SAN FRANCISCO HEALTH SERVICE SYSTEM

INFERTILITY BENEFIT POLICY STATEMENT

Effective August 2019

1.0 Background

National data sources including the Center for Disease Control and the American Society for Reproductive Medicine offer a wealth of information about success rates for heterosexual couples and treatment options based on both female and male infertility factors. While the market place reflects treatment options for same sex couples and unpartnered individuals pursuing parenthood, relevant statistics including utilization and success rates are hard to tease out from national data sets because pregnancy alone is addressed, not the patient's sexuality or gender. Even at the local health plan level, data collection systems are not in place to capture sexual orientation or gender identity in relation to infertility treatment outcomes.

In 2017, the Health Service Board approved the following benefit enhancements to support the needs of all families in our membership seeking parenthood regardless of partnership status, sexual orientation, or gender identity. The inclusion of these benefits is recognized today as paving the way for other large employers to think critically about infertility treatment options beyond the traditional heterosexual partnership and to promote inclusion and access for all:

- Eliminating the requirement for a year of frequent, unprotected sex; this removed a significant barrier for partners of the same and opposite sex as well as single individuals pursuing parenthood.
- Eliminating the requirement for a woman to be under age 44 to receive infertility benefits in support of State Law prohibiting age discrimination in the offering of infertility benefits.
- Adding the Adoption and Surrogacy Assistance Plan to support eligible employees and retirees in seeking reimbursement for qualifying expenses. This well-received benefit has reimbursed $200K to members on their path to parenthood.
- Increasing benefit to two total cycles of either/or GIFT/IVF/ZIFT within lifetime.
- Increasing coverage for egg/embryo storage up to 12 months after egg retrieval associated with GIFT/IVF/ZIFT.
- Adding assisted hatching, coverage for intra-cytoplasmic sperm injection, pre-implantation genetic screening, and elective single embryo transfer.
- Adding the required presence of a demonstrated condition recognized by a licensed physician and surgeon as a cause of infertility.

*For Full Spectrum of Benefit Coverage Reference Attachments: *Figure 1. Covered Infertility Benefits & Figure 2. Storage and Cryopreservation*

In 2019, SFHSS gathered input from subject matter experts, network health plans, and clinical research to ensure that current infertility benefit coverage supports best practice approaches for our membership. SFHSS worked with its health plan partners (Blue Shield of California, Kaiser Permanente and UnitedHealthcare) to evaluate the infertility benefits covered under each health plan to ensure the programs were generally consistent and available to all members who wish to build a family regardless of partnership status, sexual orientation, or gender identity. Overall, it was determined that infertility benefit coverage is available to all members who meet the clinical criteria, regardless of partnership status, sexual orientation, or gender identity.

2.0 Policy Objective

In order to address the needs of our total population, a policy objective of the San Francisco Health Service System shall be to apply 50% co-insurance benefit for insemination services for all members regardless of partnership status, sexual orientation, or gender identity to ensure equal access to infertility services.

3.0 Policy Statement

It shall be the policy of the San Francisco Health Service System and the Health Service Board to apply 50% co-insurance benefit for insemination services for all members regardless of partnership status, sexual orientation, or gender identity as part of the full scope of benefits offered.

4.0 Effective Date

The policy is effective immediately upon Board approval.