

Improve Access to Fertility Services Through VA

Thousands of service members have suffered a genitourinary injury, resulting in the loss of, or compromised ability, to have a child. Among those who served in Iraq and Afghanistan, genital injuries were higher than in any previous wars. These injuries result in medical and psychological trauma that can affect a veteran's ability to procreate.

Recognizing the need for increased assisted reproductive technology (ART) options, in September 2016, Congress granted a temporary authorization for the Department of Veterans Affairs (VA) to provide in-vitro fertilization (IVF) to veterans with a service-connected condition that prevents the conception of a pregnancy.

VA began offering IVF services in January 2017, and in September 2018, they were reauthorized for another two years. VA anticipated recurring authorization by Congress; so, the Department's rules stipulate that IVF may continue to be provided if Congress approves its funding through the annual appropriations process. VA's current temporary authority, however, prohibits the use of gametes that are not a veteran's and his or her spouse's. Because they require donated gametes, they are ineligible for IVF through VA. Also, due to the complex care needs of women veterans with spinal cord injuries and disorders, many are unable to carry a pregnancy to term. These women need the services of a surrogate in order to have a child.

Congress should permanently authorize ART to include IVF services, gamete donation, and surrogacy for veterans with service-connected infertility, and include the treatment of the veteran spouses in applicable cases.

PVA Position

- To improve access to fertility services, Congress must pass the **Veterans Families Health Services Act (H.R. 2734/S. 1280)**, which would greatly expand and improve access to ART for service members and veterans by:
 - Allowing service members to cryopreserve their gametes before deployment to a combat zone or hazardous duty assignment as well as after an injury or illness;
 - Permanently authorizing fertility treatment and counseling, including ART like IVF, for veterans and service members;
 - Allowing for the use of donated gametes, which ensures that veterans' and service members' spouses, partners, and gestational surrogates are appropriately included in eligibility rules;
 - Providing support for service members and veterans to navigate their options, find a provider that meets their needs, and ensure continuity of care after a permanent change of station or relocation;
 - Expanding options for veterans with infertility by allowing VA to provide adoption assistance; and
 - Requiring VA and the Department of Defense to facilitate research on the long-term reproductive health needs of veterans.