Breast reconstruction is considered medically necessary and, therefore, covered, when all of the following criteria are met:

- The individual has persistent, well-documented gender dysphoria in accordance with the criteria established in the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, [DSM-5].
- Breast augmentation is recommended by a qualified professional provider who has consistently monitored the individual up to the time of surgery.
  - One referral letter and/or chart documentation must be written from the mental health professional provider who consistently monitored the individual throughout their psychotherapy or any other evaluation to the professional provider who will be responsible for the individual’s treatment.
- The individual is at least 18 years of age.
- The individual, unless medically contraindicated, has used feminizing hormones continuously and responsibly (which may include screenings and follow-ups with the professional provider) for a 12-month period.
- The individual, if required by a mental health professional provider, has regularly participated in psychotherapy throughout the real-life experience at a frequency determined jointly by the individual and the mental health professional provider.
- If the individual has significant medical or mental health concerns, they are reasonably well controlled.

Fertility Preservation

Puberty Suppression Hormone Treatment: When benefits are provided under the member’s contract, JHHC will authorize puberty suppression hormone treatment for adolescents when ALL of the following criteria are met:

a. The adolescent has demonstrated a long-lasting and intense pattern of gender nonconformity or gender dysphoria (whether suppressed or expressed), AND
b. Gender dysphoria emerged or worsened with the onset of puberty, AND
c. Any co-existing psychological, medical, or social problems that could interfere with treatment or compromise treatment adherence have been addressed, such that the adolescent’s situation and functioning are stable enough to start treatment, AND
d. The adolescents has the capacity to make fully informed decisions and has given informed consent. If the adolescent has not reached the age of medical consent, the parents or other legal caretakers or guardians have consented to the treatment and are involved in supporting the adolescent throughout the treatment process.