

Health insurance coverage for gender-affirming care of transgender patients

- Approximately 1.4 million adults and 150,000 youths identify as transgender, meaning those individuals' gender identity is different from cultural expectations based on the sex they were assigned at birth.
- Transgender patients often face discriminatory hurdles in accessing medically necessary health care services.
A national survey of transgender individuals found:
 - Twenty-five percent of those who sought coverage for hormones in the past year were denied
 - Fifty-five percent of those who sought coverage for transition-related surgery in the past year were denied
- Medically necessary services that affirm gender or treat gender dysphoria include mental health counseling, gender-affirming hormone therapy, gender-affirming surgeries and non-medical social transition.
- Improving access to gender-affirming care is an important means of improving health outcomes for the transgender population. Receipt of gender-affirming care has been linked to:
 - Dramatic reductions in the rate of suicide attempts
 - Decreased rates of depression and anxiety
 - Decreased substance use
 - Improved HIV medication adherence
 - Reduced use of harmful self-prescribed hormones, construction-grade silicone injections and other interventions that have potential to cause adverse events
- Positive health effects from gender-affirming care extend to children and adolescents.
- The AMA supports public and private health insurance coverage for treatment of gender dysphoria and opposes the denial of health insurance on the basis of sexual orientation or gender identity.