

Getting It Covered: Expanding Access To Healthcare Insurance

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Ground Rules

- ▶ Assume good intentions
- ▶ One diva, one mic
- ▶ No bad questions
- ▶ Step up, step back
- ▶ Open mind, open heart

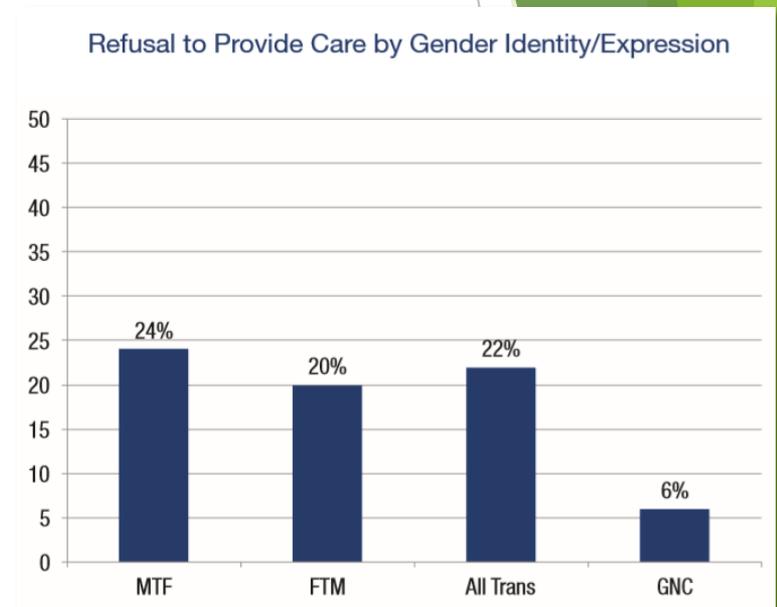


Access to Healthcare

The National Gay and Lesbian Task Force along with the National Center for Transgender Equality conducted a study - *Injustice At Every Turn (2011)* - where 6,500 transgender participants were surveyed.

Findings:

- ▶ **19% were refused medical care** due to being trans or gender non-conforming (POC rates higher)
- ▶ **50% had to teach** their medical providers about trans care
- ▶ **28% postponed medical care** when they were sick or injured due to discrimination
- ▶ **48% postponed medical care** because they were unable to afford it.



Barriers to Accessing Healthcare:

1. Refusal of care by medical professionals
2. Lack of education or understanding by providers
3. Insurance/cost of medical care

Despite these barriers...

- ▶ **“76% of transgender respondents have been able to receive hormone therapy, indicating a determination to endure the abuse or search out sensitive medical providers.”**

Injustice at Every Turn, National Transgender Discrimination Survey (2011)



Current Situation in Los Angeles

- ▶ Trans and GNC people can access trans-related medical services through **Medi-Cal**
- ▶ According to the California Endowment “State Of Trans Health” study conducted in 2016, it has been found that at least 1,000 individuals in the county are accessing trans-related healthcare



Types of Insurance

- ▶ **PPO (Preferred Provider Organization):**
 - ▶ Open access to healthcare providers in or out of network
 - ▶ You can see the doctor or specialist you'd prefer without having to see a Primary Care Physician (PCP) first
 - ▶ Premiums tend to be higher and deductibles are common
 - ▶ **HRT covered, Surgery referrals not needed. As long as you have letters from therapists and provider letter you can directly go to surgeon.**

Types of Insurance

- ▶ **HMO (Health Maintenance Organization):**
 - ▶ Access is limited, patients can only access doctor assigned to them
 - ▶ Gives you access to certain doctors and hospitals within its network
 - ▶ More restrictions for coverage than other plans, such as allowing only a certain amount of visits, tests or treatments
 - ▶ **Need surgery referrals.**

Insurance Plans

▶ Medi-Cal

- ▶ Families with income at/below 138% poverty line
 - ▶ \$16,000 household income
- ▶ Referral from Primary Care Physician (PCP) needed to see specialist or complete tests
- ▶ **Surgery referral needed.**

Insurance Plans

▶ Medicare

- ▶ Turning 65 years old makes a person eligible
- ▶ People under 65 years old still qualify for Medicare if they are receiving Social Security Disability Insurance (SSDI)
- ▶ Covers in-patient hospital care, skilled nursing facility, hospice, lab tests, surgery, and home health care
- ▶ **Covers top and bottom surgeries including Chest reconstruction, breast augmentation, vaginoplasty.**

Insurance Plans

- ▶ **MyhealthLA**
 - ▶ County program providing primary health services for undocumented and non resident recipients.
 - ▶ No cost to apply
 - ▶ **HRT is covered under MyhealthLA, however gender affirming surgeries are not**

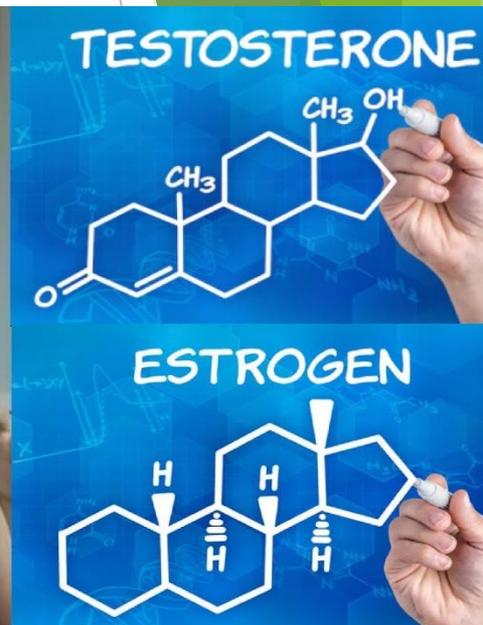
How Can I Medically Transition if I Have Insurance?

For Hormone Therapy:

- ▶ Some providers require a **letter of recommendation** from a **licensed therapist** which must follow WPATH guidelines.
- ▶ **WPATH: World Professional Association for Transgender Health**
 - ▶ *“WPATH publishes the Standards of Care and Ethical Guidelines, which articulate a professional consensus about the psychiatric, psychological, medical, and surgical management of gender dysphoria and help professionals understand the parameters within which they may offer assistance to those with these conditions”*
- ▶ **As a patient of St. John’s Transgender Health Program, you do not need a letter but you must give informed consent to begin your medical transition**

For Hormone Therapy (continued):

- ▶ In order for insurance to cover your hormone therapy, **your provider must file a prior authorization form to advocate why the medication is medically necessary.**
- ▶ Authorization form must include diagnosis code and reason for coverage.
- ▶ There are different ways to file for a prior authorization request.
- ▶ **If you have MediCal, your hormone medication is fully covered.**



What's Covered for Medical Transition under Medi-Cal?

- ▶ Hormone Therapy (HT)
 - ▶ The key hormone for MTF (male to female) and trans-feminine folks is estrogen and androgen blockers
 - ▶ The Key hormone for FTM (female to male) and trans-masculine folks is testosterone.
- ▶ Gender affirming surgeries
 - ▶ Breast Augmentation, Chest reconstruction, Vaginoplasty, Phalloplasty, and Metoidioplasty.
 - ▶ Tracheal shave and facial feminization surgeries may be covered on a case by case basis.

How long does it take for the insurance to approve my claim?

- ▶ All insurances process claims differently, some may be faster than others however there is no specific time set. The timeframe heavily depends on whether the member has all documents needed for submission and if a referral has been issued by medical provider.
- ▶ Patience is key, don't lose hope!

I have been approved/ denied, what's the next step?

For Hormone Therapy approval or denial:

- ▶ If your claim has been approved, your pharmacy of choice will be able to process your medication and will contact you when its ready for pick up.
- ▶ If your claim has been denied, you may be able to appeal it by submitting an appeal letter explaining why your medication is necessary for your wellbeing. Sometimes it helps to have a provider letter attached to speed up the process.

For gender affirming surgery approval or denial:

- ▶ If you are approved for a trans related surgery, you will be contacted by your insurance via USPS. In your letter of approval will be a timeframe to set up a consultation. Once the patient has gone to their appointment, the insurance will issue a second letter of approval for the actual surgery. The patient will then be contacted by the surgeon's staff setting up a date for the final surgery.
- ▶ Sometimes insurances will deny claims due to believing the surgeries are cosmetic. When this happens, its essential the patient or patient advocate contacts the claim department to appeal the denial.

For Surgeries:

- ▶ Some insurances will cover gender affirming surgeries depending on medical necessity
- ▶ In order to meet medical necessity, the patient must have **letter of recommendation from a licensed therapist and letter of recommendation from medical provider**
- ▶ *Surgeries above the waist:* one letter of recommendation from a licensed therapist which must follow WPATH guidelines in addition to provider letter
- ▶ *Surgeries below the waist:* two letters of recommendation from two separate licensed therapists which must follow WPATH guidelines in addition to provider letter
- ▶ **Under MediCal, Gender Affirming Surgeries are fully covered**



Common types of gender affirming surgeries.

- ▶ Chest reconstruction surgery:
 - ▶ It is fairly common for patients that identify as FTM or of Transmasculine experience to want chest reconstruction surgery otherwise known as “top surgery”
 - ▶ Keyhole and double incision with nipple grafts are the most common types of top surgery.
- ▶ Breast augmentation:
 - ▶ Many of the techniques used for breast augmentation are the same as traditional breast augmentation for cis gender patients.

Genital reconstruction surgeries for patients who identify as female or within the female spectrum.

- ▶ **Vaginoplasty:** A vaginoplasty is the complete genital reconstruction where the vagina is formed from the penis. This surgery is covered for patients under medical and most private insurances

- ▶ **Orchiectomy :** An orchiectomy is the medical term for the surgical procedure to remove one or more of the testicles for MTF patients. This surgery is covered for patients under medical and most private insurances.

Genital reconstruction for patients who identify as male or within the male spectrum

- ▶ Hysterectomy: A hysterectomy is the removal of reproductive organs for people that were assigned female at birth which includes cervix and uterus.
- ▶ Metadioplasty: Metoidioplasty surgery generally involves releasing a hormonally enlarged clitoris, urethroplasty (lengthening the urethra to the tip of the phallus), and covering the phallus with neighboring skin. It may be combined with vaginectomy and scrotoplasty.
- ▶ Phalloplasty: Phalloplasty is the reconstruction of a phallus using skin graft from a donor site. Phalloplasties are becoming more common as surgical techniques improve.

Thank you!

