Your plan has transgender benefits

What the UC Student Health Insurance Plan (SHIP) covers for 2017-2018 plan year

Your UCSHIP transgender benefits at a glance
An SHS referral is required in order for services to be covered.

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Notes</th>
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<tbody>
<tr>
<td>Transgender surgery or gender confirmation (reassignment), also known as bottom surgery*</td>
<td>Subject to precertification</td>
</tr>
<tr>
<td>Top surgery for female to male (FTM)*</td>
<td>Subject to precertification</td>
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</tbody>
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Transgender surgery travel expenses

- Travel expense for each surgical procedure (limited to six trips)      | No copayment, deductible or coinsurance                                |
- Transportation to the facility where the surgery will be              | Up to $250 for round trip coach airfare                               |
- Hotel accommodations (limited to one room, double occupancy)          | Up to $100 per day, for up to 21 days per trip                         |
- Other reasonable expenses (excluding, tobacco, alcohol, drug and meal expenses) | Up to $25 per day, for up to 21 days per trip                         |

Fertility preservation*                                                | Subject to precertification. Limited to fertility preservation services only. This plan doesn’t cover the testing or treatment of infertility. Limited to $20,000/lifetime maximum. |

* These services need precertification to determine medical necessity for gender identity disorder or gender dysphoria.

What’s not covered by UCSHIP?
Some services are considered cosmetic and not covered by UCSHIP. You may still get these services, but they would not be covered by your insurance.

- Liposuction
- Facial bone reconstruction
- Voice modification surgery
- Tracheal shave
- Electrolysis (unless for donor site)
- Male to female top surgery

To find a provider for these services, go to your Student Health Services on campus. Be sure to check with the provider when you call for an appointment to make sure they’re in your health plan’s network and can accept your coverage.