

New Patient Surgery Intake Checklist

CNE Breast Health Center Gender-Affirming Care

The following must be completed <u>prior</u> to scheduling an initial consult.

Once complete, please send to the Breast Health Center Navigator by fax to 401-736-4519. Please include your full legal name, preferred name and date of birth when sending this form back. If you have questions, please call 401-736-3737.

Referral Requirements Letters
One letter from your medical provider (must be an MD, NP, or PA). The letter should follow the sample format included in this packet. (If preferred an electronic packet can be emailed to you on request.)
One referral letter from your licensed mental health provider . For those with no access to a mental health provider able to perform this assessment, we can provide referrals for available professionals.
Medical requirements for chest surgeries
Documented body mass index (BMI) < 35 This can be included in medical records from a recent doctor visit or in your medical clearance letter (see below)
For patients seeking masculinizing chest surgery who are age 40 or older, mammogram in the past year
For patients seeking breast augmentation, documentation of consideration of estrogen therapy* (The CNE Breast Health Center surgeons do not require a trial of prior hormone therapy, however if you prefer to use medical insurance coverage for your procedure, please review your own specific policy as many insurance companies- including BCBS of RI and RI Neighborhood Health Plan- do require 12 months of hormone therapy.)
Insurance Information
Name of Insurance Company:
Insurance Member ID Number:
Insurance Phone Number for Providers/Billing:
 Please check with your insurance if Kent Hospital is considered in-network for your plan. If not in-network, you need to check if your plan has out of network benefits, and obtain

After your initial consultation, the doctor will recommend specific procedures/surgeries. At that time, you can check your insurance for coverage and requirements for those specific procedures.

<u>Please check with your insurance if a referral & authorization are needed from your primary care</u> <u>provider (PCP) for a specialist consultation with the surgeon</u>. If yes, ask your PCP to send the referral to

Breast Health Center at Kent; CPT codes for office visit consultation: 99244 and 99245

authorization for out-of-network care