

Gender affirming claims requirements

To align with our *Clinical Utilization Management (UM) Guideline CG-SURG-27* on gender affirming surgery, providers will be required to include additional data on the claim form **for dates of service (DOS) on and after April 1, 2022**.

Professional modifier requirement

Professional providers submitting gender affirming claims on a *CMS-1500/837P* claim form will be required to append the modifier listed below.

Modifier	Description
KX	Requirements specified in medical policy have been met.

Institutional condition code requirement

Institutional providers submitting gender affirming claims on a *UB-04/837I* claim form will be required to include the condition code listed below.

Code	Description
45	Ambiguous Gender Category

This applies to claims submitted with DOS on or after April 1, 2022, for gender affirming medical and surgical procedures. Gender affirming claims submitted without the KX modifier or condition code 45 and appropriate diagnosis code(s), as indicated in the clinical guidelines, will be denied. These changes are intended to align billing across insurance products.

For more information, please review the information from [CMS](#).



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