

# SAN FRANCISCO HEALTH SERVICE SYSTEM

---

Date: November 8, 2019  
To: Health Service Board  
From: Abbie Yant, Executive Director  
Re: Modification of Infertility Benefit

---

## **Recommendation:**

Approval of the additional covered services to the infertility benefit. See attached listing of covered infertility benefits.

## **Background:**

At the August 2019 Health Service Board meeting, SFHSS recommended changes to the infertility benefit. Questions were raised regarding naming of the additional services and the distinction of diagnostic procedures that may be necessary to reach a diagnosis of infertility.

Clarification of the services covered under the infertility benefit is required so that SFHSS can ensure that covered infertility services are available to all eligible members regardless of age, domestic partner status, gender, gender expression, gender identity, genetic information, marital status, sex, or sexual orientation. In situations in which a SFHSS member requires services to determine the member's ability to achieve or cause pregnancy, the least invasive services are diagnostic in nature and may lead to ruling in or out the diagnosis of infertility. The decision to proceed with these services is determined by the member in consultation with the member's physician; SFHSS is making these clarifying changes to ensure these services are available to members.

Therefore, SFHSS has added to the list of covered infertility services: oral medications, injectable hormones, and intrauterine insemination. These services are in addition to in vitro fertilization, zygote and gamete intrafallopian transfer, intracytoplasmic sperm injection, ovulation induction, frozen embryo transfer (including ultrasound, blood work, embryology), preimplantation genetic screening and diagnosis, egg and sperm preservation.

SFHSS continues to work closely with our carriers to inform and educate plan providers on these custom SFHSS covered services for all SFHSS Members.

## **CA SB600 Fertility Preservation Bill**

On October 12, 2019 SB 600 mandating coverage of fertility preservation was signed into law by Governor Newsom. The new law requires health care service plans to cover "standard fertility preservation services" as a basic health care service when a covered treatment may directly or indirectly cause iatrogenic infertility. The law bases "Standard fertility preservation services" on professional guidelines published by the American Society of Clinical Oncology (ASCO) or the American Society for Reproductive Medicine (ASRM). Those guidelines are under review by our health plan and medical groups.

Strike throughs in the Infertility grid section Egg and Sperm Preservation indicate that the covered benefit is pending review as HSS and Health Plans are considering what changes to the egg and sperm preservation benefits may be needed that relate to the new California law SB600 Fertility Preservation Act signed in October 2019. These changes will be announced prior to January 1, 2020.