

AMA acts to support LGBT care, oppose insurance discrimination

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The AMA has adopted new policies aimed at improving the quality of care for transgender patients, ensuring that people who are gay or unmarried have access to insurance coverage of fertility treatments, and targeting discriminatory health plans.

There are about 700,000 transgender Americans, yet most clinical settings and all electronic health records (EHR) do not allow them to properly disclose their gender identity. The lack of that information can affect how laboratory specimens are analyzed and interpreted, hamper other aspects of care and contribute to the health disparities experienced by transgender patients. A two-step question process that asks patients their biological sex at birth and their current gender can be used to help properly determine patients' gender identity.

The new policy, adopted at the AMA's Interim Meeting, in Orlando, Fla., supports "voluntary inclusion of a patient's biological sex, current gender identity, sexual orientation and preferred gender pronoun" in clinical documentation, including EHRs. That should be accomplished "in a culturally sensitive and voluntary manner," the policy says.

The AMA also adopted new policy saying that if health insurers cover fertility treatments, they should offer such benefits regardless of their beneficiaries' marital status or sexual orientation. The Association will support local and state efforts to promote such an approach to reproductive health insurance coverage.

In a related action, delegates directed the AMA to work with state medical societies and state regulators to "ensure that no health carrier or its designee may adopt or implement a benefit design that discriminates on the basis of health status, race, color, national origin, disability, age, sex, gender identity, sexual orientation, expected length of life, present or predicted disability, degree of medical dependency, quality of life, or other health conditions."



The AMA also will work with state medical societies to see that state regulators take appropriate action if an insurer's benefit design is discriminatory. Lastly, delegates directed the AMA to study a proposal that all future meetings of the Association "only be held in towns, cities, counties and states that do not have discriminatory policies."

Read more news coverage from the 2016 AMA Interim Meeting.