# Top Surgery Checklist and Resources

If you are thinking about gender-affirming top surgery (mastectomy or chest reduction), Seattle Children’s Surgical Gender Affirmation Program can help you navigate the process. Here’s more information about what top surgery is, what it costs, and what you need to do before scheduling your surgery.

## What is top surgery?

A gender-affirming top surgery is where the breast tissue is reduced or removed to create a flat chest or a chest more in line with your gender identity. It may also involve reconstructing the chest to give it a gender-affirming appearance.

Insurance calls top surgery a “gender-affirming double mastectomy with or without free nipple grafts” or a “gender-affirming breast reduction.”

You will work with your surgeon to make sure gender-affirming top surgery meets your goals for your appearance.

## How can I pay for top surgery?

We will discuss payment options and insurance coverage during our surgical consult with you. In most cases, all the surgeries done at Seattle Children’s are covered by insurance.

**Washington state’s Apple Health (Medicaid):** Top surgery should be covered but may depend on your age.

**Private insurance:** Top surgery should be covered like other medically necessary care if you have private insurance through an employer based in Washington state and the company has 50 or more employees There are exceptions. The cost of top surgery depends on:

- Surgery type
- The surgeon
- Your insurance coverage

**Self-pay:** There may be an option for self-pay if we cannot get insurance approval. Surgeons in private practice often allow self-pay and can cost up to $15,000. Our team’s care coordinator will discuss self-pay costs and options with you.

## What to ask your private insurance company

You will need to contact your insurance company about coverage. Here are some questions to ask:

- Does my plan cover gender-affirming double mastectomy (top surgery), free nipple grafts or chest reduction?
- Are the Seattle Children’s plastic surgeons in network for my insurance plan? At Seattle Children’s, this would be Dr. Russell Ettinger or Dr. Shane Morrison.
- What will insurance cover?
- What will I have to pay?
- What are my plan’s requirements for coverage? (For example, professionals you may need letters from, counseling requirements, or how long you need to be on testosterone, if at all.)

## To Learn More

- Plastic Surgery 206-987-2759, option 6
- Ask your child’s healthcare provider
- seattlechildrens.org

## Free Interpreter Services

- In the hospital, ask your nurse.
- From outside the hospital, call the toll-free Family Interpreting Line, 1-866-583-1527. Tell the interpreter the name or extension you need.
Checklist

The table below provides information on how to schedule your surgery consult and surgery. You can find more details about each step after the table.

<table>
<thead>
<tr>
<th>Step</th>
<th>Action</th>
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</thead>
<tbody>
<tr>
<td>1</td>
<td>Talk to your gender care provider and get a referral to Seattle Children's Surgical Gender Affirmation Program. Check with your insurance plan to see what's covered.</td>
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<tr>
<td>2</td>
<td>Get a letter from your gender care provider. (Required before scheduling your surgical consultation.)</td>
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<tr>
<td>3</td>
<td>Get a “mental health readiness” letter from a therapist. (Required before scheduling your surgery.)</td>
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<tr>
<td>4</td>
<td>Call 206-987-2759 and choose option 1 to schedule your surgery consultation.</td>
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<td>5</td>
<td>Meet with your surgeon.</td>
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<tr>
<td>6</td>
<td>Schedule your surgery after your surgeon sends a pre-authorization request to your insurance company and your insurance company confirms it will likely cover the procedure.</td>
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Step 1: Talk to your gender care provider

Your gender care provider is the person who manages your gender care. They may be a specialist or your primary care provider. They can help you through the process and answer your questions.

They will refer you to our Surgical Gender Affirmation Program where you will see one of our surgeons for a surgical consultation: Dr. Russell Ettinger or Dr. Shane Morrison. They accept Apple Health (Medicaid), private insurance and self-pay. If you have private insurance, check with your insurance plan to see what's covered. Please contact us if your insurance does not cover gender- affirming top surgery.

Step 2: Get a letter from your gender care provider

The letter written by your gender care provider provides information about your overall health history and medicines you may be taking, including hormone therapy. This letter is required before scheduling a consultation with the Surgical Gender Affirmation Program.

This letter needs to include:

- Gender care provider signature
- Date the letter was written
- Contact information for the gender care provider
- Message including the diagnosis of gender dysphoria
Step 3: Get a mental health readiness letter from a therapist

A mental health readiness letter from a mental health counselor or therapist is required before you can schedule your surgery.

This letter needs to include:

- Therapist signature
- Date the letter was written
- Contact information for the therapist
- Message including the diagnosis of gender dysphoria

Please talk to your gender care provider or our gender care coordinator if you need help finding a counselor or therapist.

- **If you already have a mental health counselor or therapist:** Ask if they can write a letter supporting your surgery. If needed, they can contact the Surgical Gender Affirmation Program at 206-987-2759, option 6, to connect to a mental health therapist who can review the letter.

- **If you need a mental health counselor or therapist to write you a letter:** You will need to meet with them for a few sessions for an “informed consent” letter. The provider gives this after a brief assessment. Contact the Surgical Gender Affirmation Program care coordinator at 206-987-2759, option 6, to learn more about “informed consent” letters.

Steps 4 and 5: Schedule and attend a surgery consultation

You can schedule a surgical consultation once you have received a referral to the Surgical Gender Affirmation Program and a letter from your gender care provider.

You and the surgeon will talk about your goals during the visit. They will give you their professional opinion about how to meet your goals based on your body type, chest size and how you would like to look after the surgery.

Step 6: Schedule your surgery

You can schedule your surgery once the following steps are completed.

- We receive the letters from your gender care provider and your mental health counselor or therapist.
- We send a pre-authorization request for the surgery to your insurance company.
- Your insurance communicates to us that it will likely cover the procedure. Or, you confirmed with our team’s care coordinator that you would like to self-pay.
- We will contact you to schedule your procedure once we have determined how the surgery will be covered and you have discussed scheduling needs with us.
Need help with the process?

Call our program’s care coordinator at 206-987-2759, option 6.

Other resources outside of Seattle Children’s

Ingersoll Gender Center
Healthcare navigator
206-849-7859
email: health@ingersollgendercenter.org

Gender Justice League
genderjusticeleague.org
206-538-0423

Trans Family SOS
transfamilysos.org

Queer Doc
queerdoc.com/gender-affirming-surgery

Seattle Children’s offers free interpreter services for patients, family members and legal representatives who are deaf or hard of hearing or speak a language other than English. Seattle Children’s will make this information available in alternate formats upon request. Call the Family Resource Center at 206-987-2201. This handout has been reviewed by clinical staff at Seattle Children’s. However, your needs are unique. Before you act or rely upon this information, please talk with your healthcare provider.

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