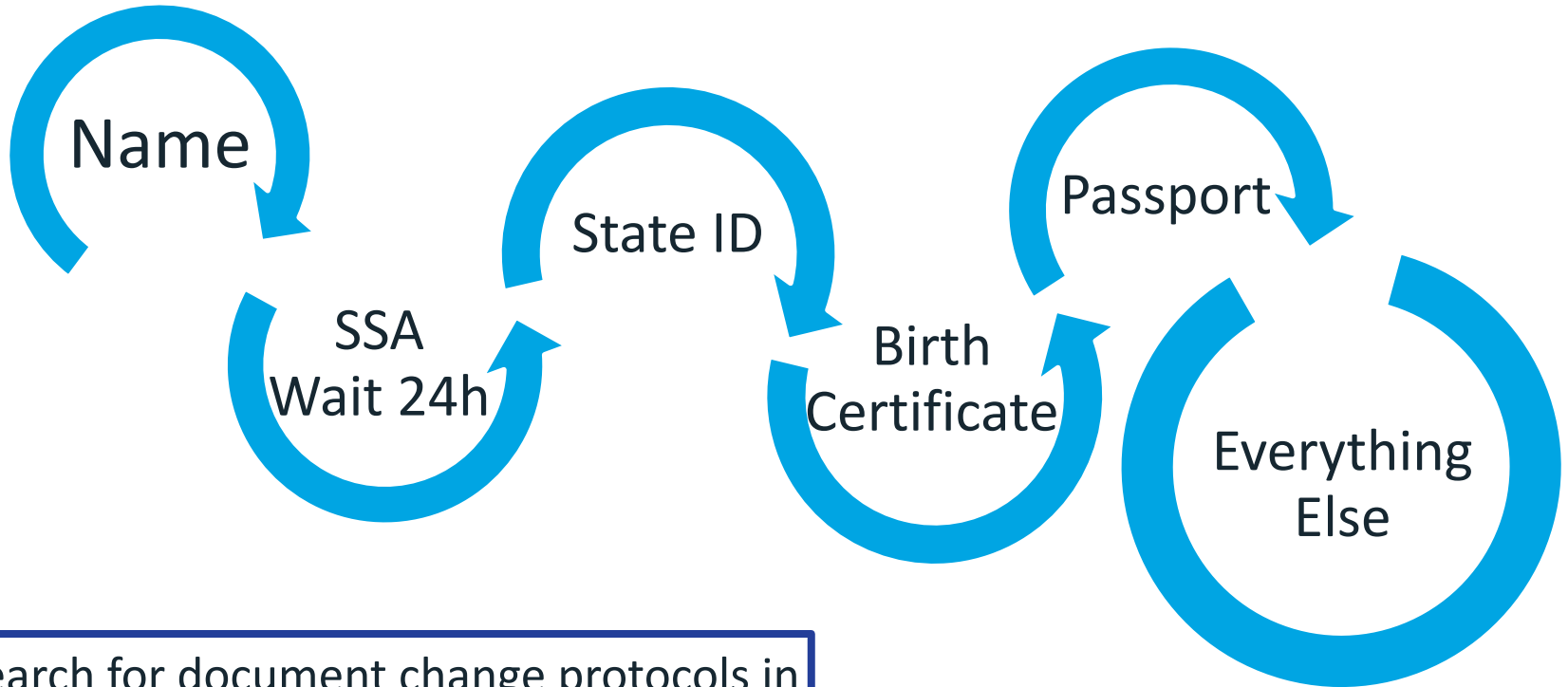
Denials and Appeals

- First option is a peer-to-peer consultation with an insurance clinician
- Second is a letter reinforcing your support, medical necessity, and filling in gaps indicated in the denial letter
- Third appeal – don't give up at less than three!
 - The third appeal usually triggers transfer of the appeal to an impartial third party insurance reviewer. This is where many appeals succeed.



Document Changes

Document Change Pathway



Search for document change protocols in your state at:

<https://transequality.org/documents>

Support for Document Changes

Probate Court



Name

- No letter is needed for name changes.
- Support letter or state form from QMHC/PCP:
 - Drivers License/State ID
 - Social Security Card or receipt for card application
 - *Sometimes* work or school (ex: military schools)
- MD/DO letter for:
 - Passport
 - Birth Certificate
 - Letter must be NOTARIZED in most states/countries

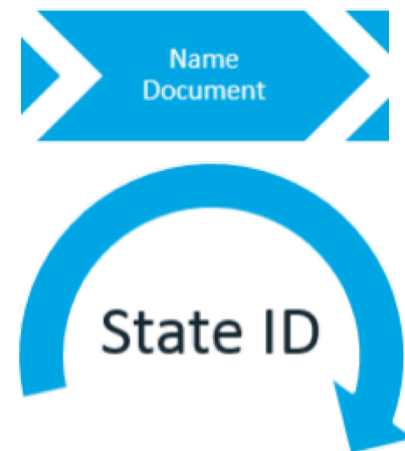
Social Security



- Submit government-issued proof of changes or certification from a physician of appropriate clinical treatment for gender transition.
- Federal systems take 24-48 hours to update.
- Selective Service is affected:
 - TO Male: New Social Security card arrives, with a selective service registration card.
 - TO Female: Un-enlists from Selective Service without notification

<http://www.transequality.org/know-your-rights/social-security>

Drivers License/State IDs



- 24 hours AFTER the Social Security Administration update get state license or ID card changed.
- Requirements vary by state:
<http://www.transequality.org/documents>

Birth Certificates

- Varies by state. Check this guide for USA: <http://www.transequality.org/documents>
- Very few countries outside the United States and Western Europe allow gender to be changed on a birth certificate.
- Most states require a notarized physician letter or a court order to change sex and/or name on a birth certificate.
 - Some are reissued with the old information simply crossed off and **still visible**.



Passport/State Department



- NO SURGERY IS REQUIRED TO CHANGE SEX MARKER ON A PASSPORT.
- For a NEW passport, apply through routine methods. If needed, take any court orders, documents, physician letter (from template), or any other verification to Passport Office or Passport service location (Post Office).
- Costs can exceed \$200. Costs can increase if person needs a passport sooner than 8 weeks from application.

<http://www.transequality.org/know-your-rights/passports>

Other Identification Changes

- Affirming Colleges Campus Pride Index: <https://www.campusprideindex.org/>
- Collegiate Athletics Index: <https://www.campusprideindex.org/sports>
- K-12 schools vary widely in policy even in the same regions.
- Mortgages, leases, utilities, banks, credit cards, subscriptions, memberships, titles, alma maters, etc.
- Wills and insurance.



Work Identification

- State and federal identification must match for payroll and tax purposes. (Real ID Act)
- Protections based on gender diversity may vary by position, company, region.
- The Human Rights Campaign (HRC) Corporate Equality Index (CEI): <https://www.hrc.org/blog/hrc-releases-annual-corporate-equality-index-609-companies-earn-perfect-sco>
- Workplace discrimination can be reported to:
 - Attorney General's Offices each states (not uniformly supportive): https://en.wikipedia.org/wiki/State_attorney_general
 - ACLU: <https://action.aclu.org/secure/report-lgbthiv-discrimination>,
 - GLAD: <https://www.glad.org/>
 - Out & Equal Workplace Advocates: <http://outandequal.org/>

Changing Health Insurance Info

Changing can help with:

- Consistency with gender identity in medical settings
- Getting hormones covered
- Support some treatments needed for gender dysphoria

Discuss pros and cons with patients. Check their individual insurance, and expect possible challenges with insurance.

Not changing can result in:

- Denials for routine care and tx of natal organs
- Denial of hormones
- Problems with coverage for care, access to needed specialties, barriers to care and inappropriate care
- Denial of all coverage for any health issues & life insurance

Non-Binary Identity & Documents

- Oregon, Washington State, Nevada, Idaho, Colorado, New Mexico, Michigan, Maine, New Hampshire, Indiana, Vermont, Maryland, Pennsylvania, Arkansas, Hawaii, California, New York, and Washington D.C. legally recognize non-binary gender via statute or policy.
- Utah and Ohio legally recognize non-binary identity via court order only.
- Federal documentation for everyone must be either Male or Female
- No health insurances allow for a non-binary sex marker
- Few employers offer non-binary identification or IDs
- Few schools offer non-binary housing, bathrooms, identification, or non-sex segregated sports teams.

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Questions and Discussion

