Here for you

Transgender services from Aetna®
Helping you be your best you

Aetna.com
Live your best life

Sometimes your gender identity doesn’t exactly match the gender that you were born with. That’s called “gender dysphoria.” We’re here to support you every step of the way on your journey to express your gender identity. That’s why we’ve added a variety of transgender services to some of our plans to help you choose the care that's right for you.

Connecting you to care

Some of our plans offer transition assistance that will help you take care of your physical and behavioral health needs. We also offer benefits that will help you address your daily-living needs after your transition. Your coverage for gender transition services depends on your health plan and on certain state and federal laws.

You may be able to get help with:

- Behavioral health services
- Hormone therapy and medications
- Surgical services
- Reproductive services
- Ongoing health and wellness support

We’re here for you

Some plans may include case managers and nurses who specialize in gender affirmation. You can call Member Services and ask for a case manager who specializes in gender reassignment. They can help you:

- Understand and access your benefits
- Get help with precertification for gender affirmation procedures
- Find the doctors and facilities that work best for you

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Get the care that’s right for you

Finding a provider

It’s important to find a provider who understands your unique health care needs. You should feel comfortable with your provider so you can be honest and open with them and ask them any questions you have.
Getting the most from your plan

Behavioral health services

Your mental well-being is important, and we encourage everyone to visit a behavioral health provider. Talking to a behavioral health provider before your gender affirmation surgery is a requirement for your transition planning. Before you can schedule a gender affirmation surgery, you will need:

- One letter from a behavioral health care provider for breast surgery
- Two letters from behavioral health care providers for genital surgery

Your primary care provider (PCP) can help you find the right behavioral health provider and services for your needs. Or you can call Member Services and ask for a list of behavioral health providers in your area.

Hormone therapy

Hormones are used to make you more masculine or more feminine. You should talk to your PCP before starting testosterone or estrogen therapy. They’ll talk to you about any risks or side effects. And they’ll help make sure that you’re taking the right amount of masculine or feminine hormones.

Alcohol and tobacco use raises the risk of side effects when taking hormones. Ask your provider how much alcohol is safe for you and about ways to quit smoking, especially if you are considering surgery.

Gender affirmation surgery

If you decide to have a gender affirming surgery, we’ll be right here to help. You can call Member Services or ask your PCP to help you find an appropriate surgeon. (They often are not local.) Then we’ll work with your surgeon to get all of the precertifications you need. While you’re getting ready for your surgery, it’s important to stay in shape — that means eating healthy and exercising regularly.

You may be covered for a variety of surgeries, including:

- Breast reduction, removal or augmentation
- Removal of reproductive organs
- Creation of exterior sexual organs

You can find out which surgeries are covered or excluded and which services have limits by calling Member Services. The resources below will give you more information about our gender affirmation policy and breast surgery providers.

- Aetna standard gender affirmation clinical policy
- Breast reduction and augmentation surgery providers (PDF)
Staying healthy after your surgery

We’ll help you take care of yourself after your surgery. You should talk to your PCP about safe sex and being screened for sexually transmitted diseases. You’re also covered for preventive health services based on your birth anatomy, including screenings for:

- Breast cancer
- Cervical cancer
- Prostate cancer

We’re here with you every step of the way.

To learn more about your benefits and options, just call Member Services.

Each benefits plan defines which services are covered, which are excluded and which are subject to dollar caps or other limits. Members and their providers will need to consult the member’s benefits plan to determine if there are any exclusions or other benefits limitations applicable. Some plans exclude coverage for services or supplies that Aetna® considers medically necessary. If there is a discrepancy between this policy and a member’s plan of benefits, the benefits plan will govern.

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95.02.309.1 (5/21)