Providing and Facilitating Comprehensive Gender-Affirming Care for Homeless Individuals in Boston within the Context of Insurance Reform

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What we’ll cover:

• Background
• Insurance changes
• Boston Medical Center
• Unanticipated barrier to care
• Respite
BHCHP Mission:

To provide or assure access to the highest quality healthcare for all homeless men, women, and children in the greater Boston area.

“Medicine that Matters”
• BHCHP cares for > 12,000 patients/year
• At > 60 sites throughout Boston and beyond
• FQHC
• 104 bed respite facility
• Across the street from Boston Medical Center
BACKGROUND ON BHCHP’s TRANSGENDER PROGRAM
Development

- Tom Waddell Clinic in San Francisco as model
- Community Assessment: “If You Build It They Will Come”
- Strong need for community buy-in in Boston
- Staff development for all, included in employee orientation
Targeted Transgender Services

- Primary Care (including hormone prescribing)/Urgent Care
- Case management: assist with housing, benefits, name/gender changes
- Behavioral Health
- Risk reduction counseling and supplies
- Monthly legal clinic
- Weekly facilitated support group
- Meals, transportation, showers, clothing
Of note...

- Trans patient on BHCHP’s CAB and Board of Directors
- Boston Transgender Day of Remembrance Planning
- Creation of Transgender Program Director position
- Transgender Team meets monthly
- Rotation site for Boston Univ and Harvard medical students/residents
- Support group really supportive!
- Dedicated Fellow and summer intern
- Trans health fairs
- Barbara McInnis House rooming policy
- Close connection with BMC
INSURANCE CHANGES
Insurance Reform in MA

• 2014 Medicare Bulletin
• MA Division of Insurance followed suit
• BMC Surgeons got trained in neovaginoplasty for transwomen
• Uptick in variety of surgeries at BMC
  • Breast augmentation
  • Chest reconstruction
  • Hysterectomy and oophorectomy
  • Neovaginoplasty
New Developments at BMC

• Center for Transgender Medicine and Surgery

• TG Taskforce
  – Health Equality Index
  – Patient complaints
  – Institution-wide
DEPILATION
Hair removal and insurance

• Perineal hair removal is a pre-op requirement for neovaginoplasty surgery
• Financial barrier – was always considered “cosmetic”
• Finally MA covering at BMC for laser
RESPITE
Setting: The Barbara McInnis House

- 104-bed medical respite facility
- Serves clients who are not sick enough to be admitted to hospital, too sick to be in shelter or on street
- First of its kind in the country and a model for homeless health providers nationwide
- Average length of stay: ~2 weeks
- 24/7 nursing care, behavioral health, substance use tx, case mgmt, palliative care
Background for Transgender Rooming Policy

• As Transgender Program expanded, more and more trans patients with the need for respite care (Not necessarily trans-specific care)

• No clear policy for how to integrate trans clients into milieu

• De facto use of “precaution rooms” but this was socially isolating and proved unsustainable given the medical need for these rooms

• Critical and often overlooked aspect of the political fight around gender-affirming surgeries: it’s great to have insurance changes but stable recovery environment is critical to actually getting gender-affirming surgery done—that’s what we’re providing
Developing a Rooming Policy

- Catalysing incident with a patient
- Clients interviewed at TG support group
- Series of meetings held with relevant staff: nursing, security, admin
The policy: name, pronouns

**Preferred name**: All patients are asked about preferred name/pronouns on admission.

- If not the same as legal name/gender marker, billing dept notified and can **“stop bill”** until after discharged
- All forward-facing reports (EMR, scut sheet, patient armband, name on room door) show patient’s preferred name and, where applicable, gender
- All staff are explicitly instructed to use the patient’s preferred name and pronouns (a) when communicating with or about the patient, and (b) in all documentation
The policy: room assignment

**Rooming:** Patients are assigned a room in accordance with their gender identity.

“The failure to grant room assignment to transgender patients in accordance with their gender identity is a form of discrimination that jeopardizes these patients’ dignity and privacy and, in turn, may discourage them from seeking medical services. Gender-affirming room assignment is a crucial step toward breaking down barriers that have hindered some transgender people’s access to health care.”

Also offered private room

Policy also includes protocol for dealing with patient complaints
• **BACKGROUND**

69 year old trans woman, transitioning late in life
Past job as a taxi driver: now living alone on Social Security
Initially Hep C +, cigarette smoker, no substance use
Had buried gender identity for her whole life
Called BHCHP and heard “for Transgender Services press 4” on the VM...

• **ENGAGING IN TRANSGENDER CARE**

Switched primary care providers and began Hep C tx and hormones. Used to arrive to clinic in men’s clothes and change in bathroom before going to support group. Has now “come out” to people in her building, wears women’s clothes consistently. Stopped smoking in prep for surgery.

• **BMH**

Facilitated patient getting orchiectomy and breast implants. No issues with name or pronouns. Happily roomed with 3 other women.
Other examples

• 19 year old transmale in high school. Parents not supportive. BMH facilitated chest surgery.

• 63 year old transwoman needing chemotherapy and radiation for throat cancer. Also had orchiectomy and breast implants. Just celebrated 1 year cancer-free!

• Multiple shelter patients able to get breast augmentation.

• Plan to facilitate post-op recovery after neovaginplasty. Staff training by surgeons presenting at Grand Rounds and Pam doing education/training for respite providers and staff.
Thank you!