

2004 TRANSGENDER BENEFITS

6/28/04

Medical Plan	Office Visits	Hormone Therapy*	Psychiatric and Psychological Counseling*	Prescription Drugs	How is eligibility for benefits determined?	Reassignment Surgery
Blue Cross of California (POS/PPO, Core CA, Core NM, High Option)	See page 2.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. For PLUS and PPO, behavioral health services provided through United Behavioral Health (UBH). Core excludes behavioral health benefits.	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
Health Net	See page 2.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. Behavioral health services provided through Managed Health Network (MHN).	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
Kaiser Permanente (CA)	See page 2.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply.	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
Kaiser Permanente Mid-Atlantic	Mid-Atlantic does not cover any part of transgender benefits.					
PacifiCare of CA	See page 2.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. Behavioral health services provided through PacifiCare Behavioral Health (PBHI).	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
PacifiCare of Nevada	See page 3.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. Behavioral health services provided through Harmony.	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
UnitedHealthcare (Select EPO, Options PPO and iPlan)	Yes. Appropriate co-pays apply.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. Behavioral health services provided through PacifiCare Behavioral Health (PBHI).	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.
Western Health Advantage (WHA)	See page 3.	Yes. Appropriate co-pays apply.	Yes. Appropriate behavioral health co-pays apply. Behavioral health services provided through Magellan Behavioral Health.	Yes as determined by health care provider. Appropriate co-pays apply.	The member's Medical/Behavioral Health Provider determines eligibility for benefits.	Not a covered benefit.

* Administered according to the Harry Benjamin International Gender Dysphoria Association's (HBI/GDA) Guidelines, except for Kaiser Permanente. For Kaiser Permanente, services are covered in terms of medically necessity.

2004 TRANSGENDER BENEFITS for Office Visits					
Medical Plan	Office visits related to Hormone Therapy*	Office visits related to Psychiatric and Psychological Counseling*	Office visit related to consultation for reconstructive surgery**	Office visit related to follow-up (post- operative) from reconstructive surgery**	Office visit related to complications from surgery**
Blue Cross of California (POS/PPO, Core CA, Core NM, High Option)	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. For PLUS and PPO, behavioral health services provided through United Behavioral Health (UBH). Core excludes behavioral health benefits.	Office visits related to a consultation for reconstructive surgery, which is medically necessary and not excluded from coverage. Appropriate co-pays apply.	Normal post-operative follow-up is generally covered under a global surgical fee.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.
Health Net	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. Behavioral health services provided through Managed Health Network (MHN).	Office visits related to a consultation for reconstructive surgery, which is medically necessary and not excluded from coverage. Appropriate co-pays apply.	Normal post-operative follow-up is generally covered under a global surgical fee.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.
Kaiser Permanente (CA)	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply.	Office visits related to a consultation for reconstructive surgery, which is medically necessary and not excluded from coverage. Appropriate co-pays apply.	Normal post-operative follow-up is generally covered under a global surgical fee.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.
PacifiCare of CA	Yes, covered in connection with hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. Behavioral health services provided through PacifiCare Behavioral Health (PBHI).	Not covered for office visits related to a consultation for reconstructive surgery. Complications which are medically necessary and not excluded from coverage may be covered. Appropriate co-pays apply.	Not covered.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.

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** Reconstructive surgery is covered if deemed medical necessary by the plan, and if it is not specifically excluded under contract provisions listed in the Evidence of Coverage (EOC). Individuals should contact the plan for case-by-case situations. Transgender reassignment surgery is considered an excluded procedure. However, reconstructive surgery to restore and achieve symmetry including surgery performed to correct or repair abnormal structures of the body caused by congenital defects, developmental abnormalities, trauma, infection, tumors or disease may be covered.

2004 TRANSGENDER BENEFITS for Office Visits					
Medical Plan	Office visits related to Hormone Therapy*	Office visits related to Psychiatric and Psychological Counseling*	Office visit related to consultation for reconstructive surgery**	Office visit related to follow-up (post-operative) from reconstructive surgery**	Office visit related to complications from surgery**
PacifiCare of Nevada	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. Behavioral health services provided through Harmony.	Office visits related to a consultation for reconstructive surgery, which is medically necessary and not excluded from coverage. Appropriate co-pays apply.	Not Covered.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.
UnitedHealthcare (Select EPO, Options PPO, iPlan)	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. Behavioral health services provided through PacifiCare Behavioral Health (PBHI).	Not covered for office visits related to a consultation for reconstructive surgery when billed with a transgender reassignment surgery diagnosis code. Appropriate co-pays apply.	Not covered.	Not covered for office visits related to a reconstructive surgery when billed with a transgender reassignment surgery diagnosis code. Appropriate co-pays apply.
Western Health Advantage (WHA)	Yes as related to hormone therapy. Appropriate co-pays apply.	Yes as related to psychiatric and psychological counseling. Appropriate behavioral health co-pays apply. Behavioral health services provided through Magellan Behavioral Health.	Office visits related to a consultation for reconstructive surgery, which is medically necessary and not excluded from coverage. Appropriate co-pays apply.	Normal post-operative follow-up is generally covered under a global surgical fee.	Office visits related to complications from any surgery are covered when determined to be medically necessary. Appropriate co-pays apply.

What is written here does not constitute a guarantee of plan coverage or benefits – particular rules and eligibility requirements must be met before benefits can be received. This benefit chart is a summary only. It does not fully describe your benefits coverage. For details on your benefit coverage, please refer to your Plan's Evidence of Coverage (EOC), or contact the plan. If there are any discrepancies between this benefit chart and the EOC, the EOC will prevail.

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