



# Transgender Health Care

No one plans to get sick or hurt, but most people need medical care at some point. As a transgender person, you may also have necessary medical care related to your transition. Health insurance is important to help protect you from unexpected and planned medical costs. Plus, the Affordable Care Act protects transgender people and helps make insurance more affordable, accessible, and complete.

## Get Covered! Stay Covered!

Open Enrollment starts Nov. 1 2015 and ends Jan. 31, 2016. When you are ready to shop for health insurance, these tips should help you find the plan that is right for you and your medical needs.

### 1 On the enrollment forms, check the sex box that matches the sex that is on file with the Social Security Administration.

If you don't know what sex is listed in your Social Security Record, use the sex label that matches your other forms of identification (ID), like your driver's license or passport. The sex you list on your insurance application will not be checked (like your income and citizenship status). It just helps reduce confusion during the enrollment process if your insurance paperwork matches your other forms of ID.

### 2 Ask these questions before you pick a plan.

- Is my doctor/healthcare provider included in the plan's network?
- Is hormone replacement therapy covered for individuals on this plan? Remember that if hormone replacement therapy is covered for anyone on the plan, it should be covered for transgender individuals too.
- Are reconstructive surgeries covered for individuals on this plan? Many transition-related surgeries (like hysterectomy, phalloplasty, and orchiectomy) are covered for cancer treatment/prevention or in cases of injury. If the procedures are covered in these cases, the plan should also cover them as part of a gender transition.
- Are there a network of trans-friendly doctors and/or doctors who have training working with or currently work with trans clients? If you do not have a health care provider but would like to find a trans-friendly provider, contact The Health Initiative at 404-688-2524 or info@thehealthinitiative.org.
- Are procedures like facial feminization, breast augmentation, or hair removal covered? What is the copay for these services?
- Are procedures like breast reductions/mastectomies, chest lifts, and hysterectomies included in the plan? What is the copay for these services?
- If I am transgender and obtaining transgender-related care that will make me infertile, is there coverage for retrieving and storing my eggs/sperm?

### 3 Free, local help is available if you want help before or as you enroll.

Several Georgia organizations have trans-friendly health insurance enrollment assisters who can help you.

- Health Initiative—(404) 688-2524
- Georgians for a Healthy Future—(404) 567-5016 , ext 4

#### REFERENCES

National Center for Transgender Equality (2012). *Healthcare rights and transgender people*.  
Strong Families (2013). *Where to start, what to ask: a guide for LGBT people choosing healthcare plans*.

You can shop for a plan that fits your budget

Online at [www.healthcare.gov](http://www.healthcare.gov)

Over the phone:

Georgians for a Healthy Future  
404-567-5016, ext. 4

Health Initiative  
404-688-2524, ext. 1

In person:  
Find free, local help at [www.localhelp.healthcare.gov](http://www.localhelp.healthcare.gov)

Open enrollment begins Nov. 1, 2015 and ends Jan. 31, 2016.

FOR MORE INFORMATION VISIT:



Cover Georgia Coalition



Health Initiative  
[www.thehealthinitiative.org](http://www.thehealthinitiative.org)



Georgia Equality  
[www.georgiaequality.org](http://www.georgiaequality.org)



Georgians for a Healthy Future  
[www.healthyfuturega.org](http://www.healthyfuturega.org)

The **Affordable Care Act** makes health insurance more affordable, more understandable, more complete, and easier to access. The law offers protections that are important for transgender Georgians.

## Protections

### No more pre-existing conditions

Health insurance companies cannot use pre-existing conditions as a reason to deny you a health insurance plan. This means that having a diagnosis of “gender identity disorder” can NOT be used as a reason to refuse to sell you a plan. On top of that, insurers cannot charge you more for being transgender.

### Medical services must be provided, regardless of gender identity or expression

Health insurance plans must cover transition-related care, as long as that care is covered for other people on the same plan. That means services such as hormone replacement therapy and gender-specific care (like mammograms, pap smears, prostate exams) must be covered if they are covered for other people enrolled in the same plan. This is true no matter your gender identity, gender expression, or the gender that is listed on your insurance card.

### Protection against discrimination

It is against the law for a health program or organization that receives funding from the federal government to discriminate against you because you are transgender or seen as not conforming to gender stereotypes. Examples of these health programs and organizations include:

- » Doctors’ offices
- » Hospitals
- » Community health centers
- » School- & university-based clinics
- » Drug rehabilitation centers
- » Rape crisis centers
- » Nursing home & assisted living facilities
- » Home health providers
- » Veterans health centers
- » Health services in prison/ detention facilities
- » Medical residency programs
- » Health Insurance Marketplace

## Report Discrimination

\* **If you face discrimination or harassment as you look for coverage or medical care, your rights have been violated.**

You can make a complaint to:

- » **Georgia Office of Insurance & Fire Safety, Consumer Services Division**  
Call **(800) 656-2298** or use the Consumer Complaint Portal at [www.oci.ga.gov/ConsumerService](http://www.oci.ga.gov/ConsumerService).
- » **Office of Civil Rights at the U.S. Department of Health & Human Services**  
Visit [www.hhs.gov/ocr/civilrights/complaints](http://www.hhs.gov/ocr/civilrights/complaints) for more information about filing a complaint.

\* If you are denied medical care that should be covered by your plan, you have the right to appeal the decision. File an appeal by contacting your insurance company. If you have questions about how to file a complaint or appeal, contact our Consumer Education and Enrollment Specialist at 404-567-5016 ext 4.

FOR MORE  
INFORMATION VISIT:



Cover Georgia Coalition



Health Initiative  
[www.thehealthinitiative.org](http://www.thehealthinitiative.org)



Georgia Equality  
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Georgians for a Healthy Future  
[www.healthyfuturega.org](http://www.healthyfuturega.org)