The High Cost of Womanhood

Women pay more but get less care for sexual health.

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Recently, I researched the MonaLisa Touch Method, a laser vaginal rejuvenation therapy that treats a host of women's sexual health issues. In particular, the treatment addresses the problem of vaginal atrophy: the thinning, dryness and inflammation of the vaginal walls that can lead to painful sex, chronic vaginal infections and urinary problems of varying severity. These unpleasant and uncomfortable symptoms are widespread among pre- and post-menopausal women and range from simply being troublesome to seriously affecting women's physical, mental and sexual health and well-being.

Interestingly, although the Food and Drug Administration (FDA) approved the procedure almost two years ago, the treatment has yet to be covered by insurance. Why? When I asked an ob/gyn, she said insurance companies consider the therapy plastic surgery, a reconstructive procedure that's elective and medically unnecessary.

Generally, health insurers make determinations about coverage based on whether a treatment is medically necessary. But when it comes to interventions that address sexual dysfunction in women, insurers refuse to cover options that maintain or restore their bodies' ability to function normally.

For women especially, insurance companies often deny coverage of treatments that can relieve sexual problems, such as this vaginal rejuvenation procedure. Meanwhile, this is not usually the case for men. Reports show that it's easier for men to get insurance to cover erectile dysfunction drugs like Viagra, penile implants and vacuum devices to stimulate erections.

Is there a double standard at work? Many doctors believe there is. According to a CNN story, insurers typically cover testosterone for older male patients who wish "to boost their sagging sex lives. But when older women want treatments for vaginal dryness and atrophy, insurance companies usually balk."

Some experts believe that how men and women are socialized about sex is at the heart of this health issue. Women are perceived as having lower sex drives, while the sex urge in men is thought to be a biological imperative. And so women's complaints and concerns about this aspect of their reproductive health tend to be dismissed.

The rules for health care coverage of sexual dysfunction issues continue to favor treatment and relief for men at women’s expense.

As far as the MonaLisa Method is concerned, though, there’s been talk that it may eventually qualify for health insurance coverage.

Right now, however, there’s no processing code for the procedure under managed care. The message for women seems clear: Insurance companies don’t consider treatments for women’s sexual health issues a priority.

According to Even the Score, a campaign for women’s sexual health equity, in early 2014 the FDA approved the 24th drug to treat male sexual dysfunction. For women, there’s just one med to use.

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