



DEFENSE HEALTH AGENCY
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DHA-Policy Memorandum 24-031
December 9, 2024

MEMORANDUM FOR: SEE DISTRIBUTION LIST

SUBJECT: Referral of Gender-Affirming Surgery to Private Sector Care for Transgender and Gender-Diverse Active Duty Service Members

- References:
- (a) DoD Directive 5136.01, "Assistant Secretary of Defense for Health Affairs (ASD (HA))," September 30, 2013, as amended
 - (b) DoD Directive 5136.13, "Defense Health Agency," September 30, 2013, as amended
 - (c) DHA-Procedural Instruction 5025.01, "Publication System," April 1, 2022
 - (d) Title 10, United States Code
 - (e) Defense Health Agency Procedural Instruction 6025.21, "Guidance for Gender-Affirming Health Care of Transgender and Gender-Diverse Active and Reserve Component Service Members," May 12, 2023
 - (f) DoD Instruction 1300.28, "In-Service Transition for Transgender Service Members," April 30, 2021
 - (g) ASD (HA) Memorandum, "Guidance for Treatment of Gender Dysphoria for Active and Reserve Component Service Members," July 29, 2016
 - (h) ASD (HA) Memorandum, "Guidance for Medical Care in Military Treatment Facilities for Service Members Diagnosed with Gender Dysphoria," March 12, 2019
 - (i) ASD (HA) Memorandum, "Health Care for Transgender Service Members – Guidance for Service Members Who Identify as Non-Binary," February 10, 2022
 - (j) DHA Memorandum for Deputy Assistant Director, Medical Affairs, "Delegation of Approval Authority for Supplemental Health Care Program Waivers to Deputy Assistant Director, Medical Affairs," February 7, 2023
 - (k) TRICARE Policy Manual 6010.63-M, April 1, 2021, as amended

This Defense Health Agency Policy Memorandum, consistent with the authorities of References (a) through (c), and in accordance with Reference (d), establishes supplemental guidance to existing policy and procedures in References (e) through (k) outlining standardized processes for military medical treatment facilities (MTF) and Defense Health Networks to coordinate care and refer medically necessary treatment of gender dysphoria of transgender and gender-diverse (TGD) Active Duty Service Members (ADSM) to Private Sector Care (PSC).

The DoD, the Military Departments, and the Assistant Secretary of Defense for Health Affairs instituted policies for medically necessary in-service gender transition of TGD ADSMs. Gender-affirming care is based on the TGD ADSM's unique health care needs and involves an interdisciplinary approach by a skilled transgender care team located in either the parent MTF or at the nearest medical center with TGD health care expertise.

TGD ADSM care will be optimized within the Direct Care (DC) system. When medically necessary care is unavailable at an MTF, MTF leadership can pursue available services in other MTFs – and utilize telehealth to the greatest extent possible – before making PSC referrals. Care is determined to be unavailable when the Referring Provider (RP) or designee (e.g., assigned case manager), the Transgender Care Team, and referral management have been unsuccessful in locating the medically necessary care at any MTF in the DC system.

If the medically necessary gender-affirming surgery (GAS), as indicated in the TGD ADSM's medical treatment plan, is unavailable through DC, the RP or designee (e.g., assigned case manager), must complete the following steps to identify an appropriate qualified provider (i.e., surgeon or facility) and proceed with a PSC referral:

1. REGIONAL TRICARE NETWORK

a. The RP must first refer the TGD ADSM for a GAS preoperative (pre-op) evaluation to an in-network surgeon within the ADSM's TRICARE region in the continental United States (CONUS). The pre-op evaluation is covered under a Supplemental Health Care Program (SHCP) blanket waiver.

b. If there are no available in-network surgeons within the TGD ADSM's TRICARE region, the RP will refer the TGD ADSM to an in-network facility (e.g., hospital, medical center, surgical center) in the ADSM's TRICARE region.

2. OTHER TRICARE NETWORK

a. If there are no available in-network surgeons or facilities in the member's TRICARE region or the TGD ADSM is outside of the CONUS, the RP may refer the TGD ADSM to an in-network surgeon in another TRICARE region in CONUS.

b. If there are no available in-network surgeons within another TRICARE region or the TGD ADSM is outside of the CONUS, the RP may refer the TGD ADSM to an in-network facility in another CONUS region.

3. NON-NETWORK CONSIDERATIONS

a. If there are no available in-network surgeons or facilities in either region, the RP will refer the TGD ADSM to a non-network surgeon in the member's region documenting: (1) a justification to TRICARE for doing so, and (2) a cost estimate obtained with the assistance of TRICARE managed care support contractors.

b. SHCP waiver requests for non-network providers will be considered on a case-by-case basis, as determined by medical necessity or to avoid unreasonable impact on mission and readiness.

4. COMPLETE REQUIRED FORM. Pursuant to Reference (e), the RP must complete DHA Form 233, “Supplemental Health Care Program (SHCP) Gender-Affirming Surgery Waiver Request” (accessible on the DHA Forms Management SharePoint site (DHA Forms Library) and electronically submit the GAS waiver request package to the DHA SHCP Office at dha.ncr.mgmt.mbx.dha-shcp@health.mil.

This detailed GAS PSC referral guidance enables appropriate health care utilization, prioritization of quality outcomes, and enhanced fiscal responsibility of health care costs. TRICARE managed care support contractors are an available resource to determine whether qualified network providers (surgeons and/or facilities) are available to provide the requested GAS services; preference will be given to identified or recommended TRICARE network providers.

This DHA-Policy Memorandum is cleared for public release and available on the internet at <https://health.mil/Reference-Center/Policies> and available to authorized users from the DHA SharePoint site at <https://info.health.mil/cos/admin/pubs/>.

Please address questions regarding this DHA-Policy Memorandum to Dr. Tiffany Lange, Transgender Health Program Manager, dha.ncr.Operations-J-3.mbx.transgencare@health.mil.

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