

# Employers' Toolkit for Fertility Health Benefits

Evidence-Based Data for Informed Decisions



Fertility Within Reach.  
ADVOCATING FOR FERTILITY HEALTH BENEFITS



# Dear Employers

This toolkit was created to help you as an employer support your employees in their family-building efforts. It can be used as a resource to better understand the diverse needs of your employees and ways to cover comprehensive, dynamic fertility benefits.

The samples provided in this toolkit can be utilized and referenced while creating and discussing a fertility benefits plan. Ultimately, this toolkit is meant to aid you in creating a more inclusive workplace, prepared to retain talented employees by supporting them in their family-building needs.

Too often, infertility is thought of as a women's issue. Here at **Fertility Within Reach**, we believe that infertility is a human condition. Every individual and every couple's family-building journey will look different, so infertility treatments cannot be one-size-fits-all. Providing fertility benefits is a way to value every employee, regardless of gender, sexuality, race, nationality, religion, or age.

At **Fertility Within Reach**, we aim to increase access to health benefits for fertility treatment and preservation. Our goal is to alleviate emotional, physical and financial stresses as individuals strive to build their family.

Thank you for taking this crucial step in providing the benefits that your employees need to achieve their family-building goals and continue to succeed in the workplace.

Best Wishes,

A handwritten signature in black ink that reads "Davina Fankhauser". The signature is fluid and cursive.

Davina Fankhauser  
President

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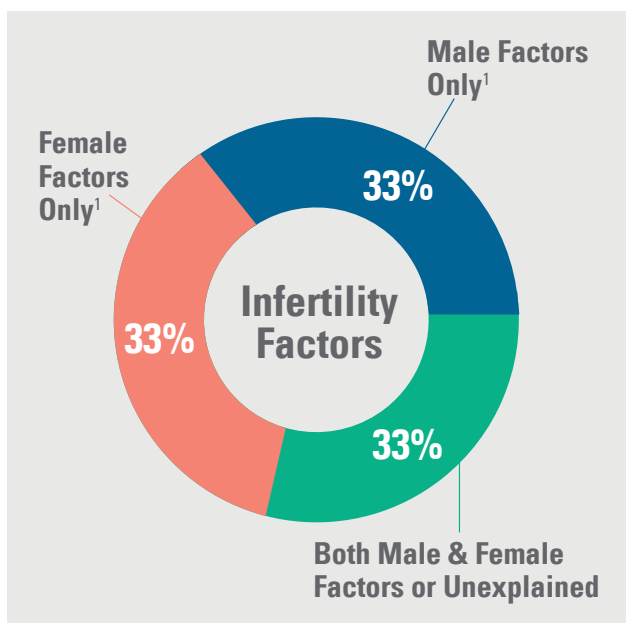
# The Facts About Fertility

## WHAT IS INFERTILITY?

Infertility is recognized as a disease of the reproductive system by the American Medical Association and the World Health Organization.<sup>1</sup> Infertility is the result of a disease (an interruption, cessation, or disorder of body functions, systems, or organs) of the male or female reproductive tract which prevents the conception of a child or the ability to carry a pregnancy to delivery. The duration of unprotected intercourse with failure to conceive should be about 12 months before an infertility evaluation is undertaken, unless medical history, age, or physical findings dictate earlier evaluation and treatment.<sup>2</sup>

## HOW MANY PEOPLE ARE AFFECTED BY INFERTILITY?

11% of American women and 9% of American men of reproductive age experience fertility challenges.<sup>3</sup>



## WHAT CAUSES INFERTILITY?

For males, infertility is caused by factors such as azoospermia (no sperm cells), congenital disorders (disease or physical abnormality present from birth), and trauma. Some female infertility factors include, but are not limited to, endometriosis, ectopic pregnancy, and uterine fibroids.

## HOW IS INFERTILITY TREATED?

3% of infertility cases require assisted reproductive technology (ART), such as in vitro fertilization (IVF). In some ART cases, patients require third party reproduction (donor egg, donor sperm, donor embryo, or gestational carriers) due to medical conditions or treatments resulting in poor egg or sperm quality, or conditions that make carrying a pregnancy unsafe. 97% of infertility cases are treated with conventional drug therapy or surgical procedures.

# What Can Employers Do?

## **VERIFY INFORMATION**

Corporate resources, such as insurance brokers, may lack accurate data pertaining to how much an IVF cycle costs. Confirming facts with organizations like **Fertility Within Reach** will ensure informed decisions are made.

## **VALUE THE HAPPINESS AND WELLBEING OF ALL EMPLOYEES**

Providing fertility coverage can help improve your employee's work ethic, satisfaction and can secure their loyalty.

## **ADD FERTILITY BENEFITS TO YOUR EXISTING POLICY**

If you use a brokerage firm to select health plans, request options you can provide during open and special enrollment. If you are presented with plans that have high-cost fertility and IVF benefits, ask the brokerage firm to find other affordable healthcare policies.

## **ARRANGE FOR OPTIONS**

To offer competitive benefits and affordable options, arrange for more than one health plan to be available for your employees. For example, one plan could contain coverage for fertility, including IVF and medication, and another plan could cover basic fertility, without IVF benefits.

## **INCREASE HEALTHCARE EQUITY AMONGST EMPLOYEES**

Ensure all employees have equal access to fertility treatment and preservation benefits.

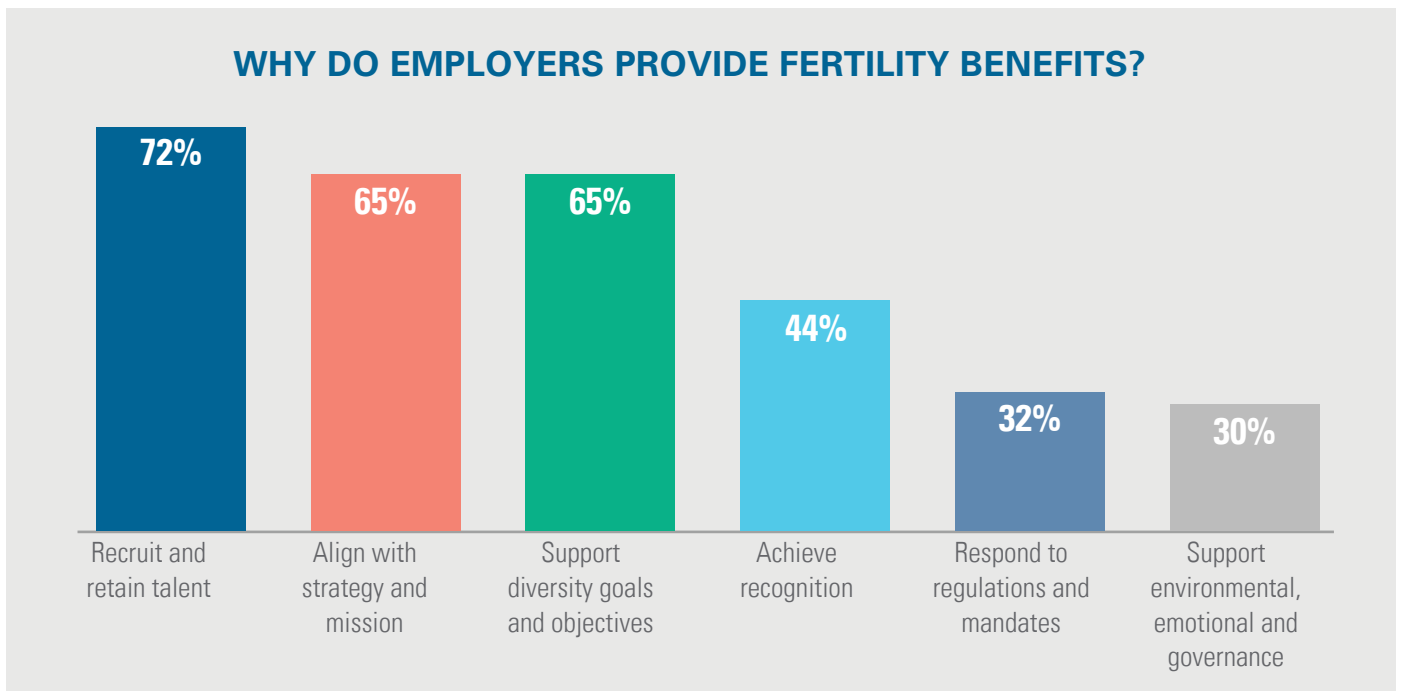
## **UNDERSTANDING YOUR EMPLOYEES' RIGHTS**

Infertility patients are entitled to protections under *The Family Medical Leave Act* (pertaining to companies with more than 50 employees) and *The Americans with Disabilities Act*.<sup>4</sup>

# Why Provide Benefits?

## RECRUIT AND RETAIN TALENT

In a recent survey<sup>2</sup> conducted by Willis Towers Watson, an international brokerage firm, the competitive pressure to recruit and retain talent is the number one reason employers provide fertility benefits for employees.



# Measuring Employee Satisfaction

## GATHER EMPLOYEE FEEDBACK

Whether you are looking to add fertility coverage, improve existing benefits, or determine the effectiveness of recent benefit changes, it is critical to gather employee feedback. One way to determine employee's needs is through the use of internal surveys. Surveys are typically developed and implemented through human resources and can be an excellent tool to anonymously collect data regarding employee satisfaction. Through thoughtful and intentional surveys, you can measure employee priorities and successfully guide your company through the development of family-forming benefits.

You may consider the following do's and don'ts when developing your fertility benefits survey...

### ➤ DOS

**DO** look to previous healthcare-related surveys when formulating your questions.

**DO** incorporate questions with a numerical ranking system, with 1 being "strongly agree" and 5 being "strongly disagree". For example:

*I am satisfied with my current fertility benefits.*

1 (strongly agree)    2 (agree)    3 (neutral)    4 (disagree)    5 (strongly disagree)    N/A

*I feel confident that my company's family-forming benefits would help me access affordable and effective fertility healthcare.*

1 (strongly agree)    2 (agree)    3 (neutral)    4 (disagree)    5 (strongly disagree)    N/A

**DO** incentivize employees to complete the survey. For example, a raffle drawing for a gift card for everyone that completes the survey. This is a fun and easy way to maximize participation!

**DO** make your surveys anonymous. Unfortunately, discussions of infertility are still considered taboo by many. Ensuring anonymity allows employees to feel more comfortable answering truthfully about their personal experiences.

### ➤ DON'TS

**DON'T** make your surveys too long. Employee surveys shouldn't take more than 15 minutes to complete.

**DON'T** rely too heavily on written responses. Ranking questions or multiple choice questions are easier for employees to complete.

**DON'T** use leading questions. Rather, try to use open-ended questions. For example:

*My fertility benefits are effective and affordable versus I find my fertility benefits to be (open ended response).*

# Frequently Asked Questions

## WHAT TYPES OF FERTILITY TREATMENTS ARE AVAILABLE?

**Medication**<sup>5</sup> is used to stimulate ovaries, prevent premature ovulation, stimulate ovulation, and promote embryo implantation.

**Male Factor Infertility Treatments**<sup>6</sup> include corrective surgery to repair anatomical abnormalities or damage, use of medical procedures to deliver sperm to egg, hormone treatments to correct imbalances or erectile dysfunction.

**Intrauterine Insemination (IUI)** involves sperm being placed directly into the uterus using a small catheter that is passed through the cervix. This is done around the time of ovulation and improves chances of conceiving by both increasing the amount of sperm that reaches the uterus and by getting sperm in place at the right time of the cycle.

**Intracervical Insemination (ICI)**<sup>7</sup> mimics natural intercourse by inserting unwashed, liquefied semen inside the vagina near the cervix.

**Assisted Reproductive Technologies (ART)**<sup>8</sup> includes procedures in which the eggs are removed from the ovaries, combined with sperm in a laboratory and returned to the woman's body or donated to another woman.

**In Vitro Fertilization (IVF)** is when a woman uses injection medications to create many eggs at one time (instead of one egg at a time during a natural cycle), which are removed from the uterus during a procedure called an egg retrieval. The eggs are fertilized with sperm to create an embryo that is grown for several days and then placed inside the uterus to lead to pregnancy. Alternatively, the embryos can be frozen until an optimal time for pregnancy based on the patient's needs or the quality of the uterine environment. This significantly improves pregnancy rates for most women.

**Genetic Testing and Blood Work for Recurrent Pregnancy Loss** can help diagnose immune, medical, or blood-clotting conditions that result in miscarriage.

**Preimplantation Genetic Testing** aids the embryo selection process during IVF. This is recommended to screen for chromosomal abnormalities.

**Third Party Reproduction**<sup>7,8,9,10</sup> is the process of reproduction in which a party other than the intended parent(s) is involved. This includes using donated eggs, sperm, or embryos and gestational-carrier arrangements.



## WHAT IS FERTILITY PRESERVATION?

Standard fertility preservation is the procurement, cryopreservation, and storage of eggs, sperm, embryos, or other reproductive tissue. This is typically used for patients with a diagnosed medical condition, or genetic condition, that may directly or indirectly cause impairment of fertility now or in the future by affecting reproductive organs or processes. Sometimes life or illness can delay a person from starting a family. Fertility preservation allows people to ensure their reproductive options are optimal when they are ready to try.

## HOW DO FERTILITY BENEFITS CREATE AN INCLUSIVE WORK ENVIRONMENT?

Infertility is not an issue of race, gender, religion, sexuality, age, or ability, but something that affects all people. However, the prevalence of infertility is not equal across populations and communities, and the ability to find and pay for fertility treatment is consequently inequitable.<sup>11</sup> By implementing fertility benefits, all employees are able to equally access the healthcare they need.



# Plans & Recommendations

## SAMPLE COMPREHENSIVE EMPLOYEE BENEFIT PLANS

U.S. BANK	BRIGHAM AND WOMEN'S HOSPITAL	ROBINS & MORTON
Not subject to infertility laws	Not subject to infertility laws	Subject to infertility laws
<b>Headquarters:</b> Minneapolis, MN	<b>Headquarters:</b> Boston, MA	<b>Headquarters:</b> Birmingham, AL
<b>Industry:</b> Bank Holding	<b>Industry:</b> Healthcare	<b>Industry:</b> Construction
<b>U.S. Employees: 69,000</b>	<b>U.S. Employees: 19,000</b>	<b>U.S. Employees: 950</b>
<b>Fertility Benefits:</b> \$25,000 for medical and surgical expenses; \$10,000 for fertility prescriptions; \$10,000 surrogacy reimbursement; \$10,000 adoption reimbursement	<b>Fertility Benefits:</b> Coverage up to 6 IUI/IVF cycles, includes donor eggs/sperm and storage, and storage of eggs/sperm/embryos for up to 1 year.	<b>Fertility Benefits:</b> Unlimited fertility coverage and unlimited fertility prescriptions drugs plus \$10,000 in adoption assistance

### RECOMMENDED COMPONENTS OF A COMPREHENSIVE BENEFIT PLAN

- The scope of coverage includes the diagnosis of infertility, fertility care (such as IVF) and standard fertility preservation services.
- To increase healthcare equality among employees, provide benefits in terms of number of IVF cycles instead of dollar limitations. Depending on individual treatment needs, some employees will utilize more dollars per cycle than others.
- Offer a minimum of four IVF cycles to help alleviate financial desperation when going through IVF, resulting in treatment decisions based on medical recommendations over financial concerns.
- Medication is part of the treatment protocol and needs to be included with benefits.
- Coverage for genetic testing can help reduce the number of IVF cycles utilized and minimize costs associated with miscarriage and genetic disorders.

# Impacts of Fertility Benefits

## NO FERTILITY HEALTH BENEFITS VS INCLUDING FERTILITY BENEFITS

### WITHOUT BENEFITS

Over 52% of patients, ages 25–34, incur over \$10K in debt, and 26% incur over \$3K in debt.<sup>12,13</sup>

Patients transfer more embryos which can result in multiple births.<sup>14,15,16</sup>

Increased risk of complicated pregnancy and outcomes.

Costs related to disabilities, occupational and physical therapies, surgeries, etc.

Depression and anxiety associated with untreated infertility.<sup>18</sup>

### COST OF IVF COVERAGE

### MAKING MEDICAL DECISIONS

### OUTCOME COSTS

### LONG-TERM CARE OF PREMATURE BABIES

### MENTAL HEALTH

### WITH BENEFITS

Health care reviews from multiple states show that the insurance premium increase is less than 1% of the total premium cost.

Patients' healthcare decisions are based on appropriate medical advice, not financial concerns, and transfer fewer embryos.<sup>17</sup>

Timely and appropriate healthcare optimizes safe pregnancies and healthy babies as well as cost outcomes.

Premature related costs are dramatically reduced.

Achieving family-building goals increases morale and satisfaction.



# Sample Internal Release

To our valued employees,

Effective immediately, *[organization]* will now be providing high-quality and affordable fertility benefits for all employees. We aim to support our employees emotionally, financially, and medically on their family-planning and we are excited to work with you in creating an equitable workplace.

In partnership with *[insurance company]*, we will begin providing *[unlimited prescription fertility drugs]*, *[fertility preservation]*, *[other specifics of benefits]* as of *[date when benefits are implemented]* for all employees. For specific questions about accessing these treatments or to develop an infertility treatment action plan, please contact your human resource point of contact, *[Name, Title, Phone, e-mail]*.

We have long considered all of our dedicated employees to be a part of the *[organization]* family. It is an honor to support you as you expand your family. Thank you for your continued commitment to our mission.

Warmly,  
*[Company executive]*



# Sample Press Release

## **[Organization] Provides Affordable, Comprehensive Fertility Benefits to Become a More Inclusive and Supportive Workplace**

[Organization] was built on the promise of valuing all employees equally. Now, [Organization] is excited to be a leader in offering high-quality fertility benefits for a safer, accessible path to parenthood. Fertility benefits provide financial, emotional, and medical support for employees and create a modern, equitable workplace. Under these new benefits, couples or families struggling to build a family can gain the vital support of their employers.

(Consider inserting quote from organization executive, such as)

“As a progressive organization, we recognize that building a family is not always easy and requires outside support. To support our employees who are in need of infertility treatment, we are pleased to announce that comprehensive fertility benefits will be available to all full- and part-time employees effective immediately. We’ve responded to the needs of our employees and recognized that fertility benefits are for everyone, and cost should never be a barrier in building a family.”

With the help of **Fertility Within Reach**, an national non-profit healthcare organization with the goal of increasing access to fertility treatment and benefits, [Organization] has gained the necessary resources to understand the needs of their employees and work to meet those needs. [Organization] will begin to provide [unlimited prescription fertility drugs], [fertility preservation], [other specifics of benefits] as of [date when benefits are implemented] for all employees, regardless of identity.

Implementing family-friendly benefits has been shown to create a more supportive, inclusive workplace as well as recruit and retain talented employees. According to a recent study, 61% of employees feel more loyal when comprehensive fertility benefits are covered and 57% of employees would be willing to switch jobs if a new employer provided fertility benefits. [Organization]’s improved fertility benefits can remove the obstacles that are often experienced with infertility treatment and help build safe, healthy, happy families.

For more information about [Organization] or to learn more about the fertility benefits offered visit [website] or contact [Name, Title, Phone, e-mail].

For more information about increasing access to fertility benefits in the workplace, visit [fertilitywithinreach.org](http://fertilitywithinreach.org).



# Testimonials

“If we have happy employees, we will have happy customers and, subsequently, happy shareholders... Fertility benefits have value to employees. While fertility benefits aren't something all employees need, the impact this benefit can have on an employee's life is immeasurable.”



**Judy Berger**

Dallas-Based Senior Manager of  
Benefits Planning  
*Southwest*

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“By and large, [most of our employees] are starting to build their families and buy homes, and so that has driven the kinds of benefits we offer. We wanted to expand our offering to include employees that had experienced fertility challenges....”



**Cathy Donahoe**

Vice President of Human Resources  
at *Domo, Inc.*

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“We are forever grateful that my school district decided to offer fertility benefits to its employees. Without this gracious offering we would not be expecting our second baby this September.”



**Stephanie Parker**

Employee of Winnisquam  
Regional School District



**Fertility Within Reach.**  
ADVOCATING FOR FERTILITY HEALTH BENEFITS

# References

1. U.S. Department of Health and Human Services, Office on Women's Health. Frequently Asked Questions. Infertility. 2019. <https://www.womenshealth.gov/a-z-topics/infertility>
2. "Employers Prioritize Family-Friendly Benefits." Willis Towers Watson. 3 June 2020. <https://www.willistowerswatson.com/en-US/Insights/2020/05/employers-prioritize-family-friendly-benefits#:~:text=Almost%20two%2Dthirds%20of%20employers,and%20diversity%20goals%20and%20objectives.>
3. Thoma ME, McLain AC, Louis JF, et al. Prevalence of infertility in the US as estimated by the current duration approach and a traditional constructed approach. *Fertility and Sterility*. 2013;99(5):1324-1331.
4. Equal Employment Opportunity Commission. (2015, June). EEOC Enforcement Guidance on Pregnancy Discrimination and Related Issues. <https://www.eeoc.gov/laws/guidance/enforcement-guidance-pregnancy-discrimination-and-related-issues#1A3c>
5. "The Types and Uses of Fertility Drugs." Edited by Jenna Friedenthal, Progyny, 2020. <https://progyny.com/education/fertility-medication/fertility-drugs/>
6. "What Treatment Options Are Available for Male Infertility?" Eunice Kennedy Shriver National Institute of Child Health and Human Development, U.S. Department of Health and Human Services, 1 Dec. 2016.3. <https://www.nichd.nih.gov/health/topics/menshealth/conditioninfo/treatments>
7. "Third-Party Reproduction: Sperm, Egg, and Embryo Donation and Surrogacy." Reproductive Facts, American Society for Reproductive Medicine. 2018. [www.reproductivefacts.org/news-and-publications/patient-fact-sheets-and-booklets/documents/fact-sheets-and-info-booklets/third-party-reproduction-sperm-egg-and-embryo-donation-and-surrogacy/.](http://www.reproductivefacts.org/news-and-publications/patient-fact-sheets-and-booklets/documents/fact-sheets-and-info-booklets/third-party-reproduction-sperm-egg-and-embryo-donation-and-surrogacy/)
8. "What is Assisted Reproductive Technology." National Center for Chronic Disease Prevention and Health Promotion, Division of Reproductive Health. 8 October 2019. <https://www.cdc.gov/art/whatis.html>
9. "How Much Does Surrogacy Cost?" Surrogate.com, 2020. <https://surrogate.com/intended-parents/the-surrogacy-process/how-much-does-surrogacy-cost/>
10. Nicole Harris April 23. "Artificial Insemination: Procedures, Costs, and Success Rates." *Parents*, 23 Apr. 2019. <https://www.parents.com/getting-pregnant/infertility/treatments/artificial-insemination-procedures-costs-and-success-rates/>
11. Jain, Tarun. Socioeconomic and racial disparities among infertility patients seeking care. *Special Contribution Disparity in Infertility Treatment*. 9 March 2006;85(4). [https://www.fertstert.org/article/S0015-0282\(05\)04325-6/fulltext](https://www.fertstert.org/article/S0015-0282(05)04325-6/fulltext)
12. CNY Fertility. (2020, October 12). Donor Egg Cost: Analyzing The Average Cost of Donor Egg IVF & Financing Options. <https://www.cnyfertility.com/donor-egg-cost/>
13. Family Equality. (2019, April). Average Costs for the LGBTQ+ Community to Achieve Pregnancy in the United States. <https://www.familyequality.org/wp-content/uploads/2019/08/P2P-Factsheet-CostofPregnancy.pdf>
14. Jain T, Harlow BL, Hornstein MD. Insurance coverage and outcomes of in vitro fertilization. *New England Journal of Medicine*. 2002;347(9):661-666.
15. Jungheim, ES, Leung, MY; Macones, GA; Odem, RR; Pollack, LM; Hamilton, BH. In Vitro Fertilization Insurance Coverage and Chances of a Live Birth. *JAMA (American Medical Association)*. 2017; 317(12):1273-1275.
16. Reproductive Medicine Associates of New Jersey. 2018 Infertility Trends National Survey. 2008.
17. Reynolds MA, Schieve LA, Jeng G, et al. Does insurance coverage decrease the risk for multiple births associated with assisted reproductive technology? *Fertility and Sterility*. 2008;80(1):16-23.
17. Cousineau TM, Domar AD. Psychological Impact of Infertility. *Best Pract Res Clin Obstet Gynaecol*. 2007;21(2):293-308.



# Learn More



If you are unsure as to how your company can develop a comprehensive, equitable fertility benefit plan, ***Fertility Within Reach*** provides consultation services to help in this process. Contact us to learn more.



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