



September 6, 2018

Mr. Robert Wilkie  
Secretary  
U.S. Department of Veterans Affairs  
810 Vermont Ave, NW  
Washington, DC 20420

RE: Notice of Petition for Rulemaking and Request for Comments—Exclusion of Gender Alterations from the Medical Benefits Package

Dear Secretary Wilkie:

On behalf of the American Speech-Language-Hearing Association, I write to offer comments on the Notice of Petition for Rulemaking and Request for Comments—Exclusion of Gender Alterations from the Medical Benefits Package.

The American Speech-Language-Hearing Association (ASHA) is the national professional, scientific, and credentialing association for 198,000 members and affiliates who are audiologists; speech-language pathologists; speech, language, and hearing scientists; audiology and speech-language pathology support personnel; and students.

ASHA understands that the U.S. Department of Veterans Affairs (VA) published this notice in response to a petition requesting that the VA amend its medical regulations by removing the provision that excludes “gender alterations” from its medical benefits package.

ASHA is seeking clarification on the term “gender alterations” to provide enhanced transparency to providers. Providers indicate an inconsistency in coverage of services that are not clearly defined under “gender alterations”. Voice treatment is the second most common reported medical intervention, behind hair removal, for transgender individuals assigned male at birth.<sup>1</sup> Voice treatment includes treatment services to improve overall voice quality, which is often provided to those seeking transgender voice treatment. Under this regulation, it is unclear if those services would be excluded if they are considered part of “gender alterations”. Ensuring the coverage of medically necessary voice treatment for all individuals—including transgender individuals—is essential to establishing a comprehensive speech-language pathology benefit.

Medical associations and experts agree that medical and surgical treatment of gender dysphoria is safe, effective, and medically necessary health care.<sup>2,3,4,5,6,7</sup> In addition, there is growing recognition and coverage of transition-related care by a range of payers. As of 2018, 14 Medicaid agencies have affirmative coverage laws and 18 states and the District of Columbia have coverage requirements for payers in the private insurance market.

**ASHA supports the petition requesting that the VA amend its medical regulations by removing the provision to exclude “gender alterations” from its medical benefits package.**

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Thank you for the opportunity to provide comments on the VA's current exclusion of "gender alterations" from the medical benefits package. If you or your staff have any questions, please contact Daneen G. Sekoni, MHSA, ASHA's director of health care policy, health care reform, at [dsekoni@asha.org](mailto:dsekoni@asha.org).

Sincerely,



Elise Davis-McFarland, PhD, CCC-SLP  
2018 ASHA President

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<sup>1</sup> National Center for Transgender Equality. (2015). *The Report of the 2015 U.S. Transgender Survey*. Retrieved from <http://www.transequality.org/sites/default/files/docs/usts/USTS%20Full%20Report%20-%20FINAL%201.6.17.pdf>.

<sup>2</sup> American Medical Association. (2016). *Resolution H-185. 950: Removing Financial Barriers to Care for Transgender Patients*. Retrieved from <https://policysearch.ama-assn.org/policyfinder/detail/financial%20barriers%20transgender?uri=%2FAMADoc%2FHOD.xml-0-1128.xml>.

<sup>3</sup> American Psychiatric Association Position Statement on Discrimination Against Transgender and Gender Diverse Individuals, retrieved from <https://www.psychiatry.org/File%20Library/About-APA/Organization-Documents-Policies/Position-2018-Discrimination-Against-Transgender-and-Gender-Diverse-Individuals.pdf>.

<sup>4</sup> American Academy of Family Physicians. (2012). *Resolution No. 1004 Transgender Care*. Retrieved from [https://www.aafp.org/dam/AAFP/documents/about\\_us/special\\_constituencies/2012RCAR\\_Advocacy.pdf](https://www.aafp.org/dam/AAFP/documents/about_us/special_constituencies/2012RCAR_Advocacy.pdf).

<sup>5</sup> American Public Health Association. (2016) *Promoting Transgender and Gender Minority Health through Inclusive Policies and Practices*. Retrieved from <https://www.apha.org/policies-and-advocacy/public-health-policy-statements/policy-database/2017/01/26/promoting-transgender-and-gender-minority-health-through-inclusive-policies-and-practices>.

<sup>6</sup> World Professional Association for Transgender Health. (2016). *Position Statement on Medical Necessity of Treatment, Sex Reassignment, and Insurance Coverage in the U.S.A.* Retrieved from <https://www.wpath.org/media/cms/Documents/Web%20Transfer/Policies/WPATH-Position-on-Medical-Necessity-12-21-2016.pdf>.

<sup>7</sup> Cornell University. (2017). *What does the scholarly research say about the effect of gender transition on transgender well-being?* Retrieved from <https://whatweknow.inequality.cornell.edu/topics/lgbt-equality/what-does-the-scholarly-research-say-about-the-well-being-of-transgender-people/>.