

State of Vermont Agency of Human Services 280 State Drive Waterbury, VT 05671-1000 www.humanservices.vermont.gov

Jenney Samuelson, *Secretary* [phone] 802-241-0440 [fax] 802-241-0450

Date: October 18, 2022

Re: All Public Comments Received on Global Commitment Resister (GCR) <u>Policy 21-068, Change to</u> <u>Hysterectomy Prior Authorization Requirements</u>

Comment 1:

To Whom it May Concern,

I am writing in regards to the change of policy that removed prior authorization requirements for hysterectomy for all surgical procedures except those that are gender affirming. As a healthcare provider, I support any policy change that reduces administrative burden. However, to leave out gender affirming surgeries is blatantly discriminates against the transgender population. Whether or not a gender affirming hysterectomy is medically necessary should be a decision made between a the person who may have the surgery and their doctor. No insurance company should have final say in this regard via the need for prior authorization. I am a physical therapist and have many transgender clients who are have been negatively impacted by discrimination in healthcare. This policy adds one more example of this. Please consider changing this policy so that gender affirming hysterectomies can also performed without prior authorization.

Sincerely,

Michelle Downing DPT CFMT OCS

Owner, Integrative Physical Therapy

Comment 2:

Hello,

My name is Zoe Silverman and I am a registered voter in the state of Vermont as well as a heath care recipient. I am extremely frustrated by the Change to Hysterectomy Prior Authorization Requirements policy. I agree with the first half of the statement, but the inclusion of hysterectomies for gender related purposes feels backwards and illogical. Transgender Vermonters and Vermonters and deserve the same rights and protections under the law. This policy change further establishes transgender citizens and as a second and separate class, a violation of our states principals. Please remove this barrier to healthcare and give transgender Vermonters the same freedoms as cisgender Vermonters.

Please do what is right and do not be remembered for this regressive action, Zoe Silverman

Comment 3:

It's great that Vermont is taking steps to make reproductive healthcare more accessible, reducing the hurdles necessary to have a hysterectomy for low-income (Medicaid-qualifying) Vermonters. However, it's essential that any steps we take to solidify reproductive care access InCLUDE trans and non-binary folks. Reproductive care is not a women's issue but a people's issue, and if you don't think the exact same far-right christian agenda is coming for the meager protections we have in place for LGBTQ+ folks then you're fooling yourself. It's not the time to be saying some people's access is more worthy of protection than others.

Thanks for hearing my comment.

Madeleine Sutton-Smith

Medicaid Recipient

Worcester, VT

Comment 4:

To Whom it May Concern:

I stand with the Pride Center of Vermont and with their statement on the Change to Hysterectomy Prior Authorization Requirements. The Pride Center's letter, in part, states the following:

"Your policy summary provides no justification nor reasoning for this exclusion other than to emphasize that hysterectomy surgical procedures related to gender reaffirming surgery will still require prior authorization, therefore calling out and targeting already marginalized people in our state. We implore you to reconsider the exclusion of gender reaffirming surgery in this policy change and to strive for health equity for all populations, especially for vulnerable Vermonters participating in the Medicaid program."

Do not let this discriminatory policy to move forward. All people deserve autonomy over their bodies.

Christopher Balzano

Comment 5:

Dear Gentlepersons of the Medicaid Policy Unit,

My name is Dr. Kym Boyman. I am a gynecologic surgeon who founded and practices at Vermont Gynecology in South Burlington, Vermont.

As a surgeon who has performed hysterectomies for 22 years, including for gynecologic problems (e.g. fibroids and the like) and for gender affirmation, I agree with and applaud your

assessment that hysterectomy is "a procedure that is frequently approved and no longer necessary to require prior authorization," therefore creating unnecessary administrative burden.

But I am puzzled by and strongly disagree with your exclusion of gender affirming hysterectomies from this assessment.

There is no legitimate rationale to continue requiring prior authorizations for *any* hysterectomies. Surgeons bear and take seriously the responsibility to ensure that hysterectomy (and any surgery) is appropriate for any given patient, which is why these surgeries are "frequently approved". Gender affirming hysterectomies are no different, and to continue requiring prior authorizations for those alone suggests unfair bias and paternalism, and will continue to create unnecessary administrative burdens for DVHA and for practices. The AMA and many other medical associations have consistently deemed gender affirming hysterectomies to be medically necessary, and it is harmful to patients to create barriers to this care. It also signals, perhaps inadvertently, mistrust of these patients' doctors who routinely and carefully counsel our patients before making a plan for surgery.

As such, please delete the words "not related to gender reaffirming surgery" from the paragraph below. (Also of note, the term more accurately is 'gender affirming' rather than 'gender reaffirming'.)

GCR 21-068 PROPOSED

Change to Hysterectomy Prior Authorization Requirements

Policy Summary:

The Department of Vermont Health Access (DVHA) will no longer require prior authorizations for hysterectomy surgical procedures not related to gender reaffirming surgery effective July 1, 2022. As a result of Act 140 from the 2020 Vermont Legislative session and a DVHA initiative to reduce administrative burden, DVHA identified hysterectomy surgical procedures as a procedure that is frequently approved and no longer necessary to require prior authorization.

Thanks for your consideration, and please feel free to call or email me with any questions.

Sincerely,

Kym Boyman, MD, FACOG Vermont Gynecology 1775 Williston Rd., Ste. 110 South Burlington, VT 05456 O) 802-735-1252 F) 802-862-9637 C) 802-777-8550

Comment 6:

Hello,

As a family physician, I support removing the prior authorization requirement for hysterectomy from the Medicaid state plan. I do not believe that the indication of gender affirming should be singled out from other indications and require prior authorization. The decision to undergo hysterectomy is one that is taken seriously by individuals in consultation with their primary care providers and surgeons after all risks and benefits have been considered. This is a thoughtful decision for all indications. An insurance company should not be positioned to determine whether one person's gender dysphoria is more or less important than another person's heavy menstrual bleeding when considering hysterectomy. It is well established that allowing people to align their bodies with their gender identity has a positive impact on a person's health. I support empowering gender diverse individuals. Allowing hysterectomy for gender affirmation to be included with all other indications for hysterectomy removes barriers to care from this already marginalized population.

Th opinions expressed above represent my own opinions and not those of my institution or employer.

Anja Jokela, MD

June 30, 2022

Comment 7:

To the Medical Policy Unit,

I welcome the opportunity for public comment regarding GCR21-068 - Proposed Change to Hysterectomy Prior Authorization Requirements.

As a community physician who has provided gender affirming hormone therapy since 2004, I am baffled and angered by your exclusion of gender affirming hysterectomies.

Over the years, I have participated in discussion with Vermont Medicaid on improving access to health care for Trans/NB Vermonters. Vermont Medicaid has been responsive and progressive with ongoing improvements in access to care. Gone are the days when images of a trans woman's breasts were reviewed as part of the prior authorization process for breast augmentation.

Between the evolution of Vermont Medicaid's surgical and medical coverage, the passing of Insurance Bulletin 174 and an every widening group of trans advocates and medical providers, our state has become a true leader in providing accessible and affordable Trans Affirmative Health care.

Which brings us back to GCR21-068, a proposal that seems to be in fact, going back in terms of providing access and decreasing barriers.

My colleague Dr. Kym Boyman, the Pride Center, Vermont Legal Aide and Planned Parenthood of NE have already eloquently spoken.

Please reconsider your plan to require prior authorization for gender affirming hysterectomies. They are truly medically necessary, as are the hysterectomies you plan to allow to without prior authorization. We should be continuing to work together to remove barriers to care for Trans/NB Vermonters.

Sincerely,

Rachel Inker , MD Associate Medical Director Riverside Health Center Community Health Centers of Burlington 617 Riverside Avenue Burlington, VT 05401 (W)802 864-6309 (C 802 598-9554

Comment 8:

Hi,

I am writing for the open comment period to implore you to please remove prior authorization not just for cis women needing hysterectomies, but also for trans people needing hysterectomies for gender-affirming care. One of my children is a person who could need this care, and I can see firsthand how removing as much gatekeeping as possible is so important for mental and physical health.

Thank you, Season D.

Comment 9:

To whom it may concern:

Why are you excluding gender-affirming hysterectomies from the prior authorization waiver? I'm a transgender man in Vermont and will be on Medicaid starting this year. My hysterectomy is equally medically necessary and transgender people are subject to undue administrative burden across the board. I've had about \$150 in costs (a lower amount since I already have an established relationship with a therapist) and hours on the phone just to get approved for a hysterectomy, as well as having to write humiliating and belittling letters to my insurance company. Is this not a huge example of administrative burden? Be a leader and expand your ruling to include gender-affirming hysterectomy procedures. Vermont needs to be an ally to its transgender residents.

Thank you,

Comment 10:

To Whom It May Concern: I became aware of your Global Commitment Register change to Hysterectomy Prior Authorization Requirements [GCR 21-068] and I have significant concerns about the exclusion of gender reaffirming surgery within this proposed change. In my work, I support LGBTQ+ (lesbian, gay, bisexual, transgender, queer, and questioning) Vermonters. For too long our state's systems have put an undue burden on our community to prove and validate what we already know to be true: that we know our bodies best and the care that we need.

This proposed change creates a discriminatory policy that treats a gender reaffirming surgery prescription as one that needs additional consideration, which I can only assume is due to bias and prejudice against transgender Vermonters. Your policy summary provides no justification nor reasoning for this exclusion other than to emphasize that hysterectomy surgical procedures related to gender reaffirming surgery will still require prior authorization, therefore calling out and targeting already marginalized people in our state. I implore you to reconsider the exclusion of gender reaffirming surgery in this policy change and to strive for health equity for all populations, especially for vulnerable Vermonters participating in the Medicaid program.

Thank You,

Allison Jacob MSOM, L.Ac., Dipl. OM. (She/Her) Earth Sea Acupuncture 87 South Main St. Waterbury VT, 05676 802-560-5499 www.earthseaacupuncture.com

Comment 11:

To DVHA Commissioner Andrea De La Bruere;

I am writing in regards to the Hysterectomy Prior Authorization Requirement changes to the Medicaid State Plan (GCR 21-068). I am dismayed that, although this is the step in the right direction for bodily autonomy for some, it still excludes transgender and non-binary Vermonters simply based on their need for gender reaffirming surgery.

Ignoring the needs of some Vermonters is discriminatory and has no place in our society. Furthermore, it ignores bodily autonomy and their right to self-expression however is most comfortable and necessary to them. Finally, it ignores medical professionals' recommendations and those who aim to do right by their patients. As a society, we must trust medical professionals and their patients to be able to best determine the proper course of action of every medical decision they make. The examination room has no place for government oversight and regulation.

Gender affirming surgery and healthcare can and will save lives. Excluding vulnerable Vermonters from life-saving healthcare sets a dangerous precedent and must be reevaluated with organizations and folks most affected by this potentially dangerous omission.

Katie La Creta Montpelier

Comment 12:

For public commenting period for GCR 21-068.

Given that the public statement on this change policy to prior authorization for hysterectomy have no justification and background as to why gender affirming surgeries were excluded from this Medicaid policy such an obvious bias and discrimination against transgender and non-binary Vermonter, it is clear this policy should not be put through into a change with Vermonts Health Care Access.

Trans and non-binary Vermonters especially BIPOC folks are systemically discriminated against. In accessing health care this bias is no different and with higher rates of poverty and being underinsured they are more likely to be on Medicaid. Making these life saving procedures already difficult to access riddled with even more barriers is creating unsafe and dangerous situations for trans folks.

I implore you to reconsider the exclusion of gender affirming surgery in this policy change and to strive for health care access for all Vermonters.

Lily Bradburn

Burlington VT

Comment 13:

Please note my objection to the exclusion of gender affirming surgery from coverage without prior approval. Requiring people seeking gender affirming surgery to get authorization prior to coverage is discrimination and putting them in a place that is less than people seeking surgery for all other reasons.

We as a state need to show that we believe that all of our citizens are equal and deserving of equal coverage.

Sincerely,

Miccal McMullan

Comment 14:

Pride Center of Vermont 255 S Champlain St., Ste. 12 Burlington, VT 05401

June 16, 2022

Medicaid Policy Unit 280 State Drive, Center Building Waterbury, VT 05671-1000

To Whom It May Concern:

Pride Center of Vermont became aware of your Global Commitment Register change to Hysterectomy Prior Authorization Requirements [GCR 21-068] and our organization has significant concerns about the exclusion of gender reaffirming surgery within this proposed change. In our work, we support LGBTQ+ (lesbian, gay, bisexual, transgender, queer, and questioning) Vermonters in overcoming the many barriers to services and care including, accessing safe and affirming healthcare and mental health providers, and addressing discrimination in service delivery. For too long our state's systems have put an undue burden on our community to prove and validate what we already know to be true: that we know our bodies best and the care that we need.

This proposed change creates a discriminatory policy that treats a gender reaffirming surgery prescription as one that needs additional consideration, which we can only assume is due to bias and prejudice against transgender Vermonters. Your policy summary provides no justification nor reasoning for this exclusion other than to emphasize that hysterectomy surgical procedures related to gender reaffirming surgery will still require prior authorization, therefore calling out and targeting already marginalized people in our state.

We implore you to reconsider the exclusion of gender reaffirming surgery in this policy change and to strive for health equity for all populations, especially for vulnerable Vermonters participating in the Medicaid program.

In Solidarity,

Mike Bensel Executive Director

Kell Arbor Director of Health & Wellness Program

Emily Russo Transgender Program Coordinator

VERMONT LEGAL AID, INC.

Comment 15

OFFICES:

BURLINGTON RUTLAND ST. JOHNSBURY DISABILITY LAW PROJECT 264 NORTH WINOOSKI AVE. BURLINGTON, VERMONT 05401 (802) 863-5620 (VOICE AND TTY) FAX (802) 863-7152 (800) 747-5022

OFFICES:

MONTPELIER SPRINGFIELD

June 30, 2022

Medicaid Policy Unit Sent to: AHS.MedicaidPolicy@vermont.gov

Re: Proposed GRC 21-068 Change to Hysterectomy Prior Authorization Requirements

Dear Medicaid Policy Unit

We appreciate and support the general elimination of Prior Authorization requirements for hysterectomies. However, are writing to oppose the exclusion of hysterectomy surgical procedures for the purpose of gender affirmation from the list of surgeries that no longer require Prior Authorization from Medicaid.

We appreciate reducing administrative burden through eliminating Prior Authorization requirements. However, to make gender-confirming hysterectomies go through the Prior Authorization process, while other hysterectomies do not, is explicitly discriminatory.

The Health Care Advocate helpline has worked with multiple Vermonters where Prior Authorization requirements have created barriers, delays, and even prevented them from getting necessary gender affirming care. The proposed rule puts a disproportionate burden on Vermonters seeking gender reaffirmation surgery.

The Affordable Care Act (ACA) prohibits discrimination on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), in covered health programs or activities. 42 U.S.C. § 18116(a). This prohibition includes discrimination on the basis for gender identity in covered programs and activities, including Medicaid.

Vermont statutes also prohibits such discrimination

(a) An owner or operator of a place of public accommodation or an agent or employee of such owner or operator shall not, because of the race, creed, color, national origin, marital status, sex, sexual orientation, or gender identity of any person, refuse, withhold from, or deny to that person any of the accommodations, advantages, facilities, and privileges of the place of public accommodation. 9 V.S.A. §4502. It is clear that the GCR 21-068 explicitly discriminates against people seeking hysterectomies because of their medical need for gender affirmation surgery. This violates state and federal law. Please remove this exception from your proposed change.

Thank you,

/s/ *Barbara Prine* Barbara Prine Staff Attorney, Disability Law Project /s/ Marjorie Stinchcombe Marjorie Stinchcombe Helpline Director, Office of the Healthcare Advocate

Planned Parenthood® of Northern New England

Comment 16

June 30, 2022

Medicaid Policy Unit 280 State Drive, Center Building Waterbury, VT 05671-1000 via email to <u>AHS.MedicaidPolicy@vermont.gov</u> RE: GCR 21-068 Proposed Change to Hysterectomy Prior Authorization Requirements

To Whom It May Concern:

Planned Parenthood of Northern New England (PPNNE) submits this public comment in support of reducing the burden of prior authorization for hysterectomies for all Vermonters, without privileging cisgender Vermont Medicaid beneficiaries over transgender Vermont Medicaid beneficiaries.

PPNNE is dedicated to providing and promoting access to care, so all people can make voluntary choices about their reproductive and sexual health. Providing gender affirming care, referrals, and other support for Vermonters seeking hysterectomies are integral to PPNNE's work as the largest reproductive health care provider in northern New England. As a health care organization that provides care for many Vermont Medicaid beneficiaries, we support the intended reduction in administrative burden due to prior authorizations.

However, DVHA's proposed change eliminates Medicaid prior authorizations for all cisgender people getting hysterectomies, but continues to require extensive prior authorization for transgender, non-binary, agender, and other non-cisgender people in need of the same procedure. This barrier will have a discriminatory impact, leading to unequal access to hysterectomies among our patients on the basis of gender identity.

To promote equitable access to care, PPNNE recommends reducing prior authorization requirements for hysterectomy regardless of gender identity.

Sincerely,

-DocuSigned by:

Lai Williams B18B34099F5843A... Kai Williams Interim Co-CEO, Senior Vice President of Health Care Delivery