

University of Washington
Faculty Council on Benefits and Retirement
January 27, 2014, 2:30 pm – 4:00 pm
Gerberding 36

Meeting Synopsis:

- 1) Call to Order
 - 2) Discussion on Transgender Healthcare
 - 3) Good of the Order
 - 4) Review of the Minutes from May 20th and October 28th
 - 5) Adjourn
-

1) Call to Order

The meeting was called to order at 2:30 p.m. by Chair Emery.

2) Discussion on Transgender Healthcare

Bobbi Dalley (Associate Professor of Radiology) provided a presentation titled “Eliminating WA Transgender Healthcare Exclusions”. Dalley is an out and open transgendered (TG) faculty member who transitioned 4 years ago. The transition process is incredibly expensive for individuals without health care coverage and Dalley reported spending \$350,000 in personal costs.

The following summarizes the presentation

“TG health care has been excluded from health plans for a variety of reasons, including bias and discrimination and the misperception that TG surgery/therapy is experimental or simply cosmetic based on flawed studies in the 1980s. Dalley explained that TG individuals did have access to some form of TG health care but the “Hayes study” in 2005 effectively led to the loss of coverage. Many states are currently banning TG healthcare exclusions making it illegal for insurance companies to reject coverage, including:

- California
- Colorado
- Connecticut
- Oregon
- Vermont

Currently, UW undergraduate TG students have coverage under their health plans, as well as employees from large Washington-based companies such as:

- Microsoft
- Boeing
- Amazon
- Google

While undergraduate students have access to TG health care UW employees, graduate students and faculty are excluded. Kornberg explained that the Washington Public Employees Benefits Board (PEBB) controls the purchases of health care for all Washington public employees so UW has little control on changing current UW healthcare plans. Dalley stated their group has a multi-prong approach to addressing this issue with PEBB and wants to discuss this issue with faculty.

UW faculty health insurance options are available through the Uniform Medical Plan (operated by Regence Blue Shield), Group Health Cooperative and Kaiser. Current exclusions include:

- Uniform Medical Plan-Classic
- Sex reassignment which include drugs, surgery, services or supplies for sex/gender reassignment
- Group Health Cooperative-Classic
- Sex reassignment surgery, services and supplies
- Hormone therapy such as estrogen and testosterone
- Hormone/puberty blockers
- Psychotherapy
- Post-transition care such as gynecologic care and breast exams
- Mammography and breast procedures
- Gynecologic care such as PAP smear
- Prostate exams
- Electrolysis
- Breast augmentation/reconstruction
- Facial feminization surgery
- Tracheal shave
- Orchiectomy
- Genital reconstruction surgery such as vaginoplasty
- Bilateral mastectomy
- Hysterectomy
- Oophorectomy
- Metoidioplasty
- Phalloplasty

Dalley explained that TG exclusions need to be removed because TG health care is not only medically necessary but is the right thing to do. Additionally, Dalley stated that the costs to insurance plans are negligible. For example, by allowing TG coverage insurance premiums would increase approximately \$0.09 each year because the benefits are underutilized. While there is little data on how many undergraduates use their benefits students are paying approximately \$7-20 per month for hormone therapy. Importantly, there are few students who are receiving surgical care, if any.

Medical associations that support TG health care include:

- American Medical Association
- American Psychiatric Association
- American Psychological Association
- American Academy of Pediatrics

- American Congress of Obstetricians & Gynecologists
- World Professional Association for Transgender Health

Specifically, the American Medical Association policy statement says:

RESOLVED, That our American Medical Association support public and private health insurance coverage for treatment of gender identity disorder as recommended by the patient's physician. (American Medical Association HOD Resolution 122, 2008)

Dalley reported that 41% of TG people have attempted suicide in one point in their lives. This is compared to only 2% of the general US population so this is a considerable health issue which can be prevented by allowing TG health care.

TG health care is a low cost to insurance companies. A study conducted by UCLA found that 85% of employers that provided information on costs of adding coverage to their existing health benefits plans reported no additional costs to add the coverage.

The Washington Human Rights Commission released the following statement on its position to TG health care:

Sexual orientation, which includes gender identity and expression, is not a permissible consideration in insurance. Insurers may not refuse to issue or cancel or decline to renew insurance coverage on the basis of sexual orientation, nor may insurers offer different amounts of benefits payable, terms, rates, conditions, or types of coverage on the basis of sexual orientation."

Kornberg mentioned that in reviewing the Affordable Care Act it does not appear UW students would be impacted since the plan does not cover students. Since TG issues have been slowly gaining attention, especially in the Seattle area, it is just a matter of time when TG health care benefits will cover faculty. Current estimates indicate 50-100 graduate students would use these benefits if offered.

Discussions moved to legal actions. A question was raised asking why UW has not filed a lawsuit similar to Oregon. There was a lawsuit filed in Thurston County against the health care authority which was adjudicated. However, judge in the case had to base the decision on flawed data from 2005. If the same case was decided with today's data the final decision would have been much different.

Dalley stated that allowing TG health care at UW encourages diversity on campus and provides a competitive edge. For example, the UW Medical Center getting 100% on the Health Equality Index and Corporate Equality Index for a hospital requires being trans-friendly and having transgender services for patients and employees. Dalley stressed that UW would not want to lose potential faculty to Oregon, California or the City of Seattle because UW has discriminatory health care insurance plans. By having such plans it may cause potential or current faculty members who are transgendered, or faculty with transgender family members, to eliminate UW from their consideration because of these economically disadvantageous and discriminatory policies.

Dalley requested that the council consider this proposal and influence PEBB to remove these exclusions from UW's health plans by sending PEBB and UW Benefits Office a letter supporting the proposal. Specifically, Dalley is requesting the council to support removing TG health care exclusions. Kornberg explained that since PEBB coordinates the purchasing of benefits all her office can do is forward the

letter to PEBB. Dalley stated that their group will approach PEBB as well so a letter of support would be beneficial to the conversation.

Discussion ensued about specific health coverage that is excluded for TG individuals. A question was raised if there is coverage under the Affordable Care Act. That question still up in the air and has not been litigated yet. The Washington Department of Health states they believe it is covered but that does not mean anything until it is actually implemented. Discussion moved to the role of PEBB. PEBB is responsible for negotiating benefits when purchasing from insurance companies. If PEBB wants the coverage then they will purchase it. A comment was raised that PEBB specifically stated they did not want TG health care coverage.

Discussion moved to current coverage and the different types of reconstructive surgeries. Dalley's group is simply asking for parity in service coverage. The problem is where to draw the line for medical necessity and surgery that is considered "cosmetic". None of these procedures are painless and the individual must be willing to accept the serious consequences of these surgeries. A comment was raised that it is hard to deny this proposal when reviewing suicide rates.

Discussion moved to why TG health care is excluded. The main reasons are usually due to costs and politics. For example, there is concern about the increase of insurance premiums for health care that is considered "experimental". PEBB does not address this issue each year so TG health care is not constantly on the table for negotiation. PEBB meets in July which is why this conversation is important.

The council discussed how it could take action on this issue. Emery explained that the council is not in the position to take action since any position on the issue must go through the Faculty Senate. The real impact would result if the unions can support this proposal and leverage their influence. A suggestion was made to ask the Faculty Senate to see what action can be taken.

3) Good of the Order

Carole Diem is still researching tuition waiver benefits for faculty and staff. This will be an agenda item at a future meeting.

The retirement calculator is still in development and will be available soon.

Kornberg reported on the rollout of the Whole U program and its recent event which broke the world record for the largest kettlebell workout class. President Young suggested the event as an effort to bring attention to the Whole U which attracted 1,200 individuals. The event was held last Friday in Dempsey Stadium and included a 30-minute workout, t-shirts, vendors and a free kettlebell.

4) Review of the Minutes from May 20th and October 28th

Emery did not review the minutes so the council will approve them at the next meeting.

5) Adjourn

The meeting was adjourned at 3:30 p.m. by Chair Emery.

Minutes by Grayson Court, Faculty Council Support Analyst, gcourt@uw.edu

Present: **Faculty:** Emery (Chair), Breidenthal, Fernandes, Govin, Mittler

President's Designee: Kornberg
Ex-Officio Reps: Deardorff, Yorita
Guests:

Absent: **Faculty:** Joseph, Siegel
Ex-Officio Reps: Navarrete, Chamberlin