

August 20, 2018

Dear Wisconsin Group Insurance Board Members:

We are writing to you as members of the Committee for GLBTQ People in the University at UW-Madison, as well as representatives of number of other groups. The Committee for GLBTQ People in the University at UW-Madison is a group of nominated UW-Madison staff and faculty members who address and advocate for equity and inclusivity for LGBTQ+ (transgender, lesbian, gay, bisexual, and queer) individuals.

We urge you to withdraw the ETF exclusion of transgender-specific health care. There are several reasons why we are taking a stance against the exclusion.

The first reason is that transgender-specific health care (e.g., psychotherapy, hormone therapy, gender confirming surgeries) is considered to be medically necessary by every major medical and psychological entity within the United States and internationally (see statements by the American Medical Association, American Endocrine Society, American Academy of Pediatrics, American Psychological Association, American Psychiatric Association, and World Professional Association of Transgender Health). Denying this medically necessary care to state employees in an already-targeted identity class is antithetical to nondiscrimination values and medical standards of care.

The reasons for this medically necessary care are clear to medical professionals, transgender people, and people in their communities. When transgender individuals do not obtain competent and necessary treatment, serious and debilitating psychological distress (depression, anxiety, self-harm, suicidal ideation/attempts, etc.) can occur. For individuals who require medical interventions to decrease dysphoria, surgery and/or hormones are the only empirically validated options.

Beyond the care being medically necessary, the economic impact of covering these interventions would be minimal. In the final report of the ad hoc Committee on Equitable and Inclusive Health Care at UW-Madison, utilization rates and aggregate cost estimates for hormone therapy and gender confirming surgeries indicate that the minimum claims per subscriber would be \$0.66 (0.007% claims as % of premium) and maximum claims per subscriber would be \$5.61 (0.056% claims as % of premium).

Additionally, the cost of continuing to exclude coverage for this medically necessary health care is enormous to the University of Wisconsin system. University of Wisconsin campuses are perceived as environments that exclude transgender individuals. This has already damaged the ability of the University of Wisconsin to retain and recruit the superb faculty, staff, and graduate students necessary to make our institution one of the most competitive state university systems in the world, given how many other peer institutions (such as University of California, University of Maryland, Michigan State, University of Minnesota, Ohio State, and Penn State) do, in fact, provide such health care coverage. These policies do not solely impact transgender individuals, but also impact recruitment and retention of university employees who require coverage for transgender

family members, as well as supporters of LGBTQ+ people who want to work within an inclusive university system.

It is not simply the cost of retention and recruitment, but also the larger economic impact of losing high impact researchers who obtain large grants. When our university fails to retain faculty for reasons such as transgender health care exclusions for the faculty or their family members, they leave for other institutions, taking their grant funding with them.

There is also the economic impact of the mental and physical health costs that result from denying medically necessary care. As noted above, not being able to receive medically necessary care can lead to severe distress, which in turn often results in costs of medical care to cover the consequences of the distress (for example, inpatient hospitalizations). As well, some transgender individuals engage in self-surgery or obtain hormones without a prescription/medical care, which can result in medical consequences that will need to be covered by ETF.

In short, we urge you to consider the damaging economic and reputational effects that the transgender health exclusion policy has had on the University of Wisconsin, in addition to the well-established medical effects, and thus withdraw the transgender health care exclusion.

Sincerely,

Members of the University of Wisconsin Committee for GLBTQ People in the University

Emily Stier
Coordinator
Doyle Center for Gender & Sexuality
University of Wisconsin Platteville

Christopher Jorgenson
Director
Gender & Sexuality Resource Center
University of Wisconsin-Eau Claire

Nathan Riel-Elness
Gender & Sexuality Outreach Coordinator
Center of Diversity, Inclusion, and Belonging
University of Wisconsin-River Falls

Stephanie Selvick
LGBT* Coordinator
University of Wisconsin-Whitewater

Lisa Hager

Director, LGBTQIA Resource Center
Associate Professor of English and Gender, Sexuality, and Women's Studies
University of Wisconsin-Milwaukee, Waukesha Campus

T Leeper
Coordinator for Gender and Sexuality Programs
University of Wisconsin-Superior

Willem Van Roosenbeek
Senior Director
Pride Center
University of Wisconsin-La Crosse