

UC Transgender Health Benefits

The University of California’s comprehensive medical benefits encompass the broad needs of our diverse workforce to keep our employees, retirees and their family members healthy. Nearly all of UC’s medical plans offer benefits for transgender health as highlighted in this fact sheet.

WHAT UC MEDICAL BENEFITS COVER

The following chart provides an overview of UC’s transgender health benefits. Check the medical plan’s Evidence of Coverage booklet for additional details, including the co-pays and deductibles that apply.

	PLANS	WHAT’S COVERED	COVERAGE LIMITS
Medical	Anthem Blue Cross (PLUS, PPO, Lumenos) Health Net Health Net Blue and Gold Kaiser Permanente – CA Western Health Advantage	<ul style="list-style-type: none"> • Medical office visits • Prescription drugs • Hormonal therapy • Determining patient’s readiness for surgery • Gender reassignment surgery • Anesthesia • Hospital/skilled nursing facility 	Covered up to a \$75,000 lifetime maximum <ul style="list-style-type: none"> • Anthem PLUS: doctors must be out of network PPO providers in the Tier 2 benefit level • All other plans: doctors must be in network.
Behavioral Health	Optum (available to all members in the medical plans listed above) Kaiser Permanente — CA (for Kaiser members only)	<ul style="list-style-type: none"> • Psychological counseling • Pre-transgender surgery clinical assessment • Two independent physician/clinician certifications • Determining patient’s readiness for surgery 	Included in the \$75,000 lifetime maximum of your medical plan

There are no transgender health benefits in the Core, High Option or Kaiser Umbrella plans.

For employees enrolled in Kaiser Permanente, behavioral health benefits are available through Optum or Kaiser. However, Kaiser members who receive transgender counseling from Optum may need to receive counseling and approval from Kaiser for any medical procedure.

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In certain situations, travel expenses to a surgical facility may also be covered. These benefits could include reimbursement for airfare, hotel stays and meals. These expenses are separate from the medical plan's lifetime maximum and should be discussed with the plan during the pre-authorization process.

Medical plan copayments and coinsurance payments for transgender health procedures are eligible for reimbursement from the UC Health Flexible Spending Account if they are verified as medically necessary by a physician.

MORE ABOUT TRANSGENDER HEALTH BENEFITS

Generally, UC's medical plan transgender health benefits are based on medical necessity and guidelines provided by the World Professional Association for Transgender Health (WPATH).

For more information about transgender health, visit WPATH at www.wpath.org. WPATH is a professional organization devoted to understanding gender identity. Additional resources are available through the Center of Excellence for Transgender Health (www.transhealth.ucsf.edu) whose mission is to increase access to comprehensive, effective and affirming health care services for trans- and gender-variant communities.

For additional help with UC's transgender health benefits, consult with a UC Health Care Facilitator and/or call the member services number on your medical plan identification card.

After transgender procedures are completed, human resources and benefits records should be updated; contact the local benefits office for help.

This fact sheet does not offer a guarantee of coverage. Check the medical plan's booklet for details regarding eligibility for transgender health benefits and covered/exclusive care. All services require pre-authorization and/or may require members to follow plan guidelines in obtaining services to ensure services are covered.

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