



To: IPAs, Medical Directors and Direct PCPs
From: IEHP – Provider Relations
Date: October 30, 2018
Subject: **New, Revised, and Retired UM Authorization Guidelines**

IEHP’s Utilization Management Subcommittee has approved the following authorization guidelines, effective 10/18/2018:

Guideline #	Guideline Title	Degree of Change	Revisions
UM_SUR 04	Gender Dysphoria	Substantial revision	<ol style="list-style-type: none"> 1. Hair Removal by laser and electrolysis consultation and procedure requests <ol style="list-style-type: none"> a. Controversial area with limited evidence for criteria. Used available evidence and subject matter expert consultants b. Limited to: <ol style="list-style-type: none"> i. genital area in preparation of gender-affirming surgery ii. Face/neck, back, chest, and abdomen c. Quantity and frequency limitation with controls to ensure Member safety 2. Facial reconstruction surgery requests <ol style="list-style-type: none"> a. Documentation, to include photos, justifying reconstructive requests 3. Chest surgery for Trans female to male minors

You may access these and all other authorization guidelines through the Provider portal.

Location: www.iehp.org > For Providers > Utilization Management Criteria

As a reminder, all communications sent by IEHP can also be found on our Provider portal at the following address: <https://ww3.iehp.org/en/providers/correspondence/>.

If you have any questions, please do not hesitate to contact the IEHP Provider Relations Team at (909) 890-2054.