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June 24, 2015

Sen. Johnny Isakson
Chair, Senate Committee on Veterans' Affairs
Washington, DC 20510

Dear Chairman Isakson:

Thank you for the opportunity to offer a letter of support for S. 469, the Women's Veterans and Families Health Services Act of 2015. This legislation would significantly improve access to reproductive services for certain active duty military personnel and veterans who are injured in service to their country. The American Society for Reproductive Medicine is pleased that you have considered this bill for a public hearing.

ASRM is a multidisciplinary organization of nearly 8,000 medical professionals dedicated to the advancement of the science and practice of reproductive medicine. ASRM members include obstetrician/gynecologists, urologists, reproductive endocrinologists, nurses, embryologists, mental health professionals and others. As the medical specialists who present treatment options for patients and perform procedures during what is often an emotional time for them, we recognize how important a means to addressing their medical condition can be for those hoping to build their families.

ASRM solidly supports the provision of fertility services to severely wounded service members as DoD policy allows, and the extension of these services to veterans, who currently do not have the same access to treatment due to a longstanding congressional ban that prevents the Department of VA from providing these services. It is nothing but unjust to send our military personnel into harm's way and to not provide health care services to address health care needs that arise due to their service and dedication to our country. ASRM strongly supports the elimination of this inequity in coverage that affects certain disabled veterans.

S. 469 would direct the Secretary of Veterans Affairs to provide fertility counseling and treatment, including in vitro fertilization, to a severely wounded, ill or injured veteran who has an infertility condition as a result of his or her active duty in the armed services. Importantly, the draft bill provides the same treatment for the veterans' spouse. Coverage for the spouse is important due to the fact that reproduction involves both male and female gametes and a female to carry a pregnancy. Therefore addressing any problem involves both the male and the female; treatment on just one of the partners is unworkable when the goal is reproduction. We find that the coverage regarding number of in vitro fertilization attempts is reasonable.

S. 469 also improves the coverage that is available to active duty members by permitting the use of donor gametes as part of the covered treatment options. For some severely injured service members, sperm or egg retrieval may be impossible. The desire to have a family is no less important to those individuals and third party collaboration as a family building option is an appropriate medical option for some infertile patients. So too, gestational surrogacy is a vital family building option for those who are injured in such a way as to make the carrying of a pregnancy impossible. The bill would permit the same benefits for similarly wounded veterans.

In addition, the bill allows coverage for the cryopreservation of gametes pre-deployment. This benefit is important for the obvious reason that any injury to the reproductive system risks the loss of the ability to have a genetic link to a child, but also because exposures to toxins during deployment can also result in infertility. Service members who have coverage for the option to cryopreserve their gametes have improved treatment options should they need infertility care.

Thank you for the opportunity to submit a statement of support for S. 469 and for your attention to this important public health issue. Our nation's military personnel and veterans deserve to have access to the full complement of infertility treatments that are available and we are pleased that this committee has recognized the need to correct the inequities that exist between the health plans available under the DoD and the Department of VA health plans and to improve the services available for both active duty personnel and veterans. ASRM is committed to working with Congress in order to pass legislation that will institute these long over-due benefits for our nation's veterans.

Sincerely,



Rebecca Z. Sokol, MD, MPH
President
American Society for Reproductive Medicine