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Surgery/Hormone Letter Writing Information

Dear Clients/Potential Clients,

As more insurance companies begin to cover necessary gender affirming procedures, the demand for letters is increasing. Therefore, I am writing this letter to outline some of the procedures involved in seeking a referral letter from my office as well as general information about referral letters that may be helpful to you.

For Current Clients:

- 1) To guarantee that your letter will be ready on time, current clients in need of a referral letter for a gender affirming procedure should ask for the letter no less than one month in advance from the time the letter is needed (*note that some surgeons require letters prior to scheduling a surgical date while others simply request the letter in advance of the day of the procedure—it is your responsibility to know when the letter is required*).
- 2) Readiness for surgery and/or hormone treatment is discussed within the context of therapy.
- 3) If requesting more than two letters in a calendar year, a \$50, per letter, letter writing fee will apply. This fee is unfortunately not insurance reimbursable. Please note that this also includes letters necessary for the DMV but does not include carry letters.

For Clients Requesting a Second Letter or a Referral for Surgery Without Prior Engagement in Therapy:

- 1) The number of sessions required for my office to write a second letter or letter outside of an ongoing therapeutic relationship can vary, but typically ranges from one to four. There are exceptions to this and if after the first or second session my sense is that it may take longer, I will let you know and we can discuss options.
- 2) If you are seeking a second letter for a gender affirming procedure, my office requires that you sign a release of information for me to speak to the clinician who is writing the first letter as a way of speeding up the process and ensuring quality of care.
- 3) Second letters should be requested at least six weeks in advance of the time the letter is needed (*note that some surgeons require letters prior to scheduling a surgical date while others simply request the letter in advance of the day of the procedure—it is your responsibility to know when the letter is required*).
- 4) I am a Master's level therapist and therefore if your first letter is coming from another Master's level clinician, it is important to verify that neither the surgeon nor your insurance company require that one of the two letters be from a doctoral level clinician. The current version of the WPATH Standards of Care took out the stipulation that one letter be from a doctoral level clinician, however there are still some insurance companies and surgeons following the old guideline.

- 5) For a second letter or letter outside of ongoing therapy, there is a \$75 letter writing fee in addition to regular session fees. The letter writing fee is, unfortunately, not insurance reimbursable despite being required by the insurance companies.

General Information About Referral Letters:

- 1) In writing referral letters, my office follows the outline supplied by WPATH in the most recent version of the Standards of Care to best ensure that the letter will be accepted by both the doctor and the insurance company (if you are seeking insurance approval).
- 2) Each letter must include diagnostic information for the purpose of describing its impact on your dysphoria and/or capacity to consent to treatment, including medical procedures. To the extent possible and appropriate, this information will be shared with you.
- 3) Some information discussed in sessions, including but not limited to the history of dysphoria/gender incongruence will be included in letters in an effort to show the medical necessity and history of gender incongruent feelings.

By signing the form below, I acknowledge that I have read the information contained on this sheet and consent Julian R. Harris, MSW, LICSW to write a letter on my behalf

Client Name

Client Signature

Date