Providing Services to Transgender Older Adults: Tips for SMP Staff and Volunteers

When each of us was born, someone probably announced “It’s a boy!” or “It’s a girl!” If you were given the label boy, you most likely now say you are a man. If you were given the girl label, you probably now view yourself as a woman. That’s where transgender people are different.

Transgender people say that whatever label they were given at birth is not right. With the help of physicians, some transgender people change their bodies to live as the “opposite” gender. Some change the gender they present to the world without medical assistance. Some do not “transition.” These people may live part of the time as men and part of the time as women (a group that includes many cross-dressers). They may present a more ambiguous or androgynous appearance that doesn’t immediately identify them as either male or female, or they may simply hold an internal understanding of who they are that is different from what strangers might expect.

Given the broad variety of people who fall under the transgender “umbrella,” you should expect each transgender person you work with to have different issues.

Here is what is true for all transgender people.

1. **Always use the correct pronoun (“he” or “she”) and name.** How do you know which pronoun and name is correct? You ask. It is that simple: “What’s your name?” and “What pronoun do you prefer (or would you like me to use for you)?” Then use that pronoun and name consistently, even when the person is not within earshot.

Many transgender people judge whether a service provider is “respectful” based simply on whether they ask for and use the right pronoun and name.

*On rare occasions, transgender people will ask to be referred to as “they” or some other gender neutral pronoun. If it is a pronoun you haven’t heard before, it’s ok to ask them to spell it and help you practice its pronunciation so that you can get it right.
Of course, knowing the right pronoun is not a guarantee that you will not mess up! If you do make a mistake about someone’s pronoun or name, apologize briefly. Do not try to explain or excuse your mistake; that only prolongs everyone’s discomfort and delays your next chance to get it right.

2 Do not ask any questions that are not absolutely necessary to solving your client’s issues. You most likely will never need to know whether a transgender person uses hormones or has had gender-related surgery unless those items appear on an Explanation of Benefits and your client says they did not ask for or receive those services. Although you may be very curious when you learn someone is transgender, it is not appropriate for you to turn the tables and ask your client to teach you. Being asked inappropriate or unnecessary questions is one of the most frequent reasons why transgender people avoid obtaining services they need. Your transgender clients will be grateful if you remain polite and professional and stay focused on what they want help with.

Most of the issues transgender Medicare beneficiaries have will be exactly the same as those everyone else’s. Transgender people experience the whole range of chronic diseases, illnesses, injuries, and frauds everyone else is subject to; most of the time you will serve these clients and never even realize that they are transgender. Here are the major trans-specific issues that may come up.

NON-MATCHING IDENTIFICATION DATA. Fewer than half of transgender people have identification documents (driver’s license, Medicare card, etc.) that have correctly updated information on their gender and/or name. This is not necessarily a problem, nor is it a sign of fraud. It is also common some married women, for example, use their spouse’s last name even though they do not change the name on their Medicare account. There may be a good reason the beneficiary does not want to update their records.

GENDER-RELATED SERVICES. It’s common for Medicare and other health insurers to deny payment for a service that is usually provided only to the “opposite” gender. Transgender women may have a prostate and many transgender men may have a uterus and ovaries, for example; proper health care of these organs should be covered. Medicare has a special code – condition code 45 – that tells the system these services were appropriate for this particular person’s body parts. (This code doesn’t work for Medicare Advantage, Medicare Cost Plus or Medicare Part D plans.)

TRANSGENDER-RELATED SERVICES. Until May 2014, Medicare would not pay for surgeries and, sometimes, other medical care needed by transgender people as part of their medical transition. This ban no longer exists; transgender Medicare beneficiaries who have been denied services should follow the usual procedures for appealing a coverage determination.

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