

GENDER- AFFIRMING SURGERIES

Using University of Arizona
United Healthcare
Student Resources
(2023)



**CAMPUS
HEALTH**

Counseling & Psych Services

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WHERE TO START

From finding a surgeon, to navigating insurance, getting gender-affirming surgery can feel overwhelming. So, we've put together some information that can be helpful for students using the United Healthcare Student Resources plan!



PROCESS OVERVIEW

1. Finding a surgeon.

2. Letter(s) of support from a therapist.

3. Request surgery referral from CAPS
Care Coordinator.

4. Schedule a consultation with surgeon.

5. Consultation

6. Get scheduled for surgery.

7. Care-planning

8. Surgery!

LETTERS OF SUPPORT

According to United, letter(s) of support for surgery must be written by a licensed therapist. Currently, you need one letter for top surgery and two for bottom surgery.



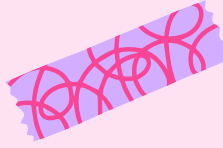
If you have a therapist, they can review the WPATH standards of care here:

<https://www.wpath.org/publications/soc>

If you do not have a therapist or need an additional letter, you can receive one from the [LGBTQ+ Resource Center counselor](#) (at no-cost) or a CAPS provider.

Financial assistance is available for all CAPS services.

CAPS Care Coordinators can also help you find an affirming therapist off-campus.



SURGERY REFERRALS

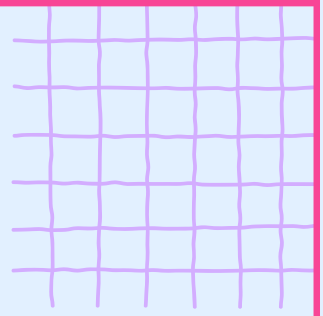
**Once you have found a surgeon,
call CAPS at (520) 621-3334 and
ask for a Care Coordinator.**



Care Coordinators are able to generate referrals for plastic surgery in the United system. This way your surgeon's office can bill your insurance.



CONSULTATIONS



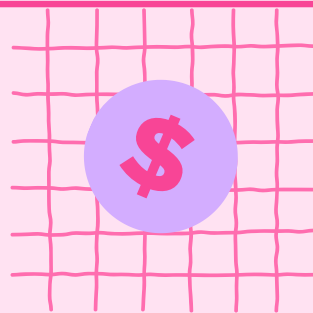
A consultation is an opportunity to ask all of your questions and get to know your surgeon.

Again, ask lots of questions! This is when you can ask to see results photos of surgeries they have done before and collaborate about your desired outcomes.



COVERAGE

(in-network)



You are responsible for paying 20% of the total cost of services (AKA your "coinsurance") when:

- You have a referral for surgery in the United system
- You are seeing an in-network provider
- You have met the \$250 deductible

The total cost includes surgery, hospital bills, anesthesia, etc. **The maximum amount out-of-pocket amount is \$1500.** If you reach this amount in a policy year, the rest of your covered services are paid by insurance.

Please note, this does not guarantee payment. These are rough estimates and things change! If you are curious about the cost of your surgery and services, contact the administrative staff at your surgeon's office about their rates with United. Ask questions!

If you have specific questions about the UHC SR policy, contact the Student Insurance Office at (520) 621-5002 or email ssurgerysrs@uhcsr.com.

OUT-OF-NETWORK



If you want to see a surgeon that is not in-network with United, there are still ways to bill insurance!

If there **are no** in-network providers that perform your surgery in Arizona, you can ask the surgeon to file a “**single-case agreement**” for in-network rates.

Make sure to mention this to your surgeon/their office so that they can work directly with United Healthcare Student Resources.

If there **are** in-network surgeons available for your procedure but you prefer to see an out-of-network surgeon, a single-case agreement is not an option. Therefore your services are processed as out-of-network and will be billed accordingly.

In this scenario, **be prepared to pay out of pocket for everything initially**. Once you receive an itemized statement with codes for services, you can submit a claim to UHC SR for **partial reimbursement**. Ultimately, this is a more expensive option.

The coinsurance for out-of-network providers is 50% (of what United typically covers). You'll have to meet a \$1000 deductible and \$3000 out-of-pocket maximum.

If you have questions, feel free to call a CAPS Care Coordinator or the Student Insurance Office for help!

SURGEONS

The following surgeons in Arizona are known to be in-network with United.

Dr. Steven Turkeltaub (Scottsdale)

Top Surgeon

<https://www.turkeltaub.com>

(480) 451-3000

Hess, Sandeen & Lee Plastic Surgery (Tucson)

Top Surgeon

<https://hessandsandeen.com/>

(520) 297-3300

Craft MD (Phoenix)

Top Surgeon

<https://www.drcraft.com/>

(602) 584-8883



SURGEONS CONTINUED

The following surgeons perform gender-affirming surgeries in Arizona, but are not contracted with United.

Ethan E. Larson, MD

Top Surgeon

7005 N Oracle Rd., Tucson,

AZ 85704

(520) 447-0156

<https://www.larsonplasticsurgery.com/>

The Meltzer Clinic

All surgeries

Office : 480-657-7006

Email:

info@themeltzerclinic.com

<https://themeltzerclinic.com/>

Dr. Raad M. Taki, MD

Top Surgeon

4580 E Camp Lowell Dr.,

Tucson, AZ 85712

(520) 881-3232

<https://takiplasticsurgery.com/>

Valladolid Plastic Surgery

Top, bottom surgery and

FFS

Scottsdale, Mesa and

Phoenix

Phone: (480) 770-5015

<https://www.drivplastics.com/>

Dana Balderamma, MD

Top Surgeon

1945 Mesquite Ave, Ste D,

Lake Havasu City, AZ 86403

Office: (928) 453-9487

<https://balderramamd.com/>

Gwen Maxwell, MD, FACS

Breast augmentation only

2490 E. River Road, Ste 100,

Tucson, AZ 85718

520-751-1225

Email:

maxwellinfo@maxwell-aesthetics.com

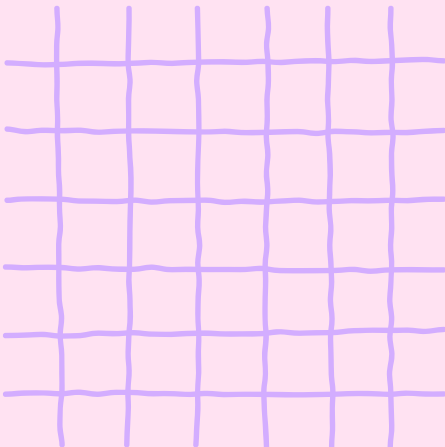


UnitedHealthcare®
StudentResources



**View full policy and criteria
for gender-affirming surgeries here:**

<https://www.uhcprovider.com/content/dam/provider/docs/public/policies/comm-medical-drug/gender-dysphoria-treatment.pdf>



INSURANCE GLOSSARY

Insurance has its own language! Here is a glossary with commonly used terms provided by UA Campus Health:

Insured - person/persons covered by the health plan.

Insurer - the company that manages your plan benefit.

Benefits - medical services/supplies you can receive by paying your premium.

Premium - amount paid to health insurance plans to remain active. Higher premiums usually mean lower deductible.

Deductible - the amount you pay for covered health care services before your health plan begins to pay.

Coinsurance - a set percentage you pay on the total cost of covered services after you meet your deductible.

Copayment - a fixed amount you pay each time for health services. Amount may fluctuate depending on services.

Referral - in some cases you may need a referral to visit a certain specialist. Without one, your health insurer may not cover the total cost.

In-Network - health services your health insurance has contracted with to deliver healthcare services to their members.

Out-Of-Network - health services your health insurance has NOT contracted with. This means you will pay more.

Out-Of-Pocket Maximum - the most you will pay for covered benefits in the plan year. If you reach the maximum, your health insurer pays 100% of any covered services for the rest of the year plan.