





Quick Guide to Fertility Preservation

Cancer treatment, such as chemotherapy, radiation therapy, or surgery, may affect an individual's fertility or ability to have biological or genetically related children. This is called iatrogenic infertility.

Fertility preservation is the process of saving or protecting eggs, sperm, or reproductive tissue so that a person can use them to have children in the future.

If you are interested in becoming a parent in the future, it is important to talk to your health care team before you start your cancer treatment. You should ask about the reproductive risks of your treatment, and about your options for preserving your fertility. Consider consulting a reproductive endocrinologist (women) or a reproductive urologist or andrologist (men). These are doctors who specialize in reproductive medicine and fertility.

Fertility Preservation Options Include:

Men & Adolescents	Women & Adolescents	Pediatrics
· Sperm banking	· Oocyte (unfertilized egg) cryopreservation	· Ovarian or
· Sperm extraction	· Embryo (fertilized egg*) cryopreservation	testicular
· Electroejaculation	· Ovarian tissue cryopreservation	tissue banking
· Testicular tissue	· Ovarian shielding – external shields are used to protect the	
cryopreservation (experimental)	ovaries from scatter radiation	
· Testicular shielding – external	· Ovarian transposition (oophoropexy) – ovaries are moved	
shields are used to try to protect	away from the line of radiation to try to minimize damage	
the testes from scatter radiation	· Hormonal suppression	
	*requires partner or donor sperm	

Questions to Ask Your Health Care Team About Fertility Preservation

- Will the cancer treatment you are recommending affect my fertility?
- Are there other treatment options that would not affect my fertility? Or affect it less?
- What are my fertility preservation options?
 What are the pros and cons of each option?
- Should I talk to a fertility specialist? Can you refer me to one?
- Will any of these options delay my treatment or lessen its effectiveness?
- Will these options be covered by my health insurance and what out-of-pocket costs will I have?

Fertility Preservation Option	Estimated Cost Range
Egg Freezing	\$10,000-\$15,000 + storage fees
Embyro Freezing	\$10,000-\$15,000 + storage fees
Ovarian Tissue Freezing	\$10,000-\$15,000 + storage fees
Ovarian Transposition	Unknown
Ovarian Suppression	\$350-\$500 monthly
Sperm Banking	\$500-\$1,000 + storage fees
Testicular Sperm Extraction	\$6,000-\$16,000
Electroejaculation	\$10,000-\$12,000

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Insurance Coverage of Fertility Preservation

Because the field of fertility preservation is relatively new and growing, many health insurance companies have argued that fertility preservation is not covered or is experimental.

However, it is important that you understand your rights and your health insurance company's rules before your start any preservation treatments.

Rights to Fertility Preservation

Currently, no federal law requires insurance companies to specifically cover fertility preservation, but some states have passed laws to require coverage, including California, Colorado, Connecticut, Delaware, Illinois, Maine, Maryland, New Hampshire, New Jersey, New York, Rhode Island, and Utah. For an up-to-date list of these laws and pending legislation, visit the Alliance for Fertility Preservation (allianceforfertilitypreservation.org/advocacy/state-legislation).

Appealing Denials of Coverage

If your health insurance company tells you that fertility preservation isn't covered by your plan, you have the right to appeal their decision. Each insurance company has its own internal appeals process, so contact your insurance company for details or look for instructions on how to file an appeal on your denial letter.

Under the Affordable Care Act, all states are required to also have an external appeals process – this is also sometimes referred to as Independent Medical Review or External Medical Review. For information on your state's external medical review process contact your state's insurance agency: TriageCancer.org/StateResources. This process is underutilized, but when people appeal, they are more likely to have their treatment covered by an insurance company.

There is also an option to file an "expedited" or "urgent" external medical review, where a decision must be provided within 72 hours. This faster decision can be helpful for those making fertility preservation decisions before beginning cancer treatment.

When appealing denials of coverage, it is important to argue that fertility preservation for iatrogenic infertility is not "elective" or "experimental," but rather, a "medical necessity" to prevent infertility. It can also be argued that fertility preservation is a "medically necessary" treatment for a side effect of cancer treatment. Your health care team may be able to help you submit an appeal to your insurance company.

More Information

- **Financial Assistance Resources**
 - LIVESTRONG Fertility (livestrong.org/what-we-do/program/fertility)
 - Heartbeat (scroll to find this program) (ferringfertility.com/patient-resources)
- For Additional Financial Assistance for Storage and Post-Treatment Family-Building:
 - Family Building Cancer Finances Modules (ferringfertility.com/patient-resources)
 - Alliance for Fertility Preservation (allianceforfertilitypreservation.org)
- For More Information About Fertility Preservation
 - Alliance for Fertility Preservation (allianceforfertilitypreservation.org)
 - Oncofertility Consortium (allianceforfertilitypreservation.org)
- To Find Fertility Preservation Services Near You
 - o Fertility Scout (<u>fertilityscout.org</u>)
- For More Information About Health Insurance and Appeals
 - Triage Health Insurance Materials & Resources (TriageHealth.org/health-insurance)

For more information on navigating finances, visit TriageHealth.org/navigating-finances and CancerFinances.org.

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