June 26, 2020

Representative Julia Brownley Chairwoman, Subcommittee on Health, Committee on Veterans' Affairs U.S. House of Representatives Washington, D.C. 20515

Dear Chairwoman Brownley:

Thank you for the opportunity to submit a statement regarding Veterans' Access to Reproductive Healthcare. We are particularly interested in Veterans' access to infertility medical treatments and resources. The ability to procreate is the most basic and fundamental desire of human beings. Veterans may have impaired fertility due to illness, trauma, injury as a result of their service, or specific conditions of the male or female reproductive system that prevents the ability to carry a pregnancy to a live birth.

RESOLVE: The National Infertility Association was founded in 1974 to provide information, support, awareness and advocacy for women and men living with infertility. RESOLVE is the oldest and largest patient advocacy organization in the U.S. and the only patient organization advocating for access to infertility services for our active duty military and veterans. We applaud the committee for discussing this important topic.

Currently the Veterans Administration is prohibited by regulation from providing access to in vitro fertilization, or IVF, one of the most effective treatments for more complex cases of infertility. Since 2017, Congress has appropriated funds for a small group of wounded Veterans to access IVF through the VA and its medical partners outside of the VA system. While we are immensely appreciative of the appropriation of funds, the benefit is very narrow and the prohibition in regulation continues.

We challenge the Veterans' Administration to view this issue under the lens of "Family Building" and to meet the needs of Veterans who desire a family. What would "Family Building" benefits look like, what is offered today, and what are the gaps? This type of analysis has not been done – thus far it has been piecemeal at best focused on a narrow classification of cases that result in infertility.

We understand that the VA is not responsible for the healthcare of spouses and dependents, however reproduction is unique in that male and female gametes (sperm and egg) are needed as well as a female to carry the pregnancy. Only providing care to the male or female does not work – both must be treated. The unique nature of this care requires a thorough examination by the VA. All Veterans should have access to family building healthcare and resources.

We applaud the committee for this important discussion in expanding reproductive care to Veterans. We are hopeful that the VA will expand infertility coverage to all Veterans, not just those with a service related injury; provide access to care for those who are single or not married with infertility; and provide coverage for the use of donor gametes (donated sperm, egg or embryos) for those who can no longer produce viable gametes to have a child. We stand ready to work with Congress to help our Veterans build their families. We owe it to them to give them access to the advanced medical care that they need and so deserve.

Sincerely,

Barbara L. Collura President & CEO

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