

# TRANSGENDER HEALTH INSURANCE BUYER'S GUIDE COLORADO 2019

## IN COLORADO:

You cannot be denied or limited coverage based on **“pre-existing conditions”** like sexual orientation, gender identity, or health conditions, including HIV status.

You **cannot be charged more** for health insurance or services because of your sexual orientation or gender identity.

You have a right to **medically necessary services**, as determined by you and your provider (not the insurer), if those services are provided to other patients without regard to their sexual orientation or gender identity.

All free **preventative services** offered to non-transgender patients also apply to transgender patients.

## KNOW WHAT'S COVERED IN HEALTH PLANS SOLD IN COLORADO

	Bright Health	Cigna	Denver Health Medical Plan (Elevate)	Friday Health Plans of Colorado	Anthem (HMO Colorado)	Kaiser Permanente	Rocky Mountain Health Plan
Removed blanket transgender exclusions?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
List covered services?*	No	No	No	No	No	No	No
Requires prior-authorization? **	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Mental and behavioral health coverage?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Puberty blocker coverage?	Yes	Yes	Yes	Yes	Yes	Yes	No
Hormone therapy coverage? ***	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Gender-affirming surgery coverage?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Has a transgender- or lgbtq-specific health navigator?	No	No	Yes	No	No	Yes	No

\* All plans state that they cover “medically necessary” treatments, although they may not specifically state which services are covered. Some plans have exclusions for services that are considered to be “cosmetic” in nature. It is recommended that individuals review each plan and talk to the insurance company for more in-depth information on covered services.

\*\* Prior-authorization through your doctor may be required to access transgender-specific insurance benefits, including surgery and hormone therapy. Some procedures may be considered cosmetic in nature and not covered. Details for insurance plan exclusions and limitations may be found at [www.connectforhealthco.com](http://www.connectforhealthco.com) or by contacting the insurance carrier directly.

\*\*\* For more information on which forms of hormone therapy are covered and how medications are tiered, see the document titled “Hormone Therapy Prescription Coverage Guide.”

Details for insurance plans and requirements can be found at [www.connectforhealthco.com](http://www.connectforhealthco.com).

## IF YOU ARE WRONGFULLY DENIED **MEDICALLY NECESSARY** SERVICES FROM YOUR HEALTH INSURANCE CARRIER, IT'S YOUR RIGHT TO:

- **APPEAL THE DECISION DIRECTLY WITH THE HEALTH INSURANCE CARRIER.** If your health plan ID card has a “CO-DOI” designation on it, your plan is subject to Colorado’s insurance laws and rules, including Bulletin No. B-4.49. Learn more at <https://one-co.co/doibulletin>.
- **FILE A COMPLAINT WITH THE COLORADO DIVISION OF INSURANCE** at [www.dora.colorado.gov/insurancecomplaints](http://www.dora.colorado.gov/insurancecomplaints)
- **FILE A COMPLAINT WITH THE COLORADO CIVIL RIGHTS DIVISION** at [www.colorado.gov/pacific/dora/civil-rights](http://www.colorado.gov/pacific/dora/civil-rights)

## QUESTIONS?

Need assistance appealing your denial or filing a complaint? Contact [health@one-colorado.org](mailto:health@one-colorado.org).