

## **Medicaid Update Article on Conversion Therapy**

### **New York Medicaid Does Not Cover “Conversion Therapy”**

This is to clarify that the Medicaid program does not cover “conversion therapy” under fee-for-service Medicaid or Medicaid Managed Care.

“Conversion therapy” means any practice by a mental health professional that seeks to change an individual’s sexual orientation or gender identity, including efforts to change behaviors, gender expressions, or to eliminate or reduce sexual or romantic attractions or feelings toward individuals of the same sex.

This therapy is based on the premise that homosexuality is a mental disorder. However, the American Psychiatric Association stopped classifying homosexuality as a mental disorder in 1973, and today homosexuality is not considered a medical condition that requires treatment. Because Medicaid only covers care, services, and supplies necessary to prevent, diagnose, correct, or cure recognized medical conditions, it cannot cover “conversion therapy.”

Conversion therapy does not include counseling or therapy for an individual who is seeking to undergo a gender transition or who is in the process of undergoing a gender transition, that provides acceptance, support, and understanding of an individual or the facilitation of an individual’s coping, social support, and identity exploration and development, including sexual orientation-neutral interventions to prevent or address unlawful conduct or unsafe sexual practices, provided that the counseling or therapy does not seek to change sexual orientation or gender identity.

Refer to the June 2015 Medicaid Update at [https://www.health.ny.gov/health\\_care/medicaid/program/update/2015/jun15\\_mu.pdf](https://www.health.ny.gov/health_care/medicaid/program/update/2015/jun15_mu.pdf) for further information on Medicaid services available for persons diagnosed with gender dysphoria.

Medicaid FFS policy questions may be directed to the Office of Health Insurance Programs’ Division of Program Development and Management at (518) 473-2160. Questions regarding Medicaid Managed Care (MMC) coverage should be directed to the enrollee’s MMC plan.