



# The American Society for Reproductive Medicine

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June 29, 2020

The Honorable Julia Brownley  
Chair, Women Veterans Task Force  
United States House of Representatives  
Washington, DC 20515

Dear Chairwoman Brownley:

Thank you for the opportunity to offer our strong support for measures to enhance reproductive health access at the Department of Veterans Affairs. The American Society for Reproductive Medicine (ASRM) applauds your leadership on this issue.

Specifically, we wish to share our strong support for a longstanding legislative priority of our membership: ensuring seamless and continuous access to reproductive health services for our nation's veterans (and their family members) through passage of HR 955.

As you are likely aware, ASRM is dedicated to the advancement of the science and practice of reproductive medicine. The Society accomplishes its mission through the pursuit of excellence in evidence-based life-long education and learning, through the advancement and support of innovative research, through the development and dissemination of the highest ethical and quality standards in patient care, and through advocacy on behalf of physicians and affiliated health care providers, and their patients. 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.

The men and women in our armed forces go where our nation's leaders direct them, serve in difficult and often dangerous conditions, and do so with admirable dedication and professionalism. As a nation, we owe our freedoms to the sacrifices they make and owe them support as they strive to fulfill a fundamental right: building a family of their own.

If we fail this obligation, we fail our veterans, their families and the promise we as a nation make to those who give so much to defend and protect us all. The time is now for Congress to put politics aside and act to implement an inclusive range of fertility services as part of the reproductive assistance available to all Veterans.

In September 2016, Congress authorized funds through the Mil-Con-VA Appropriations bill for the Department of Veterans Affairs to provide IVF medical treatments to Veterans with a service-connected injury or illness that has caused infertility. These new benefits are being offered and we know of Veterans that are now receiving care. We thank you for these family building and life-changing benefits for our injured Veterans!

Congress again authorized funding for the VA to continue these benefits through September 2020. While this is a great start, our work is not done. Continuity of this benefit and the ability of injured veterans to access it is critical and requires that this benefit be made permanent. The current appropriations process does not allow for injured veterans to rely on the benefit being available. ASRM believes that the best way to administer these benefits is by passing HR 955/S319, the Women Veterans and Families Health Services Act. This bill provides the VA with the permanency to provide this benefit and eliminates unfair and discriminatory restrictions on those eligible for the benefit at both the VA and under TRICARE.

HR 955 directs 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 bill provides the same treatment for the veterans' spouse. Coverage for the spouse is critical, as reproduction involves both male and female gametes and a female to carry a pregnancy.

HR 955 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.



It is unconscionable 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. Just weeks ago, we joined RESOLVE in hosting a virtual advocacy day wherein patient advocates, professionals, and others weighed in from all 50 states in support of this and other measures to advance pro-family policies. Enactment of HR 955 is long overdue and broadly supported.

Thank you for the opportunity to offer our strong support for HR 955 and related efforts to ensure our nation's veterans have access to the full complement of infertility treatments that are available. We are prepared to support the important work of this Task Force and again thank you for your leadership.

Sincerely,

A handwritten signature in black ink that reads 'Catherine Racowsky'. The signature is written in a cursive, flowing style.

Catherine Racowsky, PhD  
President, American Society for Reproductive Medicine