
From: Weida, Jason
Sent: Wednesday, April 20, 2022 1:57 PM EDT
To: \"Meyer\" Brian; Brian.Meyer@ahca.myflorida.com
Subject: Fwd: Treatment of Gender Dysphoria for Children and Adolescents

Brian,

FYSA. I am handling with Cody and Brock. If you or Pam become aware of any such inquires, please let me know and I will handle.

Jason

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From: Weida, Jason <Jason.Weida@ahca.myflorida.com>

Sent: Wednesday, April 20, 2022 1:53 PM

To: Williams, Susan C. <Susan.Williams@ahca.myflorida.com>; Dalton, Ann <Ann.Dalton@ahca.myflorida.com>; Rubin, Kelly <Kelly.Rubin@ahca.myflorida.com>

Cc: Peterson, Ashley <Ashley.Peterson@ahca.myflorida.com>; Forbes, Jesseka <Jesseka.Forbes@ahca.myflorida.com>; Greene, Shantrice

<ShantriceR.Greene@ahca.myflorida.com>; Hamilton, Vern

<Vern.Hamilton@ahca.myflorida.com>; Farrill, Cody <Cody.Farrill@ahca.myflorida.com>;

Juarez, Brock <Brock.Juarez@ahca.myflorida.com>

Subject: Re: Treatment of Gender Dysphoria for Children and Adolescents

Hi Susan,

Thanks for your email. I will handle with Cody and Brock (copied). Please take no further action until you hear back from one of us.

If you receive any additional related inquiries, please send to me, Cody, and Brock.

Thanks,

Jason

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From: Williams, Susan C. <Susan.Williams@ahca.myflorida.com>

Sent: Wednesday, April 20, 2022 1:46 PM

To: Dalton, Ann <Ann.Dalton@ahca.myflorida.com>; Weida, Jason <Jason.Weida@ahca.myflorida.com>; Rubin, Kelly <Kelly.Rubin@ahca.myflorida.com>

Cc: Peterson, Ashley <Ashley.Peterson@ahca.myflorida.com>; Forbes, Jesseka <Jesseka.Forbes@ahca.myflorida.com>; Greene, Shantrice

<ShantriceR.Greene@ahca.myflorida.com>; Hamilton, Vern

<Vern.Hamilton@ahca.myflorida.com>

Subject: FW: Treatment of Gender Dysphoria for Children and Adolescents

Hi Ann and Jason,

We are being asked by the plans how the DOH's fact sheet on Gender Dysphoria will affect Florida Medicaid recipients. Should this be discussed with CMS?

Please provide guidance as to the response you would like sent to the plans.

Proposed response:

This is under review by the administration at the Agency. Additional guidance will be provided later.

Thanks,

Susan Williams – Senior Pharmacist



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Susan.Williams@ahca.myflorida.com



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From: Hamilton, Vern <Vern.Hamilton@ahca.myflorida.com>
Sent: Wednesday, April 20, 2022 12:36 PM
To: Williams, Susan C. <Susan.Williams@ahca.myflorida.com>; Rubin, Kelly <Kelly.Rubin@ahca.myflorida.com>; Peterson, Ashley <Ashley.Peterson@ahca.myflorida.com>; Forbes, Jesseka <Jesseka.Forbes@ahca.myflorida.com>
Cc: Greene, Shantrice <ShantriceR.Greene@ahca.myflorida.com>
Subject: FW: Treatment of Gender Dysphoria for Children and Adolescents

This inquiry was received from one of our DUR Board members this afternoon, I'm forwarding so everyone can follow.

Is this something we need to share with our Bureau Chief and Director of Medicaid?? I am assuming there needs to be an Agency wide response, as this may come up from other sources as well.

Susan, you may want to respond to Dr. Zitiello that "this is in review and/or we will provide guidance later?"

FYI
Vern

From: Amy Zitiello <azitiello@tampabay.rr.com>
Sent: Wednesday, April 20, 2022 1:22 PM
To: Hamilton, Vern <Vern.Hamilton@ahca.myflorida.com>
Subject: Fwd: Treatment of Gender Dysphoria for Children and Adolescents

What does this mean for Medicaid coverage, are the kids previously approved now required to pay out of pocket. How do we take a stance.

Amy Zitiello

Begin forwarded message:

From: Amy Zitiello <azitiello@tampabay.rr.com>
Date: April 20, 2022 at 12:21:33 PM EDT
To: amy.zitiello@optum.com
Subject: Fwd: Treatment of Gender Dysphoria for Children and Adolescents

Amy Zitiello

Begin forwarded message:

From: Florida Department of Health <Floridahealth@public.govdelivery.com>
Date: April 20, 2022 at 9:34:37 AM EDT
To: azitiello@tampabay.rr.com
Subject: Treatment of Gender Dysphoria for Children and Adolescents
Reply-To: Floridahealth@public.govdelivery.com

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Treatment of Gender Dysphoria for Children and Adolescents

April 20, 2022

The Florida Department of Health wants to clarify evidence recently cited on a [fact sheet](#) released by the US Department of

Health and Human Services and provide guidance on treating gender dysphoria for children and adolescents.

Systematic reviews on hormonal treatment for young people show a trend of [low-quality evidence](#), small sample sizes, and medium to high risk of bias. A paper published in the [International Review of Psychiatry](#) states that 80% of those seeking clinical care will lose their desire to identify with the non-birth sex. [One review concludes](#) that "hormonal treatments for transgender adolescents can achieve their intended physical effects, but **evidence regarding their psychosocial and cognitive impact is generally lacking.**"

According to the [Merck Manual](#), "gender dysphoria is characterized by a strong, persistent cross-gender identification associated with anxiety, depression, irritability, and often a wish to live as a gender different from the one associated with the sex assigned at birth."

Due to the lack of conclusive evidence, and the potential for long-term, irreversible effects, the Department's guidelines are as follows:

- [Social gender transition](#) should not be a treatment option for children or adolescents.
- Anyone under 18 should not be [prescribed puberty blockers](#) or [hormone therapy](#).
- [Gender reassignment surgery](#) should [not be a treatment option](#) for children or adolescents.
- Based on the [currently available evidence](#), "encouraging mastectomy, ovariectomy, uterine extirpation, penile dismemberment, tracheal shave, the prescription of hormones which are out of line with the genetic make-up of the child, or puberty blockers, are all clinical practices which run an **unacceptably high risk of doing harm.**"
- Children and adolescents should be provided social support by peers and family and seek counseling from a licensed provider.

These guidelines do not apply to procedures or treatments for children or adolescents born with a genetically or biochemically verifiable [disorder of sex development](#) (DSD). These disorders include, but are not limited to, 46, XX DSD; 46, XY DSD; sex chromosome DSDs; XX or XY sex reversal; and ovotesticular disorder.

The Department's guidelines are consistent with the federal Centers for Medicare and Medicaid Services [age requirement for surgical and non-surgical treatment](#). These guidelines are also in line with the guidance, reviews, and [recommendations](#) from [Sweden](#), [Finland](#), the [United Kingdom](#), and [France](#).

Parents are encouraged to reach out to their child's health care provider for more information.

About the Florida Department of Health

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This email was sent to azitiello@tampabay.rr.com using govDelivery Communications Cloud on behalf of: Florida Department of Health · 4052 Bald Cypress Way, Tallahassee, FL 32399

