



## IVF COVERAGE MANDATE

### BACKGROUND

Last month, former President Donald Trump unveiled a new policy proposal that would require the government and or private health insurers to cover the costs of In Vitro Fertilization (IVF). IVF is a medical procedure that involves fertilizing an egg with sperm outside the body in a scientifically controlled environment. Once the egg is fertilized, it is placed in a uterus to be developed. It is a type of scientifically assisted reproductive technology commonly used by individuals who cannot, for medical reasons or choose not for personal reasons, to have a child through sexual intercourse.

### HISTORY & SUCCESS RATES

The first successful IVF procedure was performed in 1978, leading to the birth of Louise Brown, the world's first "test-tube baby." Since this time, IVF success rates have varied based on several factors, including the age of the woman, the quality of the eggs and sperm, the cause of infertility, and the specific IVF clinic's protocols. Women under the age of 35 have higher success rates compared to women over 40. According to the Society for Assisted Reproductive Technology (SART), the average success rate for IVF cycles resulting in live births in the United States is approximately **30% to 35%** per cycle for women under 35.

### COSTS

In the United States, the cost of a single IVF cycle typically ranges from \$12,000 to \$15,000. This price often includes ovarian stimulation medications, egg retrieval, fertilization, embryo culture, and embryo transfer. In addition, medications used to stimulate the ovaries, such as gonadotropins and hormones, can add between \$3,000 and \$5,000, bringing the total cost to **\$15,000 to \$20,000 for a single round of IVF**.

### IVF LAWS IN OTHER STATES

Currently, nineteen states have laws mandating some form of infertility insurance coverage. Thirteen states require insurers to cover IVF as part of their health plans, often specifying the types of treatments and testing that must be covered. Some states impose limits on coverage, such as the number of IVF cycles or a dollar cap, which are often lifetime maximums. States like California and Texas require insurers to offer infertility coverage to purchasers, but it's up to the employer to include it in their health plan benefits. Other states, such as Louisiana and Ohio, have infertility insurance laws but do not mandate coverage for in vitro fertilization (IVF). Specifically, coverage might include intrauterine inseminations (IUIs) but not IVF.

# IVF POLICY CONSIDERATIONS

## IVF AS A STATE MANDATE

As lawmakers consider legislation mandating insurers to cover fertility preservation services such as IVF, the Michigan Association of Health Plans urges lawmakers to carefully consider and include the following policies to mitigate premium increases and allow for proper clinical utilization management. It is also important to note that **a new IVF state mandate would only affect 20% of Michigan's population**. Only those who acquire their health insurance from the individual, small group, or fully insured large group market would be subject to this new state mandate. Michigan's population (80%) that has insurance through Medicaid and Medicare or has insurance from large employers who are self-insured (federally ERISA-regulated) would be exempt from this mandate.

### ✓ UTILIZATION MANAGEMENT

Allow the insurer to conduct reasonable utilization management when customers seek IVF treatment. Examples would include allowing the insurer to request reasonable information on the medical necessity for the procedure and limitations on the number of procedures.

**Suggested Sample language:** *"The coverage described under this section is subject to a health plan's utilization management, prior authorization, or pre-certification requirements."*

### ✓ COST-SHARING REQUIREMENTS

Allow cost-sharing requirements to apply to coverage.

**Suggested Sample language:** *"An insurer may subject coverage under this section to applicable cost-sharing, including deductible, co-insurance, or co-pay provisions of the health insurance policy."*

### ✓ NETWORK REQUIREMENTS

Allow coverage requirements to apply only to services provided by in-network providers.

**Suggested Sample language:** *"An insurer described under this section is not required to provide coverage for standard fertility preservation services provided by an out-of-network health professional."*

### ✓ SPECIALIST VALIDATION

Require that the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or a relevant nonprofit professional association substantiate the direct or indirect causes of infertility related to specific diseases or their treatments.

**Note:** *Current draft legislation requires coverage only if a recipient has a diagnosed condition that "may directly or indirectly cause impairment of fertility by affecting reproductive organs or processes." MAHP believes the term "other reputable professional organizations" is too vague and should be limited to nonprofit professional associations for the relevant clinical specialty.*

### ✓ FAIRNESS

Require that the new coverage mandate on private insurers only takes effect if the State of Michigan, the Michigan House of Representatives, and the Michigan Senate choose to provide the same IVF coverage benefit for their employees.

**Note:** *The State of Michigan, the Michigan House of Representatives, and the Michigan Senate are self-insured large-group employers and are not required to comply with state-enacted coverage mandates.*