

B.13: Gender-affirming voice and communication training and gender-affirming hair removal

Unit: Registration and Claims	Effective date: January 5, 2023
Branch: Insured Health Services	Last updated:
Policy number: B.13	Review date: January 4, 2025

Purpose

This policy describes which gender-affirming voice and communication training and gender-affirming hair removal procedures are eligible for coverage as an insured service; the application requirements for gender-affirming voice and communication training and gender-affirming hair removal; and the criteria used to determine who is eligible for gender-affirming voice and communication training and gender-affirming hair removal.

Policy

1. Separate application packages must be submitted for gender-affirming voice and communication training and gender-affirming hair removal coverage.

Application requirements

2. The health care practitioner must submit an application package on behalf of the client to Insured Health Services in advance of the service being received.
3. Applications packages must include a(an):
 - o letter from a health care practitioner that requests coverage for gender-affirming voice and communication training or gender-affirming hair removal on behalf of the client;
 - o written confirmation of a diagnosis of gender incongruence; and
 - o assessment from a qualified assessor.
4. Application packages must be complete in order to be processed.

Eligibility requirements

5. Only insured persons are eligible for gender-affirming voice and communication training and gender-affirming hair removal coverage.
6. The medical advisor and/or manager determine eligibility for gender-affirming voice and communication training and gender-affirming hair removal coverage.
7. The medical advisor and/or manager must review application packages and consider requests for gender-affirming voice and communication training and/or gender-affirming hair removal coverage within 10 business days from the date Insured Health Services received the application package

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8. When determining a client's eligibility for gender-affirming voice and communication training and/or gender-affirming hair removal, the medical advisor and/or manager will consider whether the client has:

- o fulfilled the diagnostic criteria for gender incongruence.

Training location

9. Gender-affirming voice and communication training will be covered in private health care facilities in Yukon, until gender-affirming voice and communication training is available in public health care facilities in Yukon.

10. Gender-affirming hair removal will be covered in private health care facilities in Canada, until gender-affirming hair removal is available in public health care facilities in Canada.

- o The location where gender-affirming hair removal is provided will be determined on a case-by-case basis and will depend on the nature and extent of the care and the availability of medical expertise.

Coverage amounts

11. Insured Health Services must approve all requests for gender-affirming voice and communication training and/or gender-affirming hair removal coverage in advance of the training and/or procedure.

- o Insured Health Services will not pay for, cover or reimburse any costs associated with clients receiving gender-affirming voice and communication training and/or gender-affirming hair removal prior to receiving approval from Insured Health Services, unless otherwise specified in this policy.

12. In exceptional circumstances, the Director may consider approving gender-affirming voice and communication training and/or gender-affirming hair removal coverage after the training and/or procedure has been received, provided the client meets all application and eligibility criteria for the training.

13. The health care practitioner who submitted the application package can submit written appeals on behalf of the client addressed to the Director. A written appeal must include:

- o the client's Personal Health Number;
- o the client's application package;
- o a detailed explanation of the decision that is being appealed.

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Definitions

Director: The Director of the Yukon Health Care Insurance Plan, as appointed in accordance with section 4(1) of the *Health Care Insurance Plan Act*.

Gender-affirming: Refers to being recognized or affirmed in a person's gender identity. It is usually conceptualized as having social, psychological, medical and legal dimensions.

Gender-affirming hair removal: Includes medical-grade laser hair removal and/or electrolysis to the face, body and genitals.

Gender-affirming voice and communication training: Includes behavioural practices, such as speaking and singing voice; mindfulness; relaxation; respiration; pitch and pitch range; voice quality; resonance/timbre; loudness; projection; facial expression; gesture; posture; movement; introducing self to others; describing identifications and requesting culturally responsive treatment and forms of address by others; assertive and resilient responses to misattributions; and practicing implementation of voice use and communication practices with different people and in different everyday settings.

Gender identity: Refers to a person's deeply felt, internal, intrinsic sense of their own gender.

Gender incongruence: Is a diagnostic term used in the World Health Organization's International Classification of Diseases 11th Revision that describes a person's marked and persistent experience of an incompatibility between that person's gender identity and the gender expected of them based on their birth-assigned sex.

Health care practitioner: A person lawfully entitled to provide health services in the Yukon.

Insured person: In accordance with section 4(1) of the Regulations Respecting Health Care Insurance Services, an insured person is an individual who, on the beginning of their third month of residency in the Yukon, becomes eligible for insured services. For the purpose of this policy, this term also includes "client".

Insured service: Those physician services, surgical-dental services, and other health services, including the supply of drugs, medical and dental supplies, prostheses, orthotics, appliances and similar devices, as may be prescribed, that are provided to insured persons, but does not include any service that a person is entitled to or eligible for under any other Act, under any law of a province that relates to workers' compensation or under any Acts of the Parliament of Canada other than the federal Act.

Manager: The manager of Insured Health Services' Registration and Claims unit.

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Medical advisor: A physician contracted by Insured Health Services to provide subject matter expertise, advice and recommendations regarding requests submitted to Insured Health Services.


Qualified assessor: A health care practitioner who is licensed by their statutory body and holds, at a minimum, a master's degree or equivalent training in a clinical field relevant to this role and granted by a nationally accredited statutory institution.

Authorities

- Health Act
- Health Care Insurance Plan Act, ss.1, 4(1)
- Regulations Respecting Health Care Insurance Services, ss.3(i), 3(m), 4(1)

Related policies and other documents

- TBD: Gender-affirming surgery
- World Professional Association for Transgender Health (WPATH) Standards of Care for the Health of Transsexual, Transgender and Gender Nonconforming People

APPROVED BY:		Director, Insured Health Services
DATE:	January 5, 2023	