




# Providing Support & Empowerment for Gender Affirming Surgery Letters

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Slides in collaboration with  
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# Learning Objectives

1. Learn how to work with patients collaboratively to complete surgery letters of support using an empowerment/liberation health model.

An approach to health care that centers breaking down systemic oppression that exists in the health care/insurance system to allow for the access to affirming care for all.

2. Compose and modify template letters for common gender affirming surgeries.
3. Understand how to find information to support gender-affirming care.

Let's normalize the need for this care & support patients towards their self-identified goals.

Gender affirming surgeries (GAS) are the only surgeries that require a BH letter other than gastric bypass surgery

Needing a letter for GAS pathologizes gender diversity & is a flaw in our health care system.

*The true expertise lies in the experiences of our patients,  
people who identify as Transgender, Non-Binary  
& Gender Diverse*

By the time folks are meeting with us to discuss a letter, they have already been through a journey of recognizing, understanding, disclosing & living in their gender.

Forming the decision to have a GAS has often happened long before they enter our office.

Through thoughtful & informed care, we can help break down barriers to this life-saving intervention.

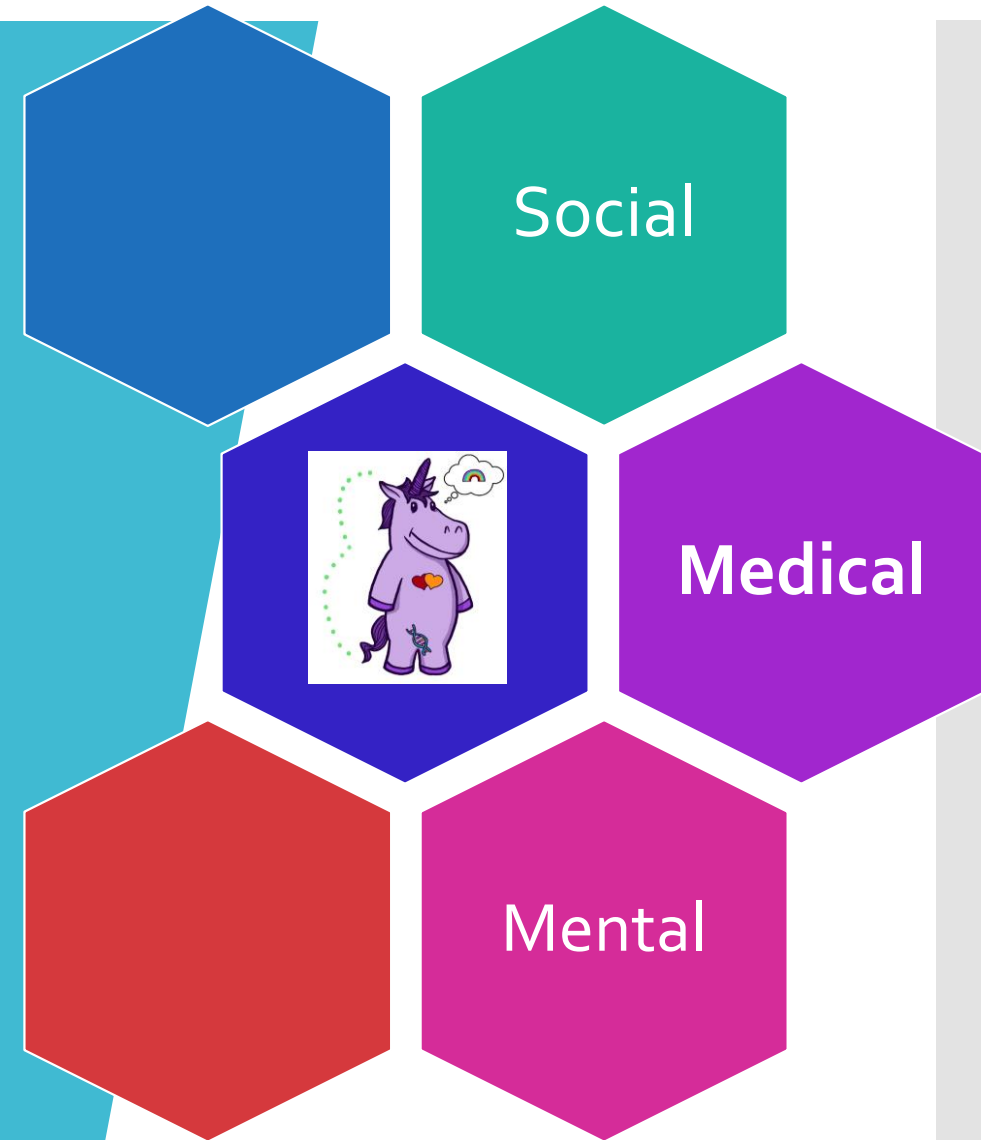
“Social, psychological, and medical gender affirmation were *significant predictors of lower depression and higher self-esteem*”

(Glynn et al., 2016).

Similar findings for trans/non-binary *youth and young adults as well as decreased anxiety*

(Fontanari et al., 2020).

“Utilization of transition-related medical care was associated with significantly *lower estimated odds of suicidal ideation, binge drinking, and non-injection drug use*” (Wilson et al., 2015).



# *Acknowledging Gender & Intersecting Identities*

Challenging normative messaging & implicit bias is vital to supporting patients in the steps they want and need for affirmation.

"There is no such thing as a single-issue struggle, because we do not live single-issue lives."

AUDRE LORDE



- Support & empower individuals to reach their goals.
- Make this process as easy as possible.
- Assess for patient's access to making an informed medical decision & that any mental health concerns are "reasonably well controlled."
- Take a stance of humility & empathy to understand the patient's decision to have surgery in order to include required information to be able to write a letter.
- Use clinical supervision and/or peer consultation as a place for processing, professional growth & accountability to decrease burden on patients.

**Our Role as Helpers - Practicing Active Allyship**

# Guidelines for Navigating Insurance Coverage

- **The World Professional Association for Transgender Health**
  - WPATH is a federal non-profit interdisciplinary organization that aspires to promote quality care for people who identify as transgender/non-binary.
- Standards of care can be downloaded directly from their website (<https://wpath.org/publications/soc>), the criteria for GAS starts on page 58.
  - Most insurances follow these guidelines regarding what is required in letters for surgery.
  - Efforts to expand areas of coverage and update language used to increase access and minimize harm.
  - Next version could be coming out Dec 2021, which could possibly change requirements for letters.



- The patient has identified surgeon(s) for consultation.
  - Many surgeons require letters before scheduling a consultation appointment with patients.
- The patient is aware of their insurance coverage for GAS.
  - Not all GAS surgeries are covered.
  - There might be a need to appeal a refusal in some cases potentially three times or more (*don't stop trying!*).
- For a behavioral health letter, they have already met with their PCP & received a letter of support from them.
  - Both are required for most surgeries.
  - For bottom surgery, a 2<sup>nd</sup> BH letter from another provider will likely be needed.

**Ideally  
Before  
Meeting  
with the  
Patient**

# Framing the Experience with the Patient

1

Introductions & Acknowledgment of **Power Differential**

2

**Collaborate** to Explore How They Would Like to Complete Letter Writing Process

3

Gather Information Regarding **Gender Identity & Surgery**

4

Assess **Personal Vision & Practical Needs** for Surgery

5

**Complete Letter(s) & Create a Plan**

1

## Using Transparency & Acknowledging Power Differential

Providers practicing in the health care system are inherently in a gate keeping role with people who are seeking care.

*"I'm aware that seeing a therapist/doctor for a letter is a requirement, not a choice that you've made. Not everyone is comfortable with this. I'm wondering how you are feeling regarding this aspect of the process itself. We can talk about it if you want to, or, we don't have to."*

*"Thank you for your collaboration in this process. It's not always easy to come to a medical office and share details about your body and identity."*

*"I imagine you have thought through and been through a lot to get to this point already."*

*"I don't take this process lightly and invite you to let me know if there is something I say or do is making you uncomfortable."*

## 2

# Collaborate to Discuss the Letter Writing Process

- **Explore potential options for letter writing process & ask for the patient's preference.**
  - You collect the information from the patient, write the letter, and you send it to the surgeon.
  - You collect the information from the patient, send it to them securely for review, get their consent to send, and you send it to the surgeon.
  - You work together to fill out the letter template in the appointment, review together, and you send it to the surgeon.
- **This encourages a sense of empowerment for patients in a process that can be very disempowering & oppressive.**

What **pronouns** do you use/should I use in the letter?

How would you describe your **gender identity**?

Are you currently receiving affirming **hormone replacing therapy** (HRT) and if so for how long?

Some insurances/surgeons might ask "how long you have been living in your identified gender", **how would you describe your experience**?

3

## Gathering Gender Identity Information

**Who** is the surgeon and where are you having surgery?

**Which** surgery are you planning to have? (be specific)

How do you foresee the surgery helping to **affirm** your gender identity/expression?

Can you say what you know so far about the surgery itself and what you **expect**?

If you are currently receiving **HRT**, do you know if you will be required to pause before the surgery? How might this **affect** you?

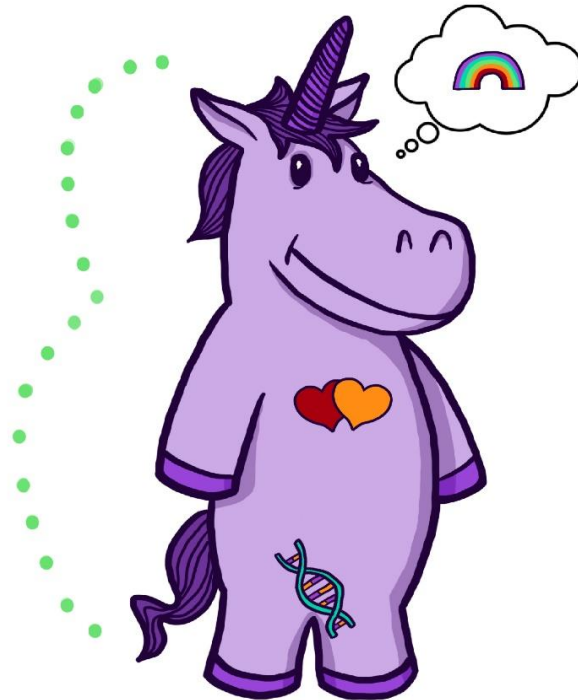
3

## Gathering Basic Surgery Information

Gender is more diverse & fluid than we are taught it to be.

# The Gender Unicorn

Graphic by:  
**TSER**  
Trans Student Educational Resources



To learn more, go to:  
[www.transstudent.org/gender](http://www.transstudent.org/gender)

Design by Landyn Pøn and Anna Moore

# Spectrum of Gender Affirming Surgeries

- Genital Reconstructive Surgery Metoidioplasty (use of existing genital tissue) or Genital Reconstructive Surgery Phalloplasty (use of skin from other part of body) to create a penis, commonly referred to as bottom surgery.
- Full Genital Reconstructive Surgery Vaginoplasty to create a vaginal canal and labia, commonly referred to as bottom surgery.
- Body “Masculinization” Surgery can include liposuction in the upper/lower body to contour shape.
- Facial “Feminization” Surgery (FFS) can include tracheal shave, forehead changes, jawline changes, etc.



# Spectrum of Gender Affirming Surgeries

- Chest Reconstructive Surgery or Breast Augmentation Surgery commonly referred to as top surgery.
- Hysterectomy removal of the uterus.
- Oophorectomy removal of an ovary or ovaries.
- Vaginectomy removal of all or part of the vagina.
- Vulvoplasty creates a vulva (including mons, labia, clitoris, and urethral opening) and removal of penis, scrotum, and testes.
- Orchiectomy removal of one or both testicles.

How do you imagine your life with or without surgery?

Are there any concerns that come up for you as you think about surgery?

What is your understanding of possible complications of surgery and aftercare needs while recovering from surgery?

Do you have social supports who feel supportive of you in your transition?

4

## Personal Vision & Practical Needs

DATE

ATTN: SURGEON NAME

FAX NUMBER

RE: PATIENT NAME

Name on insurance: (IF DIFFERENT)

PATIENT DOB

Dear SURGEON NAME,

I am writing on behalf of my client, NAME, (DOB) whom I would like to refer for SURGERY NAME. NAME has been seeing me for therapy since DATE (OR was evaluated by me on DATE). NAME is being followed in primary care by PCP NAME and has received gender affirming hormone treatment (IF APPLICABLE) since START DATE/LENGTH OF TIME.

NAME presents full-time as GENDER IDENTITY for at least the past TIMEFRAME. NAME has had a positive experience with initial gender affirming hormone treatment (IF APPLICABLE). However, despite this positive experience, NAME continues to experience significant emotional distress due to PRONOUN body not fully aligning with PRONOUN gender identity. NAME meets the clinical criteria for Gender Dysphoria (ICD 10: F64.1), has exceeded the requirements for the WPATH Standards of Care, and it is medically necessary that PRONOUN has gender affirming surgery as the next appropriate step medical intervention to enable PRONOUN to live as a person who identifies as GENDER IDENTITY - the role in which they most comfortably and effectively function. NAME is aware of possible complications of surgery and PRONOUN social supports are aware of PRONOUN plans for surgery and are supportive of PRONOUN.

It is this provider's opinion that NAME is a good candidate for SURGERY, provided you find them medically fit. If you would like to discuss PRONOUN case in more detail, please call me at PHONE.

Sincerely,

NAME & CREDENTIALS

ROLE/TITLE

PRONOUNS

# Letter Template Example

5

## Next Steps...

- Confirm that patient consents to language that will be used in the letter (gender dysphoria diagnosis, “living in their gender”, etc), explore feelings related to this if needed.
- Get ROI for surgeon(s).
- Follow through with the agreed upon plan and offer your approximate timeline.
- Refer for 1<sup>st</sup> or 2<sup>nd</sup> BH provider for letter if needed.
- Make other referrals for support as needed/if patient is interest.

# Recommendations for Systems

- *Review current system in place for GAS letters.*
  - *If no system or workflow exists, create a work group to create a system within medical record and clinical/admin teams.*
  - *Minimize barriers to access to letters/surgery.*
- *Add template with current WPATH requirements to chart for easily access for providers.*
- *Get current and future staff trained on gender affirming care.*
- *Creation of a Transgender Health Program.*
  - *Regular review of the latest insurance requirements in your state.*
  - *Updating letter template(s) regularly.*
  - *Administrative resource for patients to utilize for additional support navigating systems for letters, changing documents, and other possible needs for affirmation.*

Summary: GAS Letter Assessment <<

Orders Medications Problems Medication Problem

Interactions: !

Forms Text

Forms Add...

- GAS Letter Assessment
- C-SSRS
- BH AUDITC/DAST10/GAD7
- SOS-10
- PHQ2/PHQ9

Attachments Add...

Favorites Add

- Blank image

**GAS Letter Assessment** | Continued Assessment | Quick Reference

Session type: Assessment of Readiness for Gender Affirming Surgery Referral Letter

Session Start Time:  am  pm Session End Time:  am  pm

This is Cts 1st BH provider letter  
 This is Cts 2nd BH provider letter  
 This session is to update an existing letter

Referred by  Internal PCP  
 Outside Therapist or other provider  
 Self-referred

This letter is for the following surgery:

Other Surgery/Surgeries:

Surgeon(s) selected:

Client provides verbal consent to fax letter to designated surgeon(s).  
 Ct reports completing Electronic or Physical ROI  
 Ct reports plan to complete Electronic or Physical ROI

**See Interview Guide tab for suggested framing of the session and interview questions.**  
**Acknowledge power differential/gatekeeping role, purpose of visit (not to question or assess gender identity, but to gather information to best represent their experience in the letter)**  
**Consider cultural, ethnic, and linguistic differences, differences in framing experiences/perceptions of gender**  
**Discuss use of gender dysphoria in the letter/chart - most insurances require code. "Meets the criteria for..." vs "Has"**  
**Offer ct space to talk about being required to see a therapist for a letter, the use of Gender Dysphoria dx code, etc.**

Client thoughts/response to conversation with regard to process

Plan for recovery from surgery

Social Supports (both in general and recovery specific)

Additional information

How do you describe your gender identity?

Pronouns  She; Her  
 She; They  
 He; Him  
 He; They  
 They; Them  
 He or She  
 Any Pronouns  
 No Pronouns  
 Something Else

Default pronouns based on above selection

Subject  Object  Possessive Adjective  Possessive Pronoun

Are you currently receiving gender affirming hormones, and if so, for how long? (ex. 3 years, or since childhood)

Insurance and some surgeons require we document how long you have been living within your identified gender. How would you describe your experience? (ex. 3 years, or since childhood)

Letter writing process  Writing letter collaboratively  
 Send to ct for revisions prior to sending to surgeon  
 Send to ct and surgeon simultaneously  
 Send exclusively to surgeon  
 Other

**How to Access Letter**  
 Click the print button above the patient banner.  
 Select Letters then Transgender Health Team  
 Select the BH GAS general referral letter  
 Click Customize to make any changes (make sure you press enter after the prepopulated quicktext)

Plan

# Example Medical Record Doc

Not shown: MSE, risk assessment, areas to note preferences/referrals made, attestation of readiness.

## Online Resources

Liberation Health Model

<https://www.bostonliberationhealth.org>

Letter Templates from Fenway Health

<https://fenwayhealth.org/care/medical/transgender-health/>

WPATH Guidelines <https://wpath.org/publications/soc>

State Document Changes <https://transequality.org/documents>

Social Security <https://transequality.org/know-your-rights/social-security>

Passports <https://transequality.org/know-your-rights/passports>

Insurance Coverage <https://transequality.org/know-your-rights/health-care>

# Book Resources

“A Clinician's Guide to Gender-Affirming Care: Working with Transgender and Gender Nonconforming Clients” (2018) by Anneliese A. Singh, Sand C. Chang, and lore m. dickey

“Beyond the Gender Binary” (2020) by Alok Vaid-Menon

“The Gender Book” (2013) Book by J. Mays and Mel Reiff Hill

“Trans Bodies, Trans Selves: A Resource for the Transgender Community” (2014) Book Edited by Laura Erickson-Schroth

“Trans Allyship Workbook” (2017) Book by Davey Shlasko



# Research References

Fontanari AMV, Vilanova F, Schneider MA, Chinazzo I, Soll BM, Schwarz K, Lobato MIR, Brandelli Costa A. Gender Affirmation Is Associated with Transgender and Gender Nonbinary Youth Mental Health Improvement. *LGBT Health*. 2020 Jul;7(5):237-247. doi: 10.1089/lgbt.2019.0046. Epub 2020 May 25. PMID: 32456545.

Glynn, T. R., Gamarel, K. E., Kahler, C. W., Iwamoto, M., Operario, D., & Nemoto, T. (2016). The role of gender affirmation in psychological well-being among transgender women. *Psychology of sexual orientation and gender diversity*, 3(3), 336–344. <https://doi.org/10.1037/sgd0000171>

Wilson, E. C., Chen, Y. H., Arayasirikul, S., Wenzel, C., & Raymond, H. F. (2015). Connecting the dots: examining transgender women's utilization of transition-related medical care and associations with mental health, substance use, and HIV. *Journal of urban health : bulletin of the New York Academy of Medicine*, 92(1), 182–192. <https://doi.org/10.1007/s11524-014-9921-4>

THANKYOU

for the work you do to  
support and empower  
folks who identify as  
gender diverse