

September 6, 2018

The Honorable Robert Wilkie
Secretary
U.S. Department of Veterans Affairs
810 Vermont Avenue, NW
Washington DC 20420

Re: Notice of Petition for Rulemaking and request for comments—Exclusion of Gender Alterations from the Medical Benefits Package

Dear Secretary Wilkie:

On behalf of the physician and medical student members of the American Medical Association (AMA), I appreciate the opportunity to provide comments on the Petition for Rulemaking petitioning the U.S. Department of Veterans Affairs (VA or Department) to amend its medical regulations by removing a provision that excludes “gender alterations” from its medical benefits package. The effect of this amendment would be to authorize gender alteration surgery as part of VA care when medically necessary. The AMA believes that all eligible veterans, including transgender veterans, deserve medically necessary care, and, accordingly, supports the change requested in the Petition for Rulemaking.

In its request for comments on whether gender alterations should be included in the medical benefits package, the VA references the report issued by the Department of Defense (DOD) on February 22, 2018, that considered the efficacy of gender alteration surgery as treatment for gender dysphoria. The VA states, “That report noted considerable scientific uncertainty and overall lack of high quality scientific evidence demonstrating the extent to which transition-related treatments such as sex-reassignment surgery remedy the multifaceted mental health problems associated with gender dysphoria” (*Federal Register*, July 9, 2018, 31711-31712). We disagree with this “finding” in the DOD report, and do not believe the VA should rely upon these conclusions to justify continued exclusion of gender alteration surgery for eligible veterans. As we indicated in our [letter to Secretary of Defense James Mattis](#) (dated April 3, 2018), the AMA shares the [concerns expressed](#) by a group of former Surgeons General, including David Satcher, that the DOD report mischaracterized and rejected the wide body of peer-reviewed research on the effectiveness of transgender medical care. This research, demonstrating that medical care for gender dysphoria is highly effective, was the rationale for the AMA’s adoption of policy by our House of Delegates in 2015 that there is no medically valid reason to exclude transgender individuals from military service.

Likewise, there is no medically valid reason to exclude gender alteration surgery from the VA’s medical benefits package. The AMA recognizes that medical and surgical treatments for gender dysphoria, as determined by shared decision making between the patient and physician, are medically necessary as outlined by generally-accepted standards of medical and surgical practice, and thus we support public and private health insurance coverage for treatment of gender identity disorder dysphoria as recommended by

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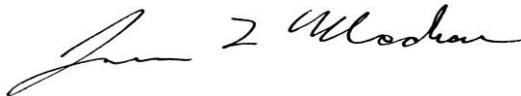
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the patient's physician. Our position is based on the recognition that gender dysphoria is a condition recognized by the *Diagnostic and Statistical Manual of Mental Disorders* (DSM-5, 2013), published by the American Psychiatric Association. Also, *Standards of Care* established by the World Professional Association for Transgender Health—the leading international, interdisciplinary professional organization devoted to the understanding and treatment of gender dysphoria—recognizes that while patients' needs differ and treatment decisions should be individualized, for some individuals “relief from gender dysphoria cannot be achieved without modification of their primary and/or secondary sex characteristics to establish greater congruence with their gender identity” ([*Standards of Care for the Health of Transsexual, Transgender, and Gender Nonconforming People*](#), 7th Version, WPATH 2011). Treatment for gender dysphoria includes physical and mental health care, and may include counseling in conjunction with social transition, hormone therapy, and gender confirming surgery. Excluding medical treatments such as gender altering surgery—especially those determined by a patient's treating physician to be medically necessary—for transgender veterans who have proudly served their country harms their health and could even put their lives at risk by suicide attempts or suicide.

Thank you for considering the AMA's comments. We urge the Department to promptly amend the VA regulations by eliminating the gender alteration exclusion from the VA's medical benefits package. If you have any questions, please contact Margaret Garikes, Vice President of Federal Affairs, at 202-789-7409 or margaret.garikes@ama-assn.org.

Sincerely,

A handwritten signature in black ink, appearing to read "James L. Madara". The signature is fluid and cursive, with a large initial "J" and "M".

James L. Madara, MD