DEVELOPED BY THE FEMALE FORCE READINESS NAVY MEDICINE OPERATIONAL CLINICAL COMMUNITY

## TRANSGENDER CARE RESOURCE FOR PRIMARY CARE PROVIDERS



Transgender individuals identify as a gender other than their sex assigned at birth. Transgender individuals are not excluded from military service, and Department of Defense (DoD) policy specifically prohibits discrimination based on gender identity.

#### **Symptoms of Gender Dysphoria**

**Definition of gender dysphoria:** Gender dysphoria is a marked incongruence between one's selfidentified gender and one's biological sex. Gender dysphoria (DSM-5) is a recognized medical condition due to the significant distress or impairment in social, occupational, and other important areas of functioning that can take place.

#### Symptoms of gender dysphoria may include:

- A difference between gender identity and genitals or secondary sex characteristics, such as breast size, voice, and facial hair.
- A strong desire to be rid of these genitals or secondary sex characteristics, or a desire to prevent the development of secondary sex characteristics.
- A strong desire to be or to be treated as another gender.
- A strong belief of having the typical feelings and reactions of another gender.

For certain individuals, gender dysphoria can be alleviated through counseling. For others, the treatment for gender dysphoria can include gender affirming care, which can involve living socially as the opposite gender without any anatomical changes or receiving gender affirming hormone treatment or gender affirming surgeries.

#### First Steps for Referring Service Members Seeking Gender Affirming Care

For service members seeking gender affirming medical care (such as hormone therapy, genital reconstruction, hysterectomy, etc.), Primary Care Managers (PCMs) must produce the following components to provide a referral to the regional Transgender Care Team:

- ✓ Diagnosis of gender dysphoria: An evaluation from a military mental health clinician confirming the presence of gender dysphoria. Even if the service member received this diagnosis from a civilian provider, they also must receive this diagnosis from a military provider.
- Statement of readiness: Statement that confirms that informed consent has been received from the service member who is aware of potential risks, benefits, alternatives, unknowns, and limitations to receiving the gender affirming care of their choosing.
- Statement of medical necessity and referral of service member to the Transgender Care Team: Statement that details the medical necessity of gender affirming care for improving the physical and mental health of a service member.

## **Expectations for Initial Care**

Initial visits with the Transgender Care Provider/Team can be planned with Teresa Kimura, Case Manager and Mandatory Point of Contact (<u>teresa.s.kimura.civ@health.mil)</u> and should include the following:

- ✓ Review of history of gender experience.
- ✓ Documentation of prior hormone use.
- ✓ Addressing safety concerns.
- ✓ Assessing social support system.
- ✓ Ensuring readiness for gender transition.
- ✓ Review of the benefits and risks of hormone therapy.
- Obtaining informed consent.
- ✓ Ordering of screening laboratory studies.



## Military and Clinical Considerations for Gender Affirming Practices

### Military Considerations When Supporting Transgender Service Members

Where possible, gender affirming care should be conducted such that a service member would be **fit for duty in the birth gender before a change** in the service member's gender marker in the **Defense Enrollment Eligibility Reporting System** (DEERS) and meet all applicable standards.

Further, the service member would **meet all applicable standards and be fit for duty in the selfidentified gender after the change in gender marker**. A medical memo of support from the Transgender Care Team will accompany the Gender Marker Change (GMC) request.

- ✓ For service members who desire Defense Enrollment Eligibility Reporting System (DEERS) GMC, gender transition is deemed complete once the service member has reached stability in their affirmed gender and the marker is reflected in DEERS. The completion date of a gender transition depends on the service member's physical and emotional response to the treatment (estimated 6 – 18 months).
- Mental health symptoms must be relatively well-controlled to begin gender affirming hormone therapy. A psychiatric hospitalization may delay hormone initiation for up to six months depending on the circumstances and input from the service member's mental health providers.
- If a service member changes commands, they will need to have their care plan signed by the new CO.

## **Care Considerations When Supporting Transgender Service Members**

#### Transgender Care Services Covered by TRICARE

TRICARE covers hormone therapy and psychological counseling for gender dysphoria (a person's sex assigned at birth is not congruent with their gender identity).

TRICARE does not cover gender affirming surgeries. Active duty service members seeking surgery in the private sector will need a Supplemental Healthcare waiver for top or genital surgery.

surgeries but not all have this capability. For any genital gender affirming

Embryo preservation is not covered by TRICARE. However, partial coverage

There are military treatment facilities that perform gender affirming

surgeries, a Supplemental Healthcare waiver must be requested.

## **Steps for Consideration Following Care Plan Approval**

can sometimes be available via military treatment facilities.

Once a service member's care plan is approved, they can ask their PCM or endocrine provider for a referral to Speech Pathology for speech masculinization or feminization if desired.

- Adolescent and young adult medicine also provides gender affirming hormone treatment to military members.
- When gearing up for deployment, service members should be switched to a non-injectable option.
- Lab work will need to be completed on a regular basis to trend hormone levels per World Professional Association for Transgender Health (WPATH) and Endocrinology Society guidelines.



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Click this <u>link</u> to learn more.

Learn more

about requesting a

waiver <u>here</u>.

Find more

information

<u>here</u>.

### **Multidisciplinary Care Team**

Following intake, a Transgender Care Team Case Manager will direct service members to see several specialists prior to drafting the Transgender Care Plan. These specialists will provide the following:

Mental Health Counseling	Endocrinology/Hormone Therapy Counseling	Family Preservation Counseling
Diagnosis of gender dysphoria must be documented or validated by a military mental health clinician. The clinician also will make mention of any comorbid mental health conditions and if they are stable.	Endocrinologists or Primary Care clinicians can provide the appropriate hormone therapy service members need to better align their bodies to their gender identities. During the initial appointment, clinicians can assess current hormone levels of the service member and propose future needs.	It is recommended that prior to transition, all Transgender people be counseled on the effects of gender affirming care on options for fertility preservation and reproduction. This counseling option does not require referral to a Reproductive Endocrinologist (REI) unless a service member would like to utilize an egg or embryo bank (or

#### **Individualized Care Plan**

# Following these appointments, the Transgender Care Team will meet to create an individualized Transgender Treatment/Care Plan:

The service member will then be provided the Transgender Treatment/Care Plan as well as a primary care memo (a pre-drafted template that must be reviewed and signed by their PCM) and Commanding Officer (CO) memo (that must be reviewed and signed by their CO for approval).

If approved by the CO, the service member will receive a confirmation/approval letter, approving the timeline of gender affirming care.

It is possible for a CO to postpone approval due to operational requirements (i.e., a ship is about to deploy). <u>NAVADMIN 112/21</u> outlines that "the CO will respond to the request within a framework that ensures readiness by minimizing impacts to the mission (including deployment, operational, training, and exercise critical skills availability), as well as to the morale, welfare, good order and discipline of the command." The policy outlines additional stipulations the CO must follow to support service members in their Transgender Care Plan. The CO is required to respond, in writing, to the Transgender Care Treatment memo (routed by the service member to the CO) within 90 working days.

No medical or surgical treatment can begin until the CO has signed an approval of the care plan (with the service member's acknowledgment).



Following care plan approval, service members should schedule an endocrinology appointment to begin the process of receiving hormones.

Service members are no longer required to be on LIMDU while initiating Gender Affirming Hormone Therapy (GAHT).

Urology / sperm bank).



#### SECNAV INST 1000.11A (27 June 2023)

 This instruction establishes the Department of the Navy (DON) policy for the accession and service of Transgender Sailors and Marines, to include the process for Transgender service members to transition gender while in service.

#### DHA-PI 6025.15 (13 May 2023)

• This policy establishes DHA's procedures to provide healthcare for Transgender and genderdiverse (TGD) service members and establishes the process for in-service gender transition.

Memorandum: Supplemental Health Care Program Blanket Waiver for Gender Affirming Surgical Evaluations and Medically Necessary Pre-Surgical Hair Removal (07 March 2023)

 This memorandum notifies Markets and MTFs that a blanket waiver was approved for Supplemental Health Care Program (SHCP) requests for gender affirming surgery pre-operative evaluation and pre-surgical medically necessary hair removal by laser or electrolysis of the requested gender affirming surgery areas.

#### NAVADMIN 112/21 (03 July 2021)

- This policy certifies that no individual, solely based on their gender identity, will be denied accession into the military, involuntary separated or discharged from the military or denied reenlistment or continuation of service.
- This policy outlines the protocol for service members seeking a medical diagnosis of gender dysphoria and a statement of medical necessity.

#### MARADMIN 260/21 (14 May 2021)

- This policy provides interim guidance on DoD policy changes regarding military service by Transgender persons and persons with gender dysphoria.
- This policy outlines the course of action for receiving gender affirming care and appropriate approval from COs in this process.

# **DoD Instruction 1330.28: In-service Transition for Transgender Service Members** (30 April 2021)

- The policy grants that the military will provide service members a process by which they may transition gender while serving.
- The Defense Health Agency (DHA) will develop clinical practice guidelines to support the medical treatment of service members diagnosed with gender dysphoria.



## **Available Resources for Transgender Service Members**

## Journey Support Group at Navy Medical Center (NMC) Portsmouth

- Aimed for active duty service members who identify as LGBTQ+ to cope with stress related to gender/sexual orientation.
- Expectation for participating members to attend all sessions and complete assignments between sessions.
- To support service members, please send a referral to Adult Mental Health and specify that the referral is for the Journey group. Location/Date/Time: Wednesdays from 1300 – 1400 ET at Outpatient Adult Mental Health Clinic, 1<sup>st</sup> Floor, Building 3, NMC Portsmouth Point of Contact (POC): Dr. Mary Brinkmeyer (757-953-7641).

## **Leadership Resource**

United States Navy Transgender and Gender Transition: Commanding Officer's Toolkit

## **Provider Resource**

<u>TransLine Prescriber Guidelines</u>

## **Resources for LGBTQIA Service Members**

- Five Action Steps for Sexual Health: "Embrace your Sexual Orientation and Gender Identity"
- <u>Modern Military Association of America: America's largest non-profit organization for the LGBTQ</u> <u>military and veteran community</u>
- SPART\*A: An advocacy group for Transgender military members, veterans, and their families

## Mental Health Resources

- Navy Chaplain Care
- <u>Psychological Health Resource Center</u>
- <u>Psychological Health Center of Excellence</u>
- Get Head Strong
- <u>GiveAnHour</u>
- <u>Wounded Warrior Project</u>
- My Navy Portal, Sailor and Family Support
- Navy and Marine Corps Public Health Center

## Gender-Inclusive Care Language Graphics/Guides

- <u>Gender Unicorn Graphic</u>
- CDC's Health Equity Guiding Inclusive Communication
- Provincial Health Services Authority: Gender Inclusive Language Guide

