

## Letter 59

**From:** Jean Haughwout  
**To:** [ETF SMB Board Feedback](#)  
**Subject:** Remove the exclusion for transgender health care  
**Date:** Tuesday, August 21, 2018 5:29:18 AM

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Dear Members of the Group Insurance Board,

I am a physician who cares for the physical health needs of people with severe chronic mental illness; as such, I understand the impact of the interplay between mental and physical health. On a daily basis, I see the sometimes dire consequences of poor mental health on quantity and quality of life.

I am writing to urge you to vote to remove the exclusion of procedures, services, and supplies related to surgery and sex hormones associated with gender reassignment for the plan year 2019. These are medically necessary services supported by all leading medical organizations in the United States. Research has demonstrated that having access to these services improves people's health. Covering these services will cause minimal increase in premiums and will lead to long-term plan savings.

All major clinical and health policy organizations in the United States have issued statements declaring that procedures, services, and supplies related to surgery and sex hormones associated with gender reassignment are medically necessary. These organizations include the American Medical Association, the American Psychiatric Association, the American Psychological Association, and many others. As these policy statements state, gender-affirming care including hormones, surgical procedures, and psychotherapy are not "elective" or "cosmetic" procedures. They are medically necessary treatment for gender dysphoria. Therefore, these services ought to be included in private and public health insurance plans.

Additionally, much research has shown that there is a connection between having access to these medically necessary services and having better mental and physical health, including areas such as quality of life, HIV incidence, substance use, and utilizing preventive health services. ETF's own calculations state that including these services will cost approximately \$0.05-0.13 per member per month. This is such a minimal amount that providing coverage for gender-affirming care will ultimately lower costs for ETF, as fewer resources will be needed to combat the negative outcomes related to untreated gender dysphoria.

It is vital for the health of the employee members and the financial success of the ETF for these medically necessary services to be covered in the plan 2019 and in subsequent years. Therefore, I urge you to vote to remove the exclusion of procedures, services, and supplies related to surgery and sex hormones associated with gender reassignment at the August 22nd meeting.

Sincerely,  
Jean C. Haughwout, MD