FEHB Program Carrier Letter All FEHB Carriers

U.S. Office of Personnel Management Healthcare and Insurance

Letter Number 2023-12

Fee-for-service [10]

Experience-rated HMO [10]

Date: May 23, 2023 Community-rated HMO [11]

Subject: Coverage for Gender Affirming Care and Services

Summary

This Carrier Letter supplements existing guidance on coverage for gender affirming care and services under the FEHB Program.

Coverage

In accordance with Executive Order 14035, OPM has strongly encouraged FEHB Carriers to cover comprehensive gender affirming care and services (Carrier Letters 2022-03, 2022-04, and 2023-04), and OPM expects that, in their benefit and rate proposals for the upcoming plan year, Carriers will propose enhanced coverage of services related to the treatment of gender dysphoria.

Further, since January 1, 2016, OPM has required that no FEHB Carrier have a general exclusion of services, drugs, or supplies related to the treatment of gender dysphoria (Carrier Letter 2015-12). OPM is building on this guidance such that for the 2024 plan year, no FEHB Carrier may categorically exclude from coverage services related to gender affirming care, such as hormone therapy, genital surgeries, breast surgeries, and facial gender affirming surgeries.

Carriers retain flexibility in designing their benefits. But, in establishing coverage policies and making medical necessity and other determinations, Carriers are reminded that they must do so in a consistent, neutral manner that does not limit or deny services to enrollees in a discriminatory way. For

the 2024 plan year, plans should cover procedures or treatments for gender dysphoria when plans cover the same procedures or treatments for other diagnoses. For example, Carriers may not exclude or otherwise limit or deny coverage for surgery, such as a mammoplasty, for a covered individual whose sex assigned at birth is male while providing coverage for such surgeries for a covered individual whose sex assigned at birth is female.

OPM again emphasizes that Carriers' medical policies must remain current and coverage decisions be consistent with up-to-date standards of care. Carriers should review updated information from recognized entities such as the World Professional Association of Transgender Health (WPATH)¹, the Endocrine Society, and the Fenway Institute, and incorporate these standards as appropriate. (Carrier Letters <u>2021-05</u>, <u>2022-03</u>, <u>2022-04</u>, and <u>2023-04</u>).

Carriers should confirm that their benefit and rate proposals for the upcoming plan year are in accordance with this guidance. Please reach out to your Health Insurance Specialist with any questions.

Sincerely,

Laurie Bodenheimer
Associate Director
Healthcare and Insurance

¹ As noted in Carrier Letter 2023-04, WPATH recently released its Standard of Care Version 8, updating the previous version from 2012. Carriers should pay specific attention to reduction in the number of required evaluation letters for initiation of treatment; medical necessity of facial gender affirming surgery; gender-affirming hormone therapy; and health care workforce cultural-awareness training.