

A PHARMACIST’S ROLE IN GENDER AFFIRMING CARE: UVM HEALTH SYSTEM SPECIALTY PHARMACY PERSPECTIVE

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Background

Vermont is one of 14 states that currently have “shield” laws protecting access to transgender healthcare.¹ It is reported that an estimated 38% of transgender population age 13 and older live in states that have a “shield” law protecting access to transgender health and gender affirming care.¹

Suppression of puberty or the blockade of endogenous sex hormones plays an important role in gender affirming care.

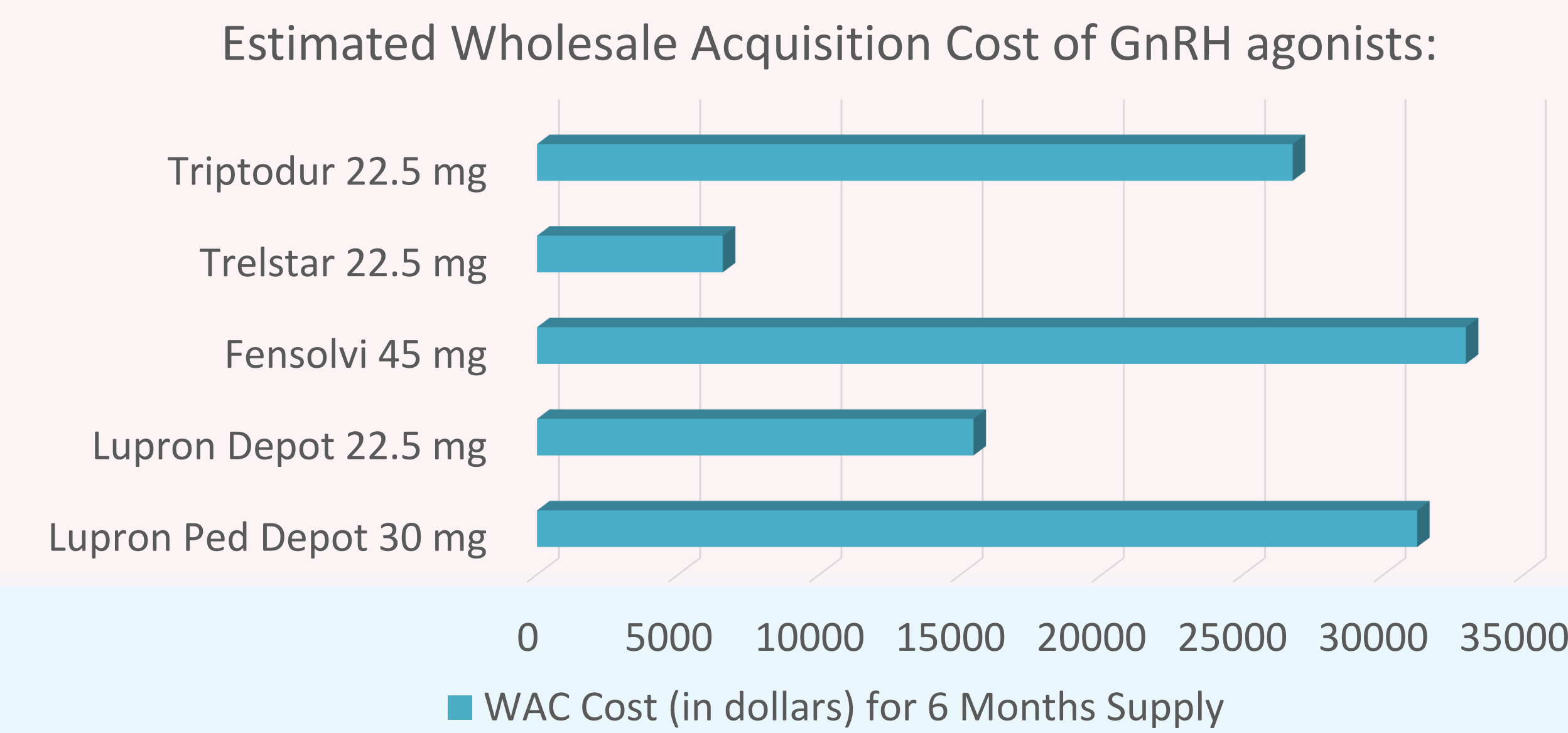
The World Professional Association for Transgender Health’s Standards of Care, Version 8 (SOC-8) recommends beginning pubertal hormone suppression in eligible transgender and gender diverse adolescents or individuals described below:

Adolescents	After they first exhibit physical changes of puberty (Tanner Stage 2). ²
	Seeking such an intervention and who are well into or have completed pubertal development but are unsure about beginning hormone therapy. ²
	With a uterus, suppression of endogenous sex hormones can be used to reduce dysphoria caused by their menstrual cycle. ²
Individuals	With testes who are taking estrogen if the individuals plan is to approximate circulating sex hormone concentrations in cisgender women. ²

Role of Medications

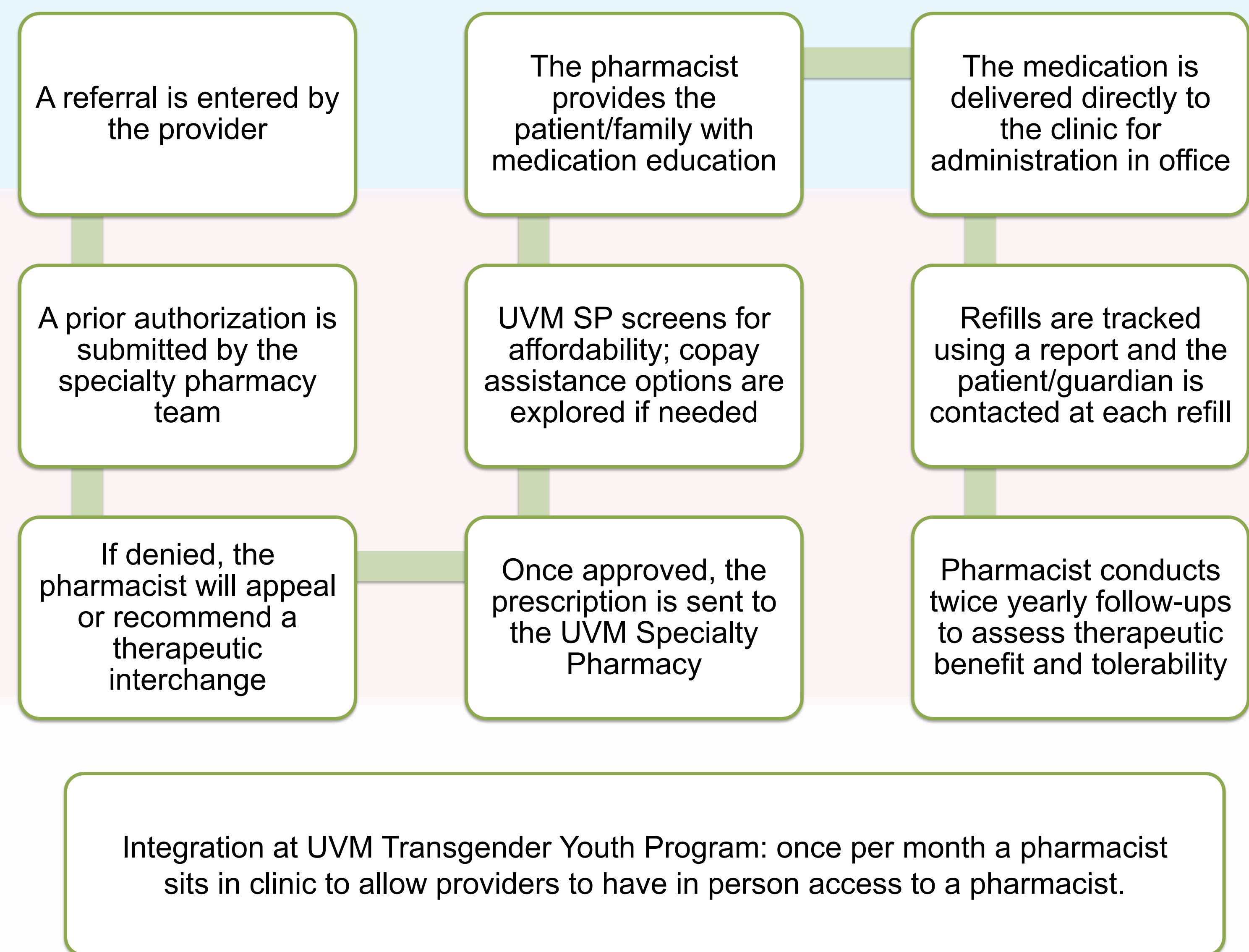
The SOC-8 recommends when selecting a medication for endogenous hormone suppression, using those which have been studied in the transgender population.¹

- Gonadotropin releasing hormone agonists are medications that suppress puberty, they are used in the pediatric population for precocious or early puberty. Although these medications aren’t FDA approved for use in the transgender population, they have been studied in this population and have shown superior efficacy, safety and reversibility compared to alternatives.³
- The SOC-8 cites GnRH agonists as a very effective method for suppressing the production of sex steroids but notes cost is a significant barrier to use.²



Methods

- For patients using a provider within the University of Vermont Health System (UVMH), a referral-based system is used that allows providers to submit a referral for a specialty medication, in this case, GnRH agonist.



Pharmacist Education at UVMH and in the Community

Another aspect of patient care in the transgender and gender diverse population is the lack of education that most pharmacists receive on gender affirming care. We are reducing this barrier by providing educational opportunities for our staff.

- An annual presentation on gender affirming care is given to ambulatory and inpatient pharmacy residents at UVM. This presentation is additionally open to pharmacy students on rotation and pharmacists on staff.
- Of the surveys collected after the annual presentation, 100% of respondents reported they would recommend the educational session to peers. Notable comments from respondents described the education as informative and well rounded.
- Our patient care coordinators were provided with a staff education on gender affirming care in youths. This education was focused on their roles in the pharmacy including prior authorization submissions and coordination of care.
- We published an article in the Vermont Health Systems Pharmacists newsletter, *Pharmacy Pearls for Providing Care to Transgender and Gender Diverse Patients*. This article summarizes the guidelines and provides an overview of gender affirming care. The purpose was to provide education to a greater number of pharmacists outside our organization.

Results

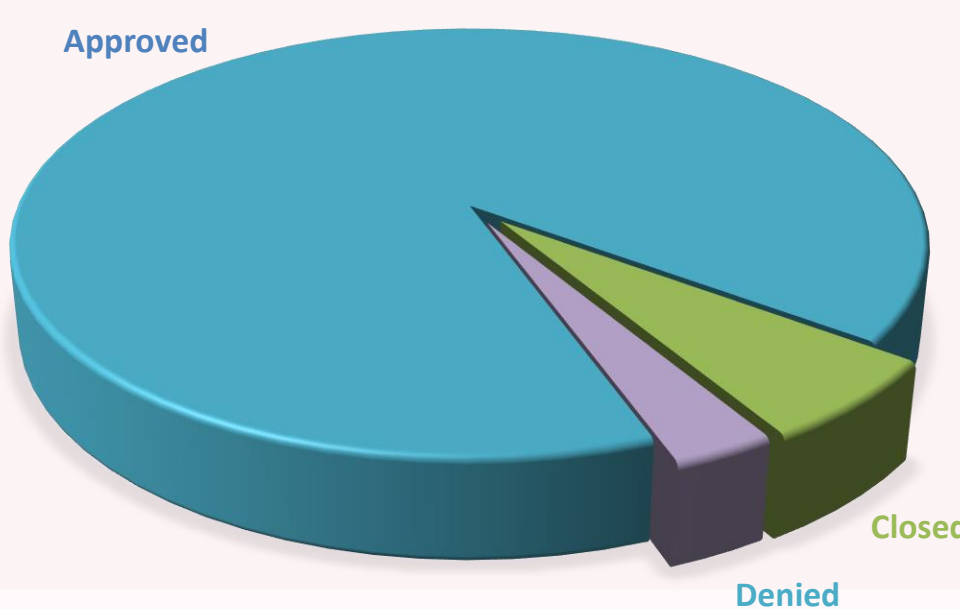
Over the course of the last year, 50 patients were enrolled in the UVM Specialty Pharmacy Transgender Health Program.

Enrollment in the program includes the following:

- Medication refill management and delivery to clinic or home
- Pharmacist education prior to starting medication
- Minimum of twice-yearly pharmacist follow ups or check ins
- Drug interaction and side effect management
- Prior authorization tracking and support including re-authorizations

Over the last year the following outcomes were noted*:

REFERRAL OUTCOMES



UVM Specialty Pharmacy submitted prior authorizations for 32 referrals:

- 29 were authorized
- 1 was denied
- 2 were closed*

*referrals marked ‘closed’ are typically due to prior authorization not needed or duplicate entry

5.4 days

Average turnaround time from referral to coverage determination

\$ 22.60

Average copay for GnRH agonists for gender affirming care

96%

Of patients reporting **no** missed or late doses

97%

Of patients reporting partial or full therapeutic benefit from GnRH agonist

100%

Proportion of Days Covered (PDC) score**

Pharmacist education and involvement with gender affirming care has led to high adherence rates, increased access to medications through copay reduction and quick turnaround times.

**data from 9/1/2024-9/1/2025
** Proportion of Days Covered (PDC) value is an industry standard metric used to measure adherence. A PDC score $\geq 80\%$ is considered an adherent measurement for most medications.

References

- Movement Advancement Project. "Equality Maps: Transgender Healthcare 'Shield' Laws." www.mapresearch.org/equality-maps/healthcare/trans_shield_laws. Accessed 10/06/2025.
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- Wylie C Hembree, Peggy T Cohen-Kettenis, Louis Gooren, Sabine E Hannema, Walter J Meyer, M Hassan Murad, Stephen M Rosenthal, Joshua D Safer, Vin Tangpricha, Guy G T'Sjoen, Endocrine Treatment of Gender-Dysphoric/Gender-Incongruent Persons: An Endocrine Society Clinical Practice Guideline, *The Journal of Clinical Endocrinology & Metabolism*, Volume 102, Issue 11, 1 November 2017, Pages 3869–3903, <https://doi.org/10.1210/jc.2017-01658>