

Vaginoplasty

The Comprehensive Gender Services Program (CGSP) uses the World Professional Association for Transgender Health (WPATH) Standards of Care guidelines when referring you for care relating to gender dysphoria, including vaginoplasty. The process described in this handout helps us to make sure that we follow the WPATH Standards of Care guidelines and give you safe and effective care.

What are the requirements for vaginoplasty?

Vaginoplasty is a surgery that creates a vulva and vagina. It also includes removing the penis and testicles.

- To have this surgery, you will need **1 or 2 support letters** from licensed mental health care providers that address the WPATH Standards of Care guidelines. The number of support letters you need depends on the requirements of your insurance provider.
- You will need to be using hormone replacement therapy (HRT) for **at least 12 consecutive months** (1 full year) before your surgery. Your support letters need to include the month and year that you started HRT. If you cannot or don't want to take HRT, your support letter will need to provide information on why HRT is not appropriate for you.

What types of vaginoplasty are available at Michigan Medicine?

- **Penile inversion vaginoplasty** is the most common type of vaginoplasty offered at Michigan Medicine. In this method, the skin of the penis is flipped inside the body to become the vaginal canal.
- The **peritoneal pull-through vaginoplasty** has also recently become available to our patients, though our surgeons typically only use this

method in situations where penile inversion vaginoplasty is not an option. This method pulls part of the **peritoneum** (the tissue that surrounds your stomach organs) down to your groin and uses it as the lining for the new vagina (instead of using the skin of the penis).

- Another option is **zero-depth vaginoplasty**, also called **vulvoplasty**. This surgery builds the outer genitals (the vulva, which includes the labia and clitoris), but it does not build the vaginal space inside your body.
 - Unlike a full-depth vaginoplasty, this option does not require permanent hair removal at the surgical site.
 - If you have a zero-depth vaginoplasty, you can still decide to have a full-depth vaginoplasty in the future.

How do I know if I need 1 or 2 support letters?

The following insurance providers have updated their policies based on the newest version of the WPATH Standards of Care. If your insurance is from any of the following insurance providers, you should only need to get **1 support letter** for vaginoplasty:

- Aetna
- Blue Cross Blue Shield of MI (including Blue Care Network and Blue Cross Complete)
- Blue Cross Blue Shield of MN
- Blue Cross Blue Shield FEP
- Cigna
- Highmark BCBS
- Humana
- McLaren
- Medical Mutual of OH
- Meridian
- Priority Health

If your insurance is from any of the following insurance providers, you will still need **2 support letters**:

- Some out-of-state Blue Cross Blue Shield (BCBS) providers (like Anthem BCBS, BCBS of MA, and Empire BCBS)
- Molina
- Paramount
- UnitedHealthcare

This list of insurance providers may be incomplete. CGSP will continue to update this list as we gather further information.

If your insurance provider is on the list of providers that only ask for 1 support letter, it is not a guarantee that you will only need 1 letter for your surgery to be approved and covered by your insurance plan. Similarly, if your insurance plan is not on either of these lists, it is not a guarantee that insurance coverage for your surgery will be denied. Individual insurance plans can change which procedures are covered, so we recommend that you contact your insurance provider or look at your insurance plan documents for information about what your personal plan can cover.

After your surgery consultation appointment, you will talk with your surgery scheduler about the process of getting your surgery authorized by your insurance plan and what it means if that authorization is approved or denied.

What happens if my insurance plan doesn't cover vaginoplasty?

- If your insurance plan does not cover the surgery, we suggest speaking with University of Michigan Health's patient financial counselors. They can get you a cost estimate (tell you about how much the surgery will cost) and talk with you about possible financial assistance (resources to

help with paying for the surgery). You can call them Monday through Friday between 8:00 AM – 4:00 PM at (734) 232-2621.

- If you decide to have the surgery, our patient financial counselors can also work with you on a payment plan for the **out-of-pocket costs** (the costs that your insurance won't pay for).
- You will still need 1 support letter from a mental health care provider.

What are my next steps to have a vaginoplasty?

1. Read through the “What to Expect: Vaginoplasty” packet that you received with this handout. This provides more information on the process from consultation appointment to surgery and recovery.
2. Fill out and sign the “Vaginoplasty Acknowledgment Form,” then send the form back to us.
 - This form provides more information on the timeline of your recovery period. We need to make sure that you have seen, understood, and agree to the information.
 - You will receive a copy of this form along with this packet. If you have not received the form, please let our office know.
3. Think about starting the process of permanent hair removal at the surgical site (the place on your body where you're having vaginoplasty).
 - This permanent hair removal is required for full-depth vaginoplasty, and it can take at least a year to complete.
 - If you are only interested in zero-depth vaginoplasty, you do not need permanent hair removal at the surgical site.
 - A list of permanent hair removal providers and a diagram (detailed drawing) of where you must get hair removal is included in this packet.
4. Go to a vaginoplasty information meeting.
 - This meeting goes over a lot of general information about the surgery, including what happens during the surgery, what the

possible risks and complications (medical issues from surgery) are, and how patients can prepare for surgery and recovery. There is also a presentation on the process of permanent hair removal.

- **Our surgeons require that patients coming in for a consultation appointment watch the information meeting before their appointment.** This leaves more time during your personal consultation appointment to talk about your specific situation with the surgeon.
- The vaginoplasty information meetings are usually held every other month (6 times a year) as an online video conference (over Zoom). You can register for the next meeting by calling the CGSP office at (734) 998-2150. There is also a flyer for the meeting included with this packet.
- If you cannot attend one of the live meetings, call CGSP to let our team know so that we can send you a recorded version of the presentation.

What are the next steps to get support letters for vaginoplasty?

1. Meet with your licensed mental health provider or providers to get support letters.
 - Your letter writers must be licensed mental health providers willing and able to write support letters for you to get a vaginoplasty. Licensed mental health care providers include:
 - Psychologists
 - Clinical social workers
 - Professional counselors
 - Marriage and family therapists
 - Psychiatrists or psychiatric nurse practitioners
 - If you need 2 support letters, you will need to have separate appointments with each letter writer.

- If you need 2 support letters, the second letter may be written by your primary care or hormone care provider instead of another mental health care provider.
 - If your letter writer has a limited license, their fully licensed supervisor needs to co-sign the letter.
 - If you would like help finding licensed mental health care providers who are able to write your support letters, please call the CGSP office at 734-998-2150.
2. You or your letter writer can send the letters to us in one of the following ways:
- **Mail:** CGSP, 4250 Plymouth Rd, SPC 5766, Ann Arbor, MI, 48109
 - **Fax:** (734) 998-2152
 - **E-mail:** GenderServices@med.umich.edu
 - If you are sending 2 support letters, it is best if we receive both letters within 6 months of each other (as insurance providers often reject letters that are more than 12 months old).
3. Once you or your letter writer have sent the letter (or letters) to CGSP, we recommend that you call the CGSP office to make sure that we received the letter and to schedule the date of your consultation appointment with the surgeon.

If you or your letter writer have any questions or concerns about the letter-writing or letter-reviewing process, please call our office at (734) 998-2150.

What information does my licensed mental health care provider need to include in my support letter?

- Our list of guidelines is included at the end of this packet. Please give this list to the licensed mental health care provider who will write your support letter, especially if they don't know the WPATH Standards of

Care. If they have any other questions about what to include in the letter, please have them contact the CGSP office at (734) 998-2150.

- The guidelines we use to determine if your letter is complete are based on the WPATH Standards of Care. The places where our guidelines are different from WPATH are related to requirements from insurance providers and to medical concerns from our surgical teams.

What happens after I send my support letters to CGSP?

Once we receive your support letters, we will review them as soon as possible. This review makes sure that the support letters address the WPATH Standards of Care guidelines. We will respond in one of 2 ways once we have reviewed your support letters:

- If the support letters do not address the WPATH Standards of Care guidelines, or if we have questions about the support letters, we will contact your letter writers. It's important that your letter writers talk with our office about the letters so that they can update the support letters as needed.
- If we have the appropriate number of complete support letters for you that your insurance provider requires, and if there are no issues with your support letters, we will contact you (by phone or through the online patient portal at MyUofMHealth.org) to schedule your personal consultation appointment with the surgeon. If you have not gone to one of the vaginoplasty information meetings, CGSP will help you sign up for an upcoming meeting as well.

What happens at the surgery consultation appointment?

At the consultation appointment, you will:

- Talk with your surgeon to see if you are a good candidate for surgery (meaning that you are medically ready for vaginoplasty).
- Ask your surgeon questions about the surgery.

- Talk with your surgery scheduler about your next steps, including **out-of-pocket costs** (the costs that your insurance won't pay for).

Please note: You will not schedule your surgery date at the consultation appointment.

When can I join the waitlist for surgery?

There are a few steps that need to happen before you can get your surgery date.

- You must be nicotine-free. This means that **you must stop using all products containing nicotine** (including cigarettes, e-cigarettes or vape pens, nicotine patches, nicotine gum, and chewing tobacco).
 - The surgical team may have you tested before scheduling your surgery date to make sure that you don't have nicotine in your body. If your test shows that you have nicotine in your body, your surgery date will not be scheduled at that time. You will likely need to wait 8-12 weeks before we test you again for nicotine.
 - If you smoke or vape marijuana, our surgeons also recommend that you stop completely or switch to marijuana products that are not smoked or vaped, such as edibles.
- If you are having a full-depth vaginoplasty (penile inversion or peritoneal pull-through), you must complete the required permanent hair removal at the surgical site.
 - Once your hair removal provider tells you that your hair removal is complete, please call the Plastic Surgery clinic at (734) 998-6022 to let your surgical team know.
- It is best to make sure that your support letter (or letters, if your insurance provider requires 2) is up-to-date and not too old. Many insurance providers won't accept letters that are over 1 year old. We will use the support letters to get insurance pre-authorization for payment from your health insurance provider.

You will join the waitlist for surgery once your surgical team has:

- Confirmed that you are not smoking or vaping anything, and that you are not using nicotine in any form
- Confirmed that you have completed permanent hair removal
- Made sure that your support letter (or letters) is complete and up-to-date
- Gotten insurance pre-authorization from your insurance company for you

The Plastic Surgery department will review all of these steps with you at your consultation appointment.

Who do I contact if I have questions about this process or my support letters?

Please contact our office by phone at (734) 998-2150 on Monday through Friday between 8:00 AM – 4:30 PM.

- We can also help your letter writer if they have any questions about the letter writing process and how they can make sure that the support letter addresses the WPATH Standards of Care guidelines.

If you have already had your consultation appointment and you have questions about your next steps after that appointment, please contact the Plastic Surgery clinic directly. They can be reached by phone at (734) 998-6022 on Monday through Friday between 8:00 AM – 4:30 PM.

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