GENDER AFFIRMING SURGERY ACCESS

Who is Eligible?

San Francisco Residents

Insurance & Benefits Accepted: Full Scope Medi-Cal, Medicare, San Francisco Health Plan (including Healthy Workers & Healthy Families) in SF Health Network, Anthem Blue Cross (Medi-cal), and Healthy San Francisco

What Surgeries Are Covered?*

- Orchietectomy
- Vaginoplasty
- Labiaplasty
- Clitoroplasty
- Penectomy
- Hysterectomy
- Vaginectomy
- Metoidioplasty
- Phalloplasty
- Scrotoplasty
- Hair Restoration
- Mastectomy with Chest Reconstruction
- Feminizing Mammoplasty
- Facial Feminization Surgery
- Facial Masculinization Surgery
- Body Contouring: Feminizing & Masculinizing

*Coverage may vary depending on Insurance

How do I Get Referred?

1. Patient engagement with a Primary Care clinic in SF for 1 year (3 months for top surgeries)
2. Discuss with PCP interest in gender affirming surgery to review risks, benefits, and alternatives.
3. Work with a licensed Mental Health Provider to complete 1 or 2 pre-surgical assessments (PSAs).
4. Once PSAs are completed primary care providers can make a complete referral via EPIC to Gender Health SF.
5. Referrals will be processed and reviewed. All patients will be assigned a peer patient navigator and an intake will need to be completed.
6. Navigators will provide surgical education, preparation, and planning for surgery. As well as discuss surgeon options for surgeries referred.
7. Depending on insurance, pre-authorizations for surgical consults and referrals to surgeons’ practices will be completed by GHSF.

Who gets connected to a Peer Patient Navigator?

All Patients referred to Gender Health SF for gender affirming surgery will be connected to a peer patient navigator for services.

How Long Will I Wait for Surgery?

Waiting times for surgery depend on procedure requested, type of health coverage, and surgeon availability.

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