

Medicare coverage varies for transgender hormone therapies

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A new study has shown substantial variability in access to guideline-recommended hormone therapies for older transgender individuals insured through Medicare. The variability in Medicare coverage and out-of-pocket costs for feminizing and masculinizing therapies are detailed in an article published in *LGBT Health*.



The article entitled "Medicare Prescription Drug Plan Coverage of Hormone Therapies Used by Transgender Individuals" was coauthored by Michael Solotke, Yale University (New Haven, CT) and colleagues from San Francisco Veterans Affairs Medical Center (CA), University of California, San Francisco School of Medicine, Veterans Affairs Connecticut Healthcare System (West Haven, CT), Yale School of Medicine, Mayo Clinic (Rochester, MN), Yale School of Public Health, and Yale-New Haven Hospital.

Medicare <u>coverage</u> and out-of-pocket <u>costs</u> can vary widely depending on the medication regimen. Access to care and to certain medications may be limited to those with adequate means. The study showed that in 2018, the proportion of Medicare plans offering unrestricted coverage ranged from 5%-75% for masculinizing therapies and from 13%-100% for feminizing therapies. Out-of-pocket costs ranged from \$180-\$2,176 for masculinizing therapies and from \$72-\$3,792 for feminizing therapies in that same year.

"It is unfortunate when drug costs stand in the way of optimal treatment," says *LGBT Health* Editor-in-Chief William Byne, MD, Ph.D., Columbia University Vagelos College of Physicians and Surgeons, New York, NY. "To minimize this problem, prescribers should be prepared to direct low income and inadequately insured patients to assistance programs, when available, to defray costs, particularly for the gonadotropin releasing hormone agonists for which generic preparations are not yet available."

More information: Michael T. Solotke et al, Medicare Prescription Drug Plan Coverage of Hormone Therapies Used by Transgender Individuals, *LGBT Health* (2020). DOI: 10.1089/lgbt.2019.0306



Provided by Mary Ann Liebert, Inc

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