



Guiding Principles for Lesbian, Gay, Bisexual, and Transgender Inclusion in Health Care

All people deserve health care that effectively addresses all aspects of their needs, including prevention, treatment, and wellness services. For lesbian, gay, bisexual, and transgender (LGBT) people, however, access to vital health care services often does not exist. Moreover, factors like low rates of health insurance coverage, high rates of anti-LGBT violence, the stress of coping with systemic discrimination around sexual orientation and gender identity and expression, and a lack of cultural competency in the health care system mean that LGBT people suffer from significant health disparities. In a system that does not support alternative family structures and nontraditional caregivers, these challenges increase exponentially for LGBT youth, the children of LGBT parents, and older LGBT adults. Many members of the LGBT community also belong to other communities that face substantial disparities and are thus vulnerable to cumulative negative outcomes: for example, a transsexual Spanish-speaking woman must navigate multiple layers of discrimination based on language, ethnicity, gender, and gender identity.

Health disparities affecting the LGBT community are recognized on the federal level by the Substance Abuse and Mental Health Services Administration (SAMHSA), the Health Resources and Services Administration (HRSA), the Administration on Aging (AoA), the Centers For Disease Control and Prevention (CDC), the National Institutes of Health (NIH), and the Department of Health and Human Services Secretary's Advisory Committee on Healthy People 2020. To ensure that recognition translates into effective action, the following ten principles outline further steps necessary to make sure that LGBT people have access to the care they need to lead safe and healthy lives. These principles are framed as LGBT-specific, but they also apply to groups such as heterosexual individuals, people of color, immigrants, and older adults living alone, all of which often overlap with the LGBT population. The principles are not listed in priority order; all are important, and many are interdependent.

- **Guarantee Access to Care:** Guaranteeing health care coverage for everyone in America is a particularly important step in eliminating LGBT health disparities. Few employers extend coverage to their employees' same-sex partners, and the lack of employment protections based on sexual orientation and gender identity results in a high rate of unemployment in the transgender community and among people of diverse sexual orientations, who often face discrimination on the basis of nonstandard gender identity or expression even if they do not identify as transgender. LGBT individuals and their families must be able to access the full range of services they require over their lifespan, delivered by providers who are sensitive to their needs.
- **Include LGBT Identities and Families:** Statutory, regulatory, and program definitions must be written to remove barriers that prevent LGBT individuals from accessing health care. In particular, the terms "family," "parent," and "spouse" are commonly interpreted to exclude LGBT families on the basis of a lack of access to the rights and benefits of legal marriage. Policies must also address the welfare of LGBT youth, seniors, and dependent adults in matters such as their need to be placed in families or long-term care settings that support their LGBT identities and health care needs.
- **Do Not Exclude Based on Pre-Existing Conditions:** Due to widespread employment discrimination and lack of relationship recognition, LGBT people are more likely to be without prior insurance coverage and are thus disproportionately affected by practices that preclude or limit coverage based on pre-existing conditions. In addition, experiences of discrimination in the

health care system often discourage LGBT individuals from accessing appropriate preventive care, thus providing insurers with a pretext for denying them coverage for vital services.

- **Ensure Mental Health Parity:** Mental health services should be covered at the same level as physical health services. Research has shown that the LGBT population is seriously impacted by mental health concerns and substance abuse issues due to the stress of living under pervasive discrimination. These mental health stressors are particularly dangerous for LGBT youth during their formative years and for older LGBT adults, who lived through a time when disclosure of their sexual orientation or gender identity was cause for institutionalization.
- **Implement and Practice Cultural Competency:** Health care providers must fully understand and embrace cultural competency, and there must be systematic efforts to eradicate provider bias against LGBT people. Too often, LGBT people are misunderstood, mistreated, or openly discriminated against by health care providers who are not familiar with or sympathetic to their needs.
- **Ensure that Health Information Technology Maintains Privacy and Confidentiality:** Health information technology must employ adequate safeguards in order to protect patient privacy. While information about sexual orientation and gender identity should be collected as part of a routine medical history, unauthorized or unprotected disclosure via medical records could impact an LGBT person's access to health care and subject them to discrimination and substandard care, particularly in the case of transgender people.
- **Regularly Collect LGBT Demographic and Health Data:** Though research indicates that LGBT people face significant health disparities, most health data collection tools do not collect information on sexual orientation and gender identity. This omission hampers efforts to track and redress not only LGBT disparities, but also other health disparities, such as those affecting racial and ethnic minorities.
- **Mandate Health Care Coverage and Services for Transgender Individuals:** Transgender people must be afforded access to health care that affirms their gender identity and expression. Though the American Medical Association explicitly calls on public and private insurers to cover all medically necessary services for transgender people,¹ many insurance carriers routinely refuse coverage for medically necessary care by excluding "transgender-related services," and such exclusions are frequently expanded by insurers and health care providers to prevent transgender people from accessing even routine care. All medically necessary treatments and procedures must be provided without exception for transgender people.
- **Provide Inclusive Sexual and Reproductive Health Care Services:** Government policies must support every LGBT person's right of self-determination over their own sexual life and reproductive capacity. Every individual must have access to family planning, abortion, and reproductive health information and services, including contraception; fertility enhancement; prevention and treatment of HIV/AIDS and other sexually transmitted infections (STIs); and prenatal, birthing, and postpartum care.
- **Address the HIV/AIDS Epidemic:** Gay and bisexual men and transgender people, especially people of color, transgender women, and youth, are at particular risk for HIV/AIDS. HIV/AIDS prevention and treatment should be integrated with programs targeting other STIs as well as for the most common co-morbidities affecting older adults, such as diabetes and heart disease.

Additional information regarding these principles may be obtained by contacting Kellan Baker, National Coalition for LGBT Health policy associate, at 202-558-6828 or kellan@lgbthealth.net.

¹ AMA Resolution 122, available online at <http://www.ama-assn.org/ama1/pub/upload/mm/38/a08resolutions.pdf>