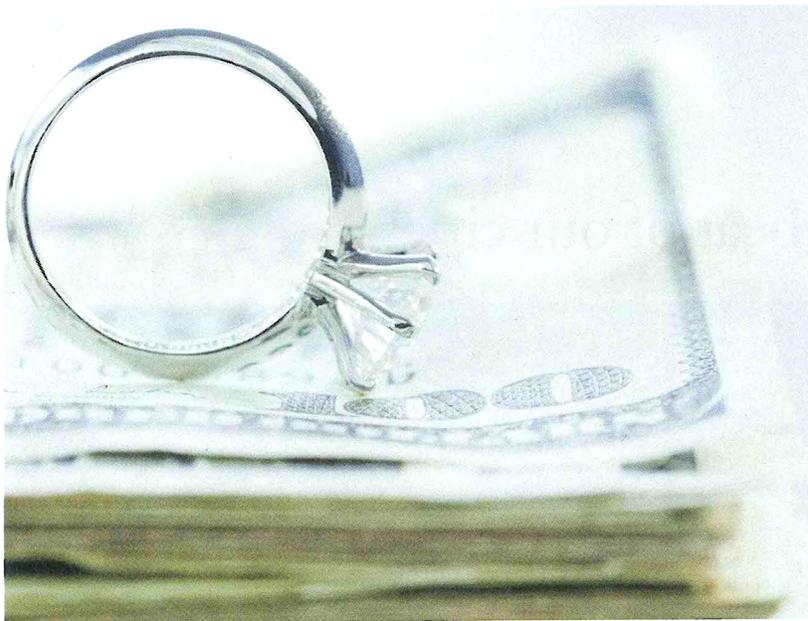




**FINANCE**  
Rachel J. Robasciotti

Founder and president of Robasciotti & Associates Inc., a financial planning and investment management firm that specializes in the needs of LGBT clients



## Marriage: What's It Worth?

*Sometimes it's more lucrative to stay single*

**WHEN IS MARRIAGE A FINANCIAL LIABILITY?** Most of our clients have financially benefited from state-legalized marriage, particularly with the new IRS rules around how their income is treated in community property states. In the majority of cases, the couple's overall tax liability (the amount you owe) has decreased significantly because each partner now claims half of the other partner's income, but that income is federally taxed as if each person were single rather than married. If the same couple's income had been federally taxed as a married couple, they would owe a lot more because their tax rate would be higher.

Unfortunately, financial downsides to state-legalized same-sex marriage exist, and they primarily affect groups that are already marginalized. If you're living in a community property state, your partner's income may be taken into consideration and, if your combined incomes exceed a certain threshold, disqualify you for need-based programs like college financial aid and state disability benefits. Medicaid, a state-administered federal program that provides medical insurance for certain low-income families and individuals, is one program that can be affected. Imagine Susan is on Medicaid before she and Maria get married. In a state that recognizes same-sex marriage (and several others), Susan and Maria's combined incomes and assets must now be considered for Medicaid, and if they are not under the total income limits, Susan becomes ineligible for care.

For a same-sex couple with one partner in the U.S. on a student or work visa, marrying a U.S. citizen (the marriage isn't recognized by the federal government) doesn't get you any immigration benefits, but if the marriage comes to the attention of immigration authorities, it could create the legal presumption of "intent to stay" and make obtaining permanent residency more difficult.

Other major financial downsides come from the complexity involved with ending any marriage—same-sex or not. Just like heterosexual couples, we have custody, property, and alimony issues to work out, but in my experience same-sex couples are often less prepared to deal with those issues. And the less prepared we are, the more time-consuming and expensive it becomes to end the marriage. We've been almost singularly focused on getting our rights. Now we need to become just as concerned with preparing for the responsibilities that come with those rights.



**HEALTH**  
Rebecca Allison, MD

## How Do I Find a Trans-Friendly Doctor?

**THE PROVIDER DIRECTORY** of the Gay and Lesbian Medical Association is the most comprehensive resource for finding transgender-friendly doctors. Access it at [GLMA.org](http://GLMA.org) by following the link to "find a provider." These providers have indicated an interest in treating LGBT patients and expertise in the field. The World Professional Association for Transgender Health also has a useful online provider directory at [WPATH.org](http://WPATH.org).

In addition, local physician recommendations are generally available from behavioral health counselors and therapists who treat transgender patients. These therapists will usually be aware of local physicians who will provide this treatment. An extensive list of these therapists is at [DrBecky.com/therapists.html](http://DrBecky.com/therapists.html).

Being transgender-friendly includes educating office staff about the transition process so the patient can be addressed by the desired name and pronouns. Many transgender people feel unwelcome in a provider's office due to negative encounters with staff. A medical history form that allows a patient to designate "transgender" or "transsexual" as a modifier for the sex designation may help relieve the patient's anxiety.

Patients who are under medical treatment related to gender transition will want to talk to their provider about hormones: the drugs, doses, and routes of administration; the expected benefits; the potential risks; and the clinical evaluations needed before and during treatment. It is important to evaluate any remaining organs pertinent to the patient's birth sex, including breasts, ovaries, uterus, and vagina in people transitioning to male, and prostate, penis, and testes in those transitioning to female.

Many studies have shown that the completion of transition, which may or may not involve surgery, produces positive outcomes in social adjustment, economic viability, and overall well-being and satisfaction. While medical therapy continues after transition, it is but one part of the patient's overall health management.

*Rebecca Allison, MD, is a Phoenix-based cardiologist and immediate past president of the Gay and Lesbian Medical Association.*

