A GUIDE TO OUR GENDER AFFIRMING SERVICES FOR
TRANSGENDER, GENDERQUEER, GENDER EXPANSIVE
CLIENTS

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Dear Friend of Whitman-Walker Health:

Greetings to you from our innovative and affirming health care family! Welcome to Whitman-Walker Health. We want you to have the best patient care experience possible.

For this reason, we share this guide that is mindful of the experiences of our transgender, genderqueer, and gender-expansive clients. Affirming health care can be hard to find and often becomes more difficult in the transgender community.

We are committed to providing care that is supportive of transgender patients and anyone on the gender spectrum. We empower all persons to live healthy, love openly, and achieve equality and inclusion. We hope that this guide will help you access the health care and supportive services you need to thrive.

Yours in Service,

Naseema Shafi
Chief Executive Officer, Whitman-Walker Health

QUICK ACCESS GUIDE

MEDICAL, BEHAVIORAL AND SUPPORT SERVICES

Your medical provider will coordinate your care and referrals for services such as the ones listed below.

- Primary Medical Care
  - If you are under 18 years old, these services are available with parental consent.
- Gender Affirming Hormones
  - If you are under 18 years old, these services are available with parental consent.
- Letters & Referrals for Gender Affirming Surgeries
- Behavioral Care: Individual or Group Therapy
- Behavioral Care: Psychiatry

202.745.7000
appointments@whitman-walker.org
to schedule an appointment with a medical provider to establish a care relationship.

AESTHETIC SERVICES

- Botox, Dermal Fillers, Laser Hair Removal, Laser Genesis, and Spider Vein Treatment

Note: Whitman-Walker Health does not accept insurance for these services and out-of-pocket payment is due at the time of service.

202.745.7000
to schedule an aesthetics consultation.

PEER SUPPORT SERVICES

- One-on-One Sessions
- Group Sessions

202.939.7646
peersupport@whitman-walker.org
our coordinator will connect you to services.

LEGAL SERVICES

- Name and Gender Updates to Identity Documents
- Insurance Coverage Appeals
- Discrimination Claims

202.939.7630
contact-legal@whitman-walker.org

PUBLIC BENEFITS AND INSURANCE

- Questions About Insurance Coverage and Navigation

202.745.6151
insurance@whitman-walker.org
MEDICAL SERVICES

If you are a medical patient, your doctor or medical team member will be your coordinator of care at Whitman-Walker Health.

Our goal is to meet each patient’s overall health care needs through primary care in a comfortable, safe and respectful environment. We recognize the unique barriers that transgender and gender-expansive individuals face in seeking health services and seek to provide affirming care to all patients.

We provide dignifying and culturally competent medical care, including preventative exams and management of chronic and urgent health conditions. We have many board-certified medical providers of various specialties, including infectious disease experts that manage HIV, hepatitis B, and hepatitis C. We offer nationally recognized and award-winning care for the LGBTQ community.

We are pleased to offer the following specific types of medical care:

- Primary Care, including Gender Affirming Hormones
- Hormone Administration and Monitoring
- HIV & STI Testing, Counseling, and Prevention (PrEP and PEP)
- Specialized HIV, Hepatitis B, and Hepatitis C Medical Care
- Gynecological Screenings and Care
- Evaluation, Referral Recommendations, Coordination of Services, and Support for those seeking Gender Affirming Surgery
- Integrated Services with our Behavioral Health, Addictions, Dental and Legal Services Departments

If you have an urgent medical situation and cannot wait for an appointment with your regular medical provider, you can schedule a “sick” appointment by calling us at 202.745.7000, by emailing your request to appointments@whitman-walker.org, or by requesting an appointment in person. We will make every effort to schedule you as soon as an appointment is available. If you are experiencing a medical emergency, please call 911 or go to your nearest emergency room.

Whitman-Walker provides gender affirming services, including hormones, to minors ages 13 and over. Minors must have parental consent to receive primary medical care and gender affirming hormones.

Visit us at our state-of-the-art medical home at 1525 14th Street, NW.
GENDER AFFIRMING HORMONES: A TIMELINE

As part of the process of transition, some patients may seek gender affirming hormone therapy. To help you understand the effects, we want to share this information with you. Everybody is different. The rate and extent that your changes take place depend on many factors, including your genetics, the age at which you start taking hormones and your overall state of health.

Here is a timeline of changes when taking testosterone.

<table>
<thead>
<tr>
<th>EFFECT</th>
<th>EXPECTED ONSET</th>
<th>EXPECTED MAXIMUM EFFECT</th>
<th>REVERSIBLE or PERMANENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>► Increased body hair and facial hair growth</td>
<td>1-6 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>► Deepened Voice</td>
<td>3-12 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>► Clitoral Enlargement (by 1-3 cm)</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>► Male Pattern Baldness (hair loss at temples and crown of head; highly dependent on age and inheritance)</td>
<td>+12 months</td>
<td>Variable</td>
<td>Permanent</td>
</tr>
<tr>
<td>► Increased Muscle Mass and Strength (dependent on amount of exercise)</td>
<td>6-12 months</td>
<td>2-5 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Cessation of Menstrual Periods</td>
<td>2-6 months</td>
<td>N/A</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Body Fat Redistribution (decreased on buttocks/hips/thighs; increased in abdomen)</td>
<td>3-6 months</td>
<td>2-5 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Skin Oiliness/Acne (may be severe)</td>
<td>1-6 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Vaginal Atrophy (drying)</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Increased Libido (sex drive)</td>
<td>Variable</td>
<td>Variable</td>
<td>Reversible</td>
</tr>
</tbody>
</table>

Here is a timeline of changes when taking estrogen.

<table>
<thead>
<tr>
<th>EFFECT</th>
<th>EXPECTED ONSET</th>
<th>EXPECTED MAXIMUM EFFECT</th>
<th>REVERSIBLE or PERMANENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>► Breast Growth</td>
<td>3-6 months</td>
<td>2-3 years</td>
<td>Permanent</td>
</tr>
<tr>
<td>► Decreased Sperm Production/Maturation, Reduced Fertility</td>
<td>Variable</td>
<td>Variable</td>
<td>Possibly Permanent</td>
</tr>
<tr>
<td>► Decreased Testicular Volume/Size by 25-50 percent</td>
<td>3-6 months</td>
<td>2-3 years</td>
<td>Probably Permanent</td>
</tr>
<tr>
<td>► Thinning/Slow Growth of Body and Facial Hair</td>
<td>6-12 months</td>
<td>+3 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Softening of Skin/Decreased Oiliness</td>
<td>3-6 months</td>
<td>Unknown</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Body Fat Redistribution to more Feminine Pattern</td>
<td>3-6 months</td>
<td>2-5 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Decreased Muscle Mass and Strength</td>
<td>3-6 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Decreased Libido (sex drive)</td>
<td>1-3 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Decreased Spontaneous and/or Morning Erections</td>
<td>1-3 months</td>
<td>3-6 months</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Male Sexual Dysfunction (ex., erections not as firm)</td>
<td>Variable</td>
<td>Variable</td>
<td>Reversible</td>
</tr>
<tr>
<td>► Cessation of Male Pattern Balding (no regrowth, but loss stops)</td>
<td>1-3 months</td>
<td>1-2 years</td>
<td>Reversible</td>
</tr>
</tbody>
</table>
Our staff of culturally competent mental health clinicians have specialized knowledge and training in issues affecting the transgender community. We provide individual and group therapy, as well as one-on-one and group peer support. An initial screening appointment is necessary for admission to all behavioral health and peer support services.

**Individual and Group Psychotherapy:**
Individual therapy provides an opportunity to receive one-on-one support from a mental health professional. Group therapy brings together individuals with shared experiences in a group facilitated by a clinician. You do not have to be an existing primary medical patient to be eligible for group therapy; however, you must be a primary medical patient to be eligible for individual therapy. To learn more about individual or group therapy, please call the Behavioral Health Treatment Coordinator at 202.797.3539. An initial screening appointment is necessary for admission.

**Trans Spectrum**
This ongoing psychotherapy group provides a confidential forum for discussion, psychoeducation and social support for gender-queer and trans-identified individuals experiencing conflict/ambiguity around gender identity and sexual orientation.

**Youth Mental Health:**
Youth Mental Health services provide individual and group therapy for transgender and gender expansive young people ages 13-24. Youth seeking hormones or gender affirming surgery will have a mental health assessment with a mental health provider. This assessment may include a minimum of 3-6 sessions, and may include the recommendation to continue ongoing therapy or a psychiatry referral. We also provide free, trauma-focused mental health care to youth who have experienced or witnessed a crime. Therapy includes a variety of techniques including art, music, and sand play. To learn more about Youth Mental Health, please call 202.207.2361.

**Peer Support:**
Peer Support provides support from volunteer Peer Counselors and Peers with shared life experiences. Peer Counselors are not licensed mental health professionals, but have attended mandatory training by Whitman-Walker staff and are skilled in providing a safe, supportive environment focused on helping you feel less alone, validating your feelings and taking steps to achieve your goals. You do not have to be a medical patient to engage in individual or group Peer Support. All Peer Support services are free of charge. To find out more about our Peer Support Program, please call 202.939.7646 or email peersupport@whitman-walker.org. An initial screening appointment is necessary for admission.

**One-on-One Peer Support**
Peer counselors meet with peers for 50-minute sessions, once a week for 10 weeks.

**Trans Peer Support Group**
These groups are for individuals across the gender spectrum and in any stage of transitioning. The focus of the group is to promote social support and wellbeing for transgender, gender non-conforming and gender queer adults. Topics may include (but are not limited to) navigating transition, coming out, family and workplace issues, relationships, dating, etc.

Note: We also keep a list of community LGBTQ-friendly mental health providers. Insurance coverage may vary.
As an important component of our integrated care, Whitman-Walker is pleased to have a staff of experienced attorneys who provide legal assistance to our clients, people living with HIV and members of our LGBTQ communities. Our aim is to help you stay healthy, or become healthy, by helping you obtain good, affordable health insurance; protect yourself from discrimination if you are LGBTQ or living with HIV; vindicate your workplace rights; get the disability and other benefits you are entitled to if you are low income or too sick to work; protect yourself and your partner and other family in the event of medical emergency or death; plan for the long-term care you may need as you age; protect your medical privacy; obtain legal immigration status if you are from another country; and update your name and gender marker on identity documents and legal records for transgender and gender-expansive clients. Our services are free of charge or available for a modest fee, depending on your income.

Name and Gender Updates to Identity Documents
Our legal team works with hundreds of clients every year to obtain name change court orders, and to update gender markers on state and federal identification documents, including Social Security records, passports, driver’s licenses, birth certificates, and immigration records. We also assist with updating school and military records.

Staff and volunteer attorneys offer name change services monthly at our Name and Gender Change Clinic.

Interested clients must call or email in advance to reserve a spot: 202.939.7627 | lhicks@whitman-walker.org or 202.939.7630 | lsuarez@whitman-walker.org for Spanish speakers. TransLAW provides financial assistance toward the cost of updating various documents.

Insurance Coverage Appeals
If your health insurance plan denies coverage of transition-related medical care, such as hormones or surgery, our legal team can help you challenge the denial. We can assist with appealing denials by marketplace plans, Medicaid, Medicare, federal and state employee plans, and private employer-specific coverage. Most coverage denials must be appealed within a limited time period, so call us as soon as you receive a denial notice.

Discrimination Claims
If your employer, health care provider, school, or other publicly available service provider (including hospitals, bars, restaurants, stores, etc.) treats you differently from others because of your gender identity, we can evaluate your case, and when appropriate, help you file a discrimination claim with the proper local or federal officials.

To contact Legal Services, call 202.939.7630 or email contact-legal@whitman-walker.org.

PUBLIC BENEFITS & INSURANCE NAVIGATION
Call 202.745.6151 for more information.

Whitman-Walker’s Public Benefits and Insurance Navigation Program assists patients in getting and keeping health insurance and accessing other assistance programs to reduce out-of-pocket costs connected with health care. Navigators use their expertise to screen all patients for insurance options, including job-based insurance options, COBRA, individual and small business plans available through the health insurance exchange, public insurance programs (Medicaid, Medicare, DC Healthcare Alliance), and programs to wrap these options to cover out-of-pocket costs. Navigators assist all patients with accessing our sliding fee scale, and with Ryan White eligibility for HIV-positive individuals.

Navigators can also support patients with prescription drug assistance programs offered through the pharmaceutical companies. Navigators assist patients with renewing and recertifying coverage and answer questions about how to use their insurance plan to access preventive services.
QUESTIONS ABOUT SURGERY?

If you are considering surgery as part of your journey, here are some questions and answers to help you navigate the process.

**Will insurance pay for my surgery?**

*Maybe*, the answer depends on the type of insurance you have.

**DC Medicaid** has an inclusive policy, but we still see some denials for surgeries. If you get a denial, please contact Whitman-Walker Legal Services.

**Maryland Medicaid** should cover gender affirming care, but there may be limitations. If you get a denial, please contact Whitman-Walker Legal Services.

**Federal & State Government Plans**—and commercial insurance outside of DC and Maryland—often have discriminatory coverage exclusions that can be legally challenged. If you get a denial for surgery or have questions going in, please contact Whitman-Walker Legal Services.

**Commercial Insurance Plans** are plans purchased from the marketplace or obtained through a private employer. These plans should cover most gender-affirming care, but please ask your insurer for “Coverage Benefits” and look for the policy on gender-affirming care. It should have a list of covered procedures and any exclusions or limitations. Do not get discouraged if the surgery you need is excluded—or if it’s deemed “cosmetic.” However, if it is excluded, you can expect your insurance provider to deny coverage of your surgery. If you get a denial for surgery, please contact Whitman-Walker Legal Services.

If you have questions about coverage, call 202.745.6151 to speak with one of our Public Benefits & Insurance Navigators.

**Will I need a prior authorization from my insurer?**

*Yes*, in most cases.

Virtually all insurance plans require a prior authorization—also called a “PA” or “pre-certification”—before you have surgery. Prior Authorization allows insurers to confirm that your surgery is medically necessary and assures surgeons of payment. Insurers rely on documentation from your surgeon’s office: including Whitman-Walker’s letters of support, and your surgeon’s notes, for this process.

**Medicare policies** operate differently depending on your region and the type of Medicare coverage. Please discuss with your surgeon whether they are willing to submit your post-surgery claim to Medicare. If they are unwilling or ask you to sign a guarantee of payment, please contact Whitman-Walker Legal Services.

**What if my surgeon does not accept my insurance or any insurance at all?**

*You must pay out-of-pocket.*

Some private practice surgeons do not accept any insurance or may just not accept your insurance. In those cases, you will be asked to pay for the surgery out-of-pocket. After the surgery, the surgeon may be willing to provide documentation for you to submit a claim for reimbursement to your insurance provider. Ask your insurance plan about your deductibles, co-payments, reimbursement rates, and how they handle refund claims as you may not be fully reimbursed. If your refund claim is denied, please contact Whitman-Walker Legal Services.

**Can Whitman-Walker send me to the ‘best’ surgeon and handle the insurance paperwork?**

No, but we can suggest surgeons and share information about insurance.

We do our best to identify surgeons who accept a wide variety of insurance plans and are qualified to perform medically necessary gender-affirming procedures. This list is constantly changing as doctors and coverage rules change.

You and your surgeon will work together to handle the insurance claim, and one of you will submit all supporting documentation to the insurer. Whitman-Walker does not handle surgery insurance claims, but our Legal Services team can assist you if your claim is denied.
QUESTIONS ABOUT SURGERY?

How do I start my surgery process?
Give yourself time.
Consider your long-term goals, your ideal outcomes, and review your options. There are different techniques for different surgeries. We recommend you do some research so you are more informed when you meet your surgeon. Many online resources will talk about specific surgeons and surgical outcomes.

Not every surgeon yields the same results. You can find before and after photos in chat rooms, Facebook groups, Yahoo groups and on Tumblr accounts. With some surgeons, you’ll have to wait until your consult visit to see any before and after photos of their work. If there’s something specific you want to see in your outcome, ask about it. The technique you’re interested in may not be recommended by your surgeon.

How long can this process take?
Plan on several months.
Completing the surgery navigation process at Whitman-Walker may take more than three months. Once your letters of support are complete, they are valid for the next year. Take that into consideration when planning your surgery timeline and the potential waitlist at your surgeon’s office. Most referral partners in the area—who accept Medicaid—will schedule a consult within 2-to-8 weeks, depending on demand and procedure. Most will schedule your surgery after receiving authorization. Authorization depends on your insurance, the procedure, and the surgery team’s capacity to complete paperwork. On average, a team completes authorization within 4-to-8 weeks of your consultation.

What else do I need to think about?
Think about your action steps for surgery readiness physically, mentally and financially.

Some procedures require physical preparation or readiness. Most surgeons Whitman-Walker works with are more confident in their outcomes when:

- Your Body Mass Index (BMI) is under 30 for vaginoplasty or phalloplasty
- You have completed hair removal for vaginoplasty and sometimes phalloplasty
- You are managing HIV and/or other chronic conditions well
- Your pre-op labs support positive surgical outcomes (i.e. a surgeon may refuse to operate after a positive screening for substances)

Your primary care provider can help assist you with these goals and offer supportive resources.

- Depending on the location of your surgeon’s office, you may need to consider the cost of travel and lodging for recovery periods away from your local community, friends and/or family. This might impact your timeline.
- Your insurance may not cover everything! Budget, as you are able, for any outlying or surprise costs. Don’t be afraid to ask the surgeon for estimates of out-of-pocket expenses and confirm rates with your insurance provider.
- Bring the “Questions to Ask My Surgeon” from Whitman-Walker’s Transgender Resource Guide to your surgery consult. Make sure you have all the information you need to feel good moving forward!

Stay Informed on Gender Affirming Care by checking out these websites:

- World Professional Association for Transgender Health (WPATH)
  www.wpath.org
- UCSF Center of Excellence for Transgender Health - Guidelines for the Primary and Gender-Affirming Care of Transgender and Gender Nonbinary People.
  www.transhealth.ucsf.edu/protocols
- National Center for Transgender Equality (NCTE) - for resources on healthcare discrimination and knowing your healthcare rights.
  www.transequality.org/issues/health-hiv

Many surgeons have websites with more information on specific procedures, testimonials, and pre- and post-op care.
- Search key words like “FTM, MTF, trans & queer; non-binary” on Facebook to find community groups. Consider adding your nearest major city to the search.
- Search Yahoo groups with the above key words. Many groups are also surgery-specific and often include photos. You must have a Yahoo account.
QUESTIONS FOR THE SURGEON

If you are considering surgery or are interested in a surgical consultation, we have listed questions that you may want to ask:

- Will I need a Pre-Operative Exam from my primary care provider before my surgery?
- If so—it is very important that you, as my surgeon, provide my primary care provider the following:
  - My surgical diagnosis.
  - The name and CPT code of my planned procedure.
  - What tests are needed or required by you or the surgical facility as part of the pre-operative exam (EKG, Chest X-ray, what lab work, etc.).
  - The date of my surgery and anticipated type of anesthesia to be used.
  - A fax number to send my exam results to and a telephone number to call if there are questions.
- Could you tell me about your experience with this surgery?
- How will the surgery be performed?
- Do you perform this type of surgery regularly?
- What is your success rate, and how often do your patients experience any problems?
- What are the risks, benefits, and possible complications for this surgery?
- Has this been pre-authorized by my insurance?
- What other letters, medical records, lab results, or documents do you need from me?
- If needed—Where should I get my lab (blood) work done?
- Will I need any medication—antibiotics, pain medication?
- Are there non-narcotic options for pain management?
- (If you smoke) How many weeks before surgery should I stop smoking?
- Will I need to stop taking the medications (including hormones) that I am currently taking before surgery?
- When should I stop taking these medications and when can I resume?
- Should I take any of my medications on the day of the surgery?
- When do I have to stop eating and drinking?
- What can I expect for my recovery in terms of treatment, medication and diet?
- Should I have someone assist me at home after surgery? For how long?
- (If you are currently employed) How long should I take off from my job?
- When will I be able to return to my regular activities (driving, lifting, exercise, etc.)?
- How can I contact you if I have more questions?
**GENDER AFFIRMING SERVICES FAQs**

What will my first visit for gender affirming care be like at Whitman-Walker?

At your first medical appointment, you will be asked to complete a basic history with your doctor or medical team member. You will also be asked to complete lab work to begin the process of establishing yourself as a patient of the health center. Our medical team will introduce you to some of Whitman-Walker’s support services. You can expect to formally start and discuss hormones and surgical processes — two things many folks look forward to in their gender affirming care with us — during or after your second medical visit.

Do I have to be in mental health care for hormones?

Mental Health therapy is not an absolute requirement for hormones. Many Whitman-Walker patients do not need or request mental health services. It is important to note that a past history of mental health or substance use history will not always make a referral to a Behavioral Health Specialist necessary. However, your doctor or medical team member will assess for any risk for relapse and your current mental health stability. Based on this assessment, your doctor may feel that a mental health assessment is needed. Together, you and your doctor will discuss why they feel an assessment is needed and any specific concerns around hormones. These concerns will be shared with the mental health provider — who you will be meeting with — for the assessment to guarantee the best coordinated care and address concerns as efficiently as possible. Our goal is to provide you with complete care and, in turn, positive health outcomes.

What surgeries does Whitman-Walker offer referrals for?

Whitman-Walker offers referrals for the following procedures related to gender dysphoria: chest reconstructive surgeries including breast augmentation and mastectomy; facial feminizing procedures including tracheal shave, rhinoplasty, mandibular lift, and forehead drop; hysterectomy; phalloplasty; metoidioplasty; vaginoplasty; orchiectomy. Whitman-Walker does not offer referrals for body contouring.

What is the process for getting my referral and letters at Whitman-Walker?

Once you’ve had a medical appointment to review recent clinical labs and discuss a surgical referral with your medical provider, you’ll be linked to a Trans Care Navigator. Through a phone call, the Trans Care Navigator will coordinate and explain the referral process to you, hear your questions, schedule visits with a Behavioral Health Specialist to collect information for your letter of support, and keep you posted on progress until it’s time to schedule a consult with the surgeon. We don’t refer you to a surgeon’s office unless your supportive paperwork is ready as that’s a sign of everything being in place for insurance coverage and for the surgeon to move forward. If you’re paying out-of-pocket, you can move through this process at your own pace and likely won’t need letters of support from Whitman-Walker. If your out-of-pocket surgeon still wants letters from Whitman-Walker, your process will look similarly. This process can take a couple of months to complete, depending on your medical health status and how much information a Behavioral Health Specialist might need.

How many mental health sessions will I need to schedule before getting my letters?

For above-the-waist surgeries, you will meet with a mental health provider for a minimum of two sessions. For below-the-waist surgeries, you will meet with a mental health provider for a minimum of four sessions, which includes three sessions with a Behavioral Health Specialist and one session with a doctoral level mental health provider. These sessions will include reviewing your mental health history, exploring your experience of Gender Dysphoria, and working on a thorough surgery preparation and recovery plan. Please note it is very important that you attend these appointments. If you miss two appointments and do not call within 24 hours to cancel, you’ll have to wait three months before you can be rescheduled. If you reschedule your appointment more than two times, you will also have to wait three months to reschedule. These restrictions have been put in place to increase the clinical availability of our mental health providers so that we can serve the high volume of patients seeking gender affirming surgery.
GENDER AFFIRMING SERVICES FAQs

How many letters do I need for surgery?

Any surgery that is above your waist, or above your genitals, will require one letter from a Behavioral Health clinician and one letter from your medical provider. Any surgery that is below your waist will require one letter that is co-signed by two independent Behavioral Health clinicians and one letter from your medical provider.

What happens if my surgery gets denied?

If your surgery is denied, our Trans Care Navigator will speak with you about appealing that denial with our Legal Services team. The Trans Care Navigator will need your consent to get you linked to that department. From there, you will learn about your situation regarding surgery denial, what an appeal will look like with Whitman-Walker support, and wait to hear whether your case is assigned to a lawyer. Not every denial requires ongoing legal support. Sometimes our lawyers are able to troubleshoot with surgeons to simply re-submit the prior authorization.

What surgeons do you recommend I work with?

We keep a list of surgeons we commonly refer to, and we encourage everyone to do some research to learn about surgeons in the area. For folks with DC Medicaid plans, we keep a tighter list of close partners at local hospital systems. We do not have a formal referral network with any one hospital system or private practice surgeon, and really want you to get what you need out of your own relationship with a surgeon.

I am under 18, can I get gender affirming care at Whitman-Walker?
Do I have to tell my parents?

Whitman-Walker serves youth ages 13-24 years old. To start hormones, the first step is a visit with your Whitman-Walker primary care provider. To schedule this appointment, you will need parental consent. After discussing your medical history – and once your medical provider feels that you are medically ready to begin hormones -you will be referred for mental health assessment with a mental health provider. This assessment may include a minimum of 3-6 sessions, and may include the recommendation to continue ongoing therapy or a psychiatry referral. We also provide individual and group therapy, and free trauma-focused mental health care to youth who have experienced or witnessed a crime. Youth do not need parental consent to engage in mental health services. However, you and your mental health provider will discuss how your parents or caregivers may be involved in your care. Therapy includes a variety of techniques including art, music, and sand play. To learn more about Youth Mental Health, please call 202.207.2361.

Do you have a list of area support groups?

See our list of Gender Affirming Support groups in the DC, Maryland and Virginia area in the “Guides, Forms and FAQs” section of our website at whitman-walker.org.
WHITMAN-WALKER LOCATIONS

Please visit www.whitman-walker.org for the most up-to-date information on service hours and locations.

APPOINTMENT LINE
Need an appointment? Call 202.745.7000 or email appointments@whitman-walker.org

Note that we will contact you to remind you of your appointment both three days and one day before by phone or text. Please remember to write down your appointment time and date. You will be reminded by email three days in advance of your appointment if you elect to receive messages via our secure web portal (my WWH).

CLOSURE POLICY
In the event of snow or other emergencies, Whitman-Walker will be closed when the federal government is closed. For weather or emergency-related closings, check our website at www.whitman-walker.org, our Facebook page (www.facebook.com/whitmanwalker), or Twitter (@whitmanwalker). If the federal government opens two hours late, Whitman-Walker will open at 10:30 am, and any appointments scheduled before the health center opens are cancelled. If you have any questions, please call our appointment line.