

From: [Schulze, Connie R](#)
To: [ETF SMB Board Feedback](#)
Cc: [Schulze, Connie R](#)
Subject: Letter--GIB--February 2023-ask
Date: Friday, February 3, 2023 10:09:55 AM
Attachments: [Letter--GIB--February 2023-ask.pdf](#)

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Good morning. Please share the attached with members of the Group Insurance Board as you are able. We would appreciate their consideration of this request to add fertility treatment and diagnosis as a covered benefit in the upcoming plan year. Thank you.

Connie Schulze
Director, Government Affairs
UW Health & UW School of Medicine and Public Health
Madison, WI
PHONE: [REDACTED] (mobile)
EMAIL: [REDACTED]



Connie Schulze
Director, Government Affairs
Phone: [REDACTED]
Email: [REDACTED]

February 1, 2023

Group Insurance Board
c/o Board Liaison
Department of Employee Trust Funds
PO Box 7931 Madison, WI 53707-7931
Sent via email transmittal to BoardFeedback@etf.wi.gov

Dear Members of the Group Insurance Board:

UW Health is home to the specialty clinic, Generations Fertility Care, where the mission is to assist in building the next generation by providing everyone the opportunity to have a family. We deliver remarkable, accessible, and innovative fertility care to help patients achieve one of life's greatest joys - having a baby! However, for many patients our services are out of reach because as WRS participants, fertility coverage is an uncovered benefit. Therefore, we ask that you include coverage for the diagnosis of and treatment for infertility in Wisconsin's group health plan at your February 2023 meeting.

Infertility is recognized as a disease by the World Health Organization, the American Medical Association, and the American College of Obstetricians and Gynecologists whereas the US Supreme Court has ruled that it is a disability. In fact, 1 in 8 couples struggle with infertility and it is estimated that more than 172,000 Wisconsinites suffer from this disease. Lack of fertility coverage increases health disparity as it disproportionately impacts Black, Hispanic and cancer patients.

Mercer conducted a *survey on fertility benefits in 2021*. The full details of the survey can be accessed through this link <https://resolve.org/wp-content/uploads/2022/01/2021-Fertility-Survey-Report-Final.pdf>. We highlight the salient points below:

1. 97% of the 459 employers surveyed responded that adding fertility coverage did not result in significant increase in medical plan cost including employers who provide IVF coverage. *Survey results suggest that some employers may assume that infertility coverage costs more than it actually does.*
2. 71% reported that infertility benefits have achieved their goal of ensuring access to quality, cost-effective healthcare.
3. 81% of those covering IVF report satisfying employees compared to just 44% if they do not cover IVF.

4. 79% of those covering IVF report they have achieved their goal of covering DEI efforts compared to 27% not covering IVF.

5. 50% offered these services to be recognized as family friendly and to retain valuable employees and 69% felt they achieved their aim.

We understand the Group Insurance Board must consider cost when considering the addition of a covered benefit. We thought you might like to know Massachusetts state government provides fertility coverage including IVF and routinely monitors their cost. A 2016 survey by Compass Health Analytics found that **IVF coverage cost just 0.95% of the total premium.** The full copy of that report can be found here: <https://www.chiamass.gov/assets/docs/r/pubs/16/2016-Combined-Comprehensive-12-2016.pdf>


Furthermore, Quebec introduced universal coverage of infertility treatment including IVF in 2010. Comparing 2011 to 2009, they found that increased access to IVF decreased multiple pregnancy rate and decreased the cost per live birth.

<https://pubmed.ncbi.nlm.nih.gov/24706002/>

We have the power to improve employee satisfaction, wellness, and address health disparity by providing fertility coverage at minimal to no additional cost increase in the premium with the added benefit of decreased cost per live birth due to decrease in multiple pregnancies.

Thank you for your consideration and please don't hesitate to contact me if you have any questions or concerns regarding this letter.

Sincerely,

A handwritten signature in black ink that reads "Alan S. Kaplan". The signature is written in a cursive, flowing style.

Alan S. Kaplan, MD
Chief Executive Officer



STATE OF WISCONSIN
Department of Employee Trust Funds
A. John Voelker
SECRETARY

Wisconsin Department
of Employee Trust Funds
PO Box 7931
Madison WI 53707-7931
1-877-533-5020 (toll free)
Fax 608-267-4549
etf.wi.gov

February 17, 2023

Connie Schulze
[REDACTED]

Dear Ms. Schulze:

Thank you for your email regarding coverage of infertility care in the Group Health Insurance Program (GHIP).

The Department of Employee Trust Funds (ETF) understands that infertility treatment can have a big impact for some GHIP members. The Group Insurance Board (Board) carefully considers the coverage provided by the GHIP each year against an established "Triple Aim" framework consisting of three dimensions, utilization, quality of care available and provided across Wisconsin, and costs for GHIP members and employers. The Board is limited under Wisconsin State Law to only add services when other benefit reductions are made, if the service itself will save money, or if legally required to add coverage.

In May 2022, we reviewed infertility services for the 2023 plan year and presented our findings in the ["2023 Health and Pharmacy Benefit Changes"](#) memo to the Board. The Board's actuary, Segal, recognizes that there can be a broad range of treatments included under the infertility treatment umbrella. [2021 Senate Bill 693](#) that was introduced to the Wisconsin State Legislature would have required that health plans cover medical and hospital costs associated with the diagnosis and treatment of infertility, and "standard fertility preservation services." This bill required that coverage include at least four completed egg retrievals with unlimited embryo transfer, and single transfer when recommended and medically appropriate. Diagnosis and treatment would include any procedure or medication that is consistent with the American College of Obstetricians and Gynecologists or American Society for Reproductive Medicine guidelines. Due to the wide range of services included, Segal estimated that additional costs could be between \$5 million to \$20 million. Segal also estimated that around 5% of women would use these services. Segal noted that, if added, coverage of treatments, procedures, and medication must be at parity with other covered services. Due to the estimated increase in costs without concurrent opportunity for savings and the limiting language of [Wis. Stat. §40.03\(6\)\(c\)](#), ETF did not recommend adding this benefit for plan year 2023.

Connie Schulze
February 17, 2023
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Dr. Kaplan's due diligence in providing the research within the submitted letter is appreciated. ETF will follow up with Segal regarding the information that indicates adding fertility coverage did not result in a significant increase in medical plan costs among some of our peers.

Due to the timing, this proposed benefit change will not appear in the "[2024 Preliminary Agreement and Benefit Changes](#)" memo and presented to the Board on Wednesday, February 22. However, we will bring this as a follow-up for consideration to the Board at the May 17 meeting.

Thank you again for reaching out to express your concerns. If you have any additional questions, please feel free to email me using the contact information below.

Sincerely,

Luis Caracas, Health Plan Policy Advisor
Office of Strategic Health Policy
Department of Employee Trust Funds
Luis.Caracas@etf.wi.gov