



Welcome to Planned Parenthood of the Pacific Southwest

We are pleased to provide you with preventative sexual and reproductive health care and gender-affirming hormone therapy.

Our mission is to provide quality, compassionate care to all people. We serve people on all areas of the spectrum of gender identity and expression. Planned Parenthood is committed to improving the way transgender and gender-expansive patients, including people with binary (male or female) and non-binary genders, receive health care in our community and we proudly work together with the transgender community to lead the way in eliminating barriers to care.

Our gender-affirming care services include:

- Feminizing (estrogenizing) Hormone Therapy, including estrogen and spironolactone
- Masculinizing (testosteronizing) Hormone Therapy, including testosterone

We may be able to start or continue hormone therapy and provide referrals for other gender-affirming treatments, surgeries and community resources if needed. If you are on hormone therapy, you can be seen in the health center or on telehealth for ongoing care and monitoring.

In order to receive gender-affirming hormone therapy services at Planned Parenthood of the Pacific Southwest, you must be 18 or older and able to provide consent. Patients under 18 may have a consultation with a provider to understand treatment options and to receive medications to stop their periods (if desired). Most people are able to get a hormone prescription at the end of their first visit with us.

Criteria for starting hormone therapy

Hormone readiness at Planned Parenthood of the Pacific Southwest is determined through informed consent. Informed consent means you can show understanding of both the risks and benefits of hormone therapy and you and your provider have both decided that this is the appropriate time for you to begin this process. Patients are not required to provide an approval letter from a therapist to start hormone therapy. Planned Parenthood believes that when fully informed, our patients are more than capable of determining what is best for themselves and their bodies. We do encourage all Planned Parenthood patients to connect with a mental health provider if necessary for quality, comprehensive care.

Our criteria for hormone therapy reflect the World Professional Association of Transgender Health (WPATH) and University of California, San Francisco (UCSF) Center of Excellence for Transgender Health guidelines. This may include:

- Ability to give informed consent
- 18 years of age or older
- Persistent gender dysphoria
- Any other medical or mental health issues are reasonably well controlled

Appointments/Labs

- **Your first visit:** Your provider will discuss with you the informed consent process, your gender identity history, your transition-related goals, and will review both the positive effects and possible risk factors for hormone therapy. A comprehensive medical history will be obtained and reviewed. Your provider will also assess your current risk of pregnancy and desire for future ability to have children as both can be affected by hormone therapy. The clinician will perform routine lab work to make sure you are a healthy candidate for hormone therapy. Based on the results of this visit, most patients are prescribed hormones the same day. Together, you and your provider will make the best decision for you.
- **New patient follow-up schedule:** If you're starting gender-affirming hormone therapy, you'll have an initial appointment with baseline lab work (blood draw). Then we'll need to see you for 3-month, 6-month, and 12-month follow-ups with lab work to see how things are going, check in with you about the changes you are experiencing, and possibly check that hormone levels are in a therapeutic range for your desired effects. We may make dosage adjustments, based on your feedback and lab results. It's your responsibility to call to schedule these appointments.
- **When to get labs:** If you are already taking hormones, either from us or another provider, the timing of your lab appointment is important, so the provider has a sense of your average blood levels.
 - **For people taking oral estradiol**, please get labs at least a few hours after you take your medication.
 - **For people using injectable hormones**, we want labs halfway between your shots. For weekly injections, this means 3-4 days after your shot.
- **Established patients:** If your levels are stable and you're happy with your treatment effects after your 12-month visit we'll want to see you once yearly for a follow-up appointment and labs, unless you'd like to come in sooner.
- **Dosage/medication changes:** If you want to change your dosage, or switch to a different medication, you'll likely need a visit and labs first. At this visit, the provider will educate you about the medication and how to take it. Three months after changes to your medication, we'll often need another visit and a set of labs to see how it's going.
- **After your visit:** You can expect a call from our Care Coordination team about one week after your hormone-therapy visit to make sure you were able to access your medications. Additionally, our Care Coordination team provides follow-up services to help our patients with needs outside of hormone therapy, sexual, and reproductive health care. We can help link you with additional resources found at the end of this guide.

Insurance

- **Referral to be our patient:** Planned Parenthood contracts with many, but not all, insurance plans. If you have a PPO plan (preferred provider organization) you can typically choose to go wherever you wish without a referral, as long as we take your insurance. For some commercial HMO plans and some types of Medi-Cal, you'll need a referral from your primary care provider (this is the main doctor who you're assigned to, or your home clinic). This is called a referral authorization, and is processed using your insurance company's website. Your doctor's office will need some basic information about the type of care you're getting, which health center, and for how long. Sometimes they'll want us to send them a referral request letter first so please get their fax number. The referral usually lasts for 1 year.
- **Coverage:** Gender-affirming medical care including hormones and surgeries must be covered in California, according to the Insurance Gender Nondiscrimination Act, AB 1586. However, if you have not met your deductible, or would have a copay for any other service, the same will apply to your gender-affirming care services and prescriptions. Additionally, Planned Parenthood of the Pacific Southwest is not contracted with every insurance provider. We will check for insurance coverage before or at the start of your visit. You can ask our biller for a cost estimate before you begin your appointment.
- **Medication authorization:** Certain medications may require yearly authorization from your insurance. Please allow extra time for us to submit for authorization, and notify us if your pharmacy says a new authorization is needed. We will often, but not always, receive a fax from them with this information.
- **Changing medication:** Sometimes a plan will cover an alternative medication if we can show that you tried the formulary medication and had a problem with it.
- **If you are uninsured:**
 - **Family PACT:** We may be able to sign you up for Family PACT, if you meet the income requirements and are receiving certain sexual health services. This will not cover your gender-affirming medical care but can cover other sexual health services.
 - **Sliding-scale fees:** For people who are paying out-of-pocket for their services, we have a sliding scale for fees based on your income. There is also a flat rate for telehealth services.
 - **Medications:** If you do not have insurance, you can pay out of pocket for your medications. We recommend that you ask your Planned Parenthood of the Pacific Southwest provider about prescription discount programs to reduce the cost to you. You can search by type of medication and zip code, and the programs will show you which pharmacies have the most affordable rates using their discounts. Some pharmacies will also be able to connect you with affordability programs.
 - **Lab tests:** If you need lab work and do not have insurance, you can arrange to come to Planned Parenthood for your blood draw, and pay us directly, using our sliding scale. We have worked to make this service affordable.
 - **Losing coverage:** If you lose insurance coverage, please let us know. We can help you find the most affordable approach to continuing your hormone therapy. We want you to have access to this medically necessary care.

Feedback/concerns

- **Anonymous feedback:** We want to make your health care experience the best it can be, and your feedback is critical in making that happen. If you would like to provide completely anonymous feedback, you are welcome to participate in our Press Ganey survey. You'll receive a link through text or email after your visit. Under the primary reason for your visit, select Hormone Care. You can respond to as many or as few of the questions as you want, and there is a free text space if you wish to leave more personalized feedback. We appreciate and make changes according to the feedback provided through the surveys. It's also helpful to know what we're doing well, so we can keep it up.
- **Direct feedback:** If you have a negative experience, or would like us to know something that would help us offer better care, please reach out however you feel most comfortable. You can **call our contact center at 1-888-743-7526** and ask to provide feedback, or ask to be connected to a manager at the health center where you were seen. It's very important to us that you receive respectful and well-informed care, and your feedback helps us focus on areas of growth. We can work with you to find solutions, and remove barriers to access.

Pharmacies

- **Sourcing issues:** Sometimes pharmacies can't get the medication you need, or the specific injection supplies you need to take your medication. Please make a note of the specific problem in case we need to help. Please call other pharmacies in your area and ask if they're able to get the medication/supply. It's helpful to try a different chain and/or a locally-owned pharmacy. Ask your pharmacy to special order what you need or to check their warehouse.
 - In the case of injection supplies, there are alternate needle and syringe sizes that can work, but the injection needle needs to match what we prescribed, unless you are switching to a different administration route. Sometimes a medication is back-ordered, but will arrive in a week or two, and sometimes a pharmacy will never be able to source a particular medication. If you can't source the medication, we may be able to change your prescription and get a new authorization from your insurance, but this could take some time and may require a visit to teach you about the medication.
- **Changing pharmacies:** You can call us to update your pharmacy in our system. However, you are able to transfer your prescriptions yourself. Call your new pharmacy, give them your information and request that your prescriptions are transferred from your old pharmacy. The only exception is if you have a brand new testosterone prescription that you haven't ever filled, or if you have run out of refills of a medication. In that case, please contact us.

Refills

- **Call ahead:** Please contact us 1-2 weeks before you run out of your last refill to give us time to communicate your request to your provider and work out any issues with the pharmacy and insurance. Please remember to schedule an appointment if you are due for one.
- **Courtesy fills:** If you have run out of refills, but have not been able to come in for your required visit/labs, please let us know what's happening for you. Depending how long it's been, you may be able to get a shorter courtesy refill, to give you time to follow up.

Moving out of area

- **Remote care:** If you move within the state, we may still be able to see you remotely. We can work with you to coordinate getting labs, scheduling telehealth appointments and finding a pharmacy.
- **Out-of-area referrals:** If your insurance plan is out of area, you might not be able to get a referral to come see us from your new primary care doctor. This means you'd need to pay out of pocket for your visits with us until you're able to establish care with your new provider.
- **Transferring care:** We may be able to help you find a new provider. Planned Parenthood health centers throughout the country are working to expand access to gender-affirming care. If you want your medical records sent to your new provider, you'll need to fill out a release form. It's helpful to do this before you move, but if needed we can mail you the release form.

Understanding your medications

Estradiol

If you're taking estradiol, there are some issues we'd like you to be aware of:

- **Effects:** Feminizing (estrogenizing) hormone therapy is medicine to make your body look more feminine. This medicine consists of estrogen, a testosterone blocker (if you have testes) and occasionally a progestin. Below are some of the changes you can expect and how long it may take to notice these changes.

These changes are reversible and may lessen or go away if you stop taking feminizing therapy:

Reversible Effects	Expected Onset	Expected Maximum Effect
Softening of skin/decreased oiliness	3-6 months	1-2 years
Decreased facial/body hair growth	6-12 months	2-3 years
Body fat redistribution to feminine pattern	3-6 months	2-3 years
Decreased testicular size	3-6 months	3-2 years
Decreased muscle mass/strength	6-12 months	2-3 years
Changes in libido (sex drive)/decreased spontaneous erections	Variable	Variable

These changes are **permanent and will not lessen or go away** if you stop feminizing therapy:

Permanent Effects	Expected Onset	Expected Maximum Effect
Breast growth	3-6 months	2-3 years
Decreased sperm production	Unknown	Unknown



- **Administration method:** Oral estradiol (a tablet that you swallow) is sometimes prescribed sublingually, meaning to dissolve the same tablet under the tongue. There is not scientific evidence clearly supporting that the sublingual route is superior to the oral route. You can discuss which way you prefer to take it with your provider.
- **Treatment approaches:** Our patients are commonly prescribed oral or sublingual estradiol and oral spironolactone, but there may be other treatment options, depending on your goals/desires, where you are in your transition/gender-affirmation process, your specific provider, your insurance plan, and regional availability. Please note that not all options that you read about online are able to be prescribed by Planned Parenthood of the Pacific Southwest providers due to lack of scientific evidence to support safe and effective treatment with certain medications. Please come to us with questions and requests.
- **Injectable estradiol:** Sometimes patients will be prescribed an injectable form of estradiol. This requires a yearly insurance authorization process, injection training, and supplies. Our patients will normally start on oral estradiol. If you are taking injectable estradiol, you may encounter shortages. We can work with you to change to a different formulation of the injectable estradiol, and you can call other pharmacies in your area and ask if they can source it. We ask that you do not stockpile injectable estradiol, as that makes it less possible for others to take this medication, and we can usually find a solution if there is a shortage.
- **Refill lead time:** Please contact us at least 1-2 weeks before your last refill runs out. Sometimes the pharmacy tries to fax us a refill request, and we don't receive it. If there is a delay, please notify us.
- **Prescription authorization:** Topical forms of estradiol, injectable estradiol valerate and micronized progesterone often require yearly authorization from your insurance, and some plans won't cover progesterone.
- **Labels:** If your prescription directions read differently than what you discussed with your provider, please take the medication the way your provider explained it to you. For example, your dosage may have changed. You can always contact us about this, or with any questions. The label may have your legal name on it, so that insurance will cover it. We can help with a legal name change process if desired.

Testosterone

If you're taking testosterone, there are some issues we'd like you to be aware of, to reduce confusion and frustration with the process:

- **Effects:** Masculinizing (testosteronizing) hormone therapy is medicine to make your body look more masculine. Below are some of the changes you can expect and how long it may take to notice these changes.

These changes are reversible and may lessen or go away if you stop taking testosteronizing therapy:

Reversible Effects	Expected Onset	Expected Maximum Effect
Skin oiliness/acne	1-6 months	1-2 years
Cessation of menstrual period	2-6 months	Not applicable
Body fat redistribution to masculine pattern	3-6 months	2-5 years
Vaginal atrophy	3-6 months	1-2 years
Increased muscle mass/strength	6-12 months	2-5 years
Changes in libido (sex drive)	Variable	Variable

These changes are **permanent and will not lessen or go away** if you stop testosteronizing therapy:

Permanent Effects	Expected Onset	Expected Maximum Effect
Facial/body hair growth	3-6 months	3-5 years
Clitoral enlargement (by 1-3cm)	3-6 months	1-2 years
Deepened voice	3-12 months	1-2 years
Scalp hair loss, male pattern baldness	>12 months	Variable

- **Controlled substance:** Testosterone is a DEA schedule III controlled substance because it can be used illegally for body building. It is important that only you use your medication. The prescription authorization is usually renewed once yearly. We are only able to write the prescription for 120 days of refills, and some insurance plans will only pay for one month of medication at a time.
- **Administration route:** The pharmacist may have questions about how the medication is administered. Many of our patients take the testosterone through subcutaneous injection (under the skin), but the testosterone is labelled for intramuscular injection (into the muscle). SubQ is a safe and common off-label administration method. You can let the pharmacist know that the subQ route was not a mistake.
- **Treatment approaches:** Our patients are commonly prescribed injectable testosterone, but there may be other treatment options, depending on your goals/desires, where you are in your transition/gender-affirmation process, your specific provider, your insurance

plan, and regional availability. Please note that not all options that you read about online are able to be prescribed by Planned Parenthood of the Pacific Southwest providers due to lack of scientific evidence to support safe and effective treatment with certain medications. Please come to us with questions and requests.

- **Refill lead time:** When you have no refills left on file, and about 1-2 weeks of medication remaining, please contact us to request a new prescription. Sometimes the pharmacy tries to fax us a refill request, and we don't receive it. In that case you can contact us.
- **Prescription authorization:** When you first start testosterone, it may take us some time to get the medication covered by your insurance. Once a year, we will need additional time after you request your refill to get the testosterone covered by your insurance again.
- **Reactions:** If you have a bothersome reaction to testosterone, please let us know. We can problem solve with you. In some cases, you would switch to a different formulation. It is common to get a bit of itching at the injection site, or some soreness and mild swelling at the site for a few days. It is rare, but possible, to have a true allergy to the oil in which the testosterone is suspended. Of course, if you are concerned you're having an anaphylactic reaction (swelling, difficulty breathing, sometimes nausea/vomiting), please call 911.
- **Labels:** If your prescription directions read differently than what you discussed with your provider, please take the medication the way your provider explained it to you. For example, your dosage may have changed. You can always call and check in with us about this, or with any questions. The label may have your legal name on it, so that insurance will cover it. We can help with a legal name change process if desired.
- **Needle phobia:** If you have a needle phobia, or any other issue that is preventing you from administering your shots, please let us know. Sometimes it will get easier with practice. However, we can work with you to find something that works for you, like topical testosterone. Some insurance plans are more likely to cover different formulations if you've tried the standard approach first.

Other Services

We are happy to help you with other aspects of gender care and gender affirmation, if these are things you're interested in. Please do not hesitate to reach out to our Care Coordination team at **(619) 881-4682**.

- **Patients under 18 years of age:** While patients under 18 cannot receive hormone therapy, they may have a consultation with a provider to understand treatment options and to receive medications to stop their periods (if desired).
- **Name/gender marker change letters:** We recommend the [Transgender Law Center's state-by-state guide](#) to changing legal identity documents. We can provide a letter attesting that your gender is your gender for your court process and passport application.
- **Information on surgery:** If you're interested in a referral for a particular surgery, we can help you with a list of recommended surgeons and a letter of support. You will likely need to get a referral to the surgeon from your primary care provider as well. We can help you navigate those processes. For some surgeries you need a letter from a therapist and a letter from a physician. For others you'll need 3 letters: one from a mental health professional with a PhD, PsyD, or MD, one from a therapist, and one from a hormone provider or primary care provider. There may be an associated cost with this visit as the clinician needs to evaluate whether you are an appropriate candidate for surgery.

- **Therapists:** We maintain lists of gender-affirming therapists for a variety of insurance plans and sliding-scale payment options. Whether or not you want to talk with a therapist about gender issues, patients often prefer to see someone trans-affirming for their mental and emotional health care. We can work with you to help you find a therapist you connect with.
- **Information for hair removal:** We may be able to help you find an affirming and accessible hair-removal location or talk to you about avenues for hair removal.
- **Fertility resources:** Fertility preservation is not usually covered by insurance at this time, but we can discuss fertility with you and share options for fertility preservation.
- **Vocal coaching:** This is not covered by insurance at this time, but we may be able to provide you with contact information for gender affirming vocal coaching. There is also a [voice-coaching app](#) available for download.
- **Community resources:** We can help connect you with community-based resources, like free binder programs, support groups, food pantries, LGBTQ+ shelters, crisis lines, microgrants, and the nearest LGBTQ+ centers and trans-specific events. Just let us know what type of support and community-building you're looking for, and we'll try our best to connect you. Feel free to share community resources with us if you feel comfortable.
- **Support for your loved ones:** If your loved ones need education about trans issues, support in their learning process, or to build community, we can connect them with support circles and educational resources, and can answer questions (with respect for your privacy) if they come with you to a visit. Your loved ones can also [learn more from PFLAG](#).