GENDER-AFFIRMING SERVICES
(TRANSGENDER SERVICES)

We’re committed to providing health care coverage for everyone. If you’re about to have gender-affirming surgery or just exploring options, we’re here to help and answer any questions that you may have. We have Member Service representatives who can help review your benefits, costs, and help you find a doctor who fits your needs. Just call 1-888-243-4420. Please also let us know your preferred name and gender.

WHAT WE COVER
Below is a summary of gender-affirming services that are generally standard coverage for our members whose gender identity differs from assigned sex at birth.

We rely on medical and scientific guidelines such as WPATH. Please note that this is not a complete list and may not apply to your health plan. Your benefits and coverage may vary, and your medical health plan policy governs your specific coverage.

Please call 1-888-243-4420 to speak to Member Service about your health plan’s specific gender affirmation coverage. Individual health plan terms apply and coverage is subject to subscriber certificate language.

We encourage you to share our Gender-Affirming Services medical policy with your doctor so you can review our policies and procedures in-depth.

Standard Blue Cross Blue Shield of Massachusetts coverage likely includes:
- Egg, sperm, and embryo cryopreservation prior to undergoing genital gender-affirming surgery (limited to one cycle only)
- Genital reconstruction
- Breast augmentation
- Mastectomy
- Electrolysis and/or laser hair removal performed by a licensed provider for the removal of hair on skin being used for genital gender affirmation surgery
- Feminizing or masculinizing speech therapy and/or voice training services
- Facial feminization (typical components of facial feminization) or Masculinization including:
  - Forehead contouring
  - Rhinoplasty
  - Mandible reconstruction
  - Trachea shave
  - Blepharoplasty
  - Brow lift
  - Cheek augmentation
  - Face lift or liposuction (as needed in conjunction with one of the above procedures)
- Puberty blockers and gender-affirming hormone therapy is covered at the discretion of the treating provider
MENTAL HEALTH SERVICES
We cover supportive behavioral health services for transgender and gender diverse members with or without additional behavioral health diagnoses.

Examples include:
• Initial evaluation
• Counseling
• Psychotherapy

Please call us at 1-888-243-4420 if you have any questions or need help.

WHAT WE DON’T COVER
Below is a summary of surgical procedures we typically don’t cover. As with all health plan benefits, coverage and exclusions are based on third-party medical and scientific guidelines (such as WPATH).
• Breast lift
• Lip enhancement or reduction
• Lipofilling
• Neck lift
• Chemical peel
• Hair transplant
• Vocal cord surgery
• Gender affirmation surgery reversal

SURGICAL SERVICES FOR CHILDREN UNDER AGE 18
Surgical services for our youngest members are considered on a case-by-case basis. Please call us at 1-888-243-4420.

HOW TO REQUEST PRIOR AUTHORIZATION (PRE-APPROVAL) BEFORE RECEIVING SERVICES
Before you have any services, your doctor should complete and send us one of the following forms, depending on the procedure you’re having:
• Prior Authorization Request for Gender-Affirming Services (Transgender Services) Form #901

Please call us at 1-888-243-4420 if you need any help or questions about the pre-approval process.

OUR NETWORK AND FINDING A DOCTOR
We understand there is a limited network of doctors who perform gender-affirming services. Please contact Member Service at 1-888-243-4420 for a list of in-network doctors and facilities, or if you’d like to talk about your options. We will work with you and your doctor.

Questions?

Remember, wherever you are in the process, we’re just a phone call away.
Please call us at 1-888-243-4420.