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Transgender Health Insurance Roadmap: Steps to Take to Get Coverage for Treatment of Gender Dysphoria

- 1. First check to see if your health plan provides coverage for the type of treatment that you want.
- 2. Most insurance plans, both public and private, have detailed requirements that must be met in order to obtain coverage. This is particularly true if you are trying to obtain coverage for transition-related surgery. So contact your health plan and request a copy of the requirements for the treatment you are seeking.
- 3. Work with your therapists and doctors to make sure that you satisfy all the health plan's requirements. Documentation from your therapists and doctors is the most critical factor in determining whether your treatment request will be approved.
- 4. Check what treatment requires pre-approval. In most cases, any surgery will require pre-approval, and the plan may only pay if you use a surgeon that takes their plan.
- 5. If your treatment request is denied, find out the reasons for the denial, and, if you still think that you qualify for the treatment, follow the plan's appeal process. Usually there will first be an internal appeals process, and, if you are not successful there, you can sometimes appeal to an outside agency. **Make sure that you adhere to the deadlines**—failure to meet a deadline can automatically end your ability to appeal.
- 6. Keep GLAD informed if you are denied treatment. GLAD may be able to offer suggestions that can help you win your appeal. You can contact GLAD Answers by email or live chat at www.GLADAnswers.org or by phone at 800-455-GLAD (4523).
- 7. Although more health plans now cover treatment for gender dysphoria, the process for obtaining treatment, particularly for transition-related surgery, can be time consuming and frustrating. A great deal of documentation is required and finding a surgeon that does the type of surgery, and who is also acceptable to the health plan, can be difficult.
- 8. Don't be afraid to be persistent and to refile if you are denied. This is all relatively new and some of the guidance may not yet be in place, and some of the people you are dealing with may not have been properly trained, so don't assume that NO means NO.