Wounded veterans deserve infertility benefits, physicians say

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One of the ways we thank our veterans for their service in this country is through access to health care coverage through the VHA. That should include assisted-reproductive technology benefits, including IVF, for those whose war injuries caused infertility, says a policy adopted at the 2016 AMA Interim Meeting.

A report of the AMA Council on Medical Service details the prevalence of infertility among wounded veterans and offers recommendations to make sure they are provided a full range of coverage that supports their desire to start a family.

With the majority of active duty service members being of childbearing age, many service members and their partners make family planning decisions to accommodate their military service duties. But service members may be exposed to risks that can result in injuries impacting their fertility, such as improvised explosive devices (IED). A blast from an IED can cause severe damage to the genitourinary system, which includes the kidneys, and reproductive and urinary tract organs.

About 1,400 service members returned from Afghanistan and Iraq with severe injuries to their reproductive organs. It is estimated that thousands more sustained paralysis, brain injuries or other conditions that make IVF their best option to conceive a child.

About 16 percent of female veterans and 14 percent of male veterans reported experiencing infertility, according to the National Health Study for a New Generation of U.S. Veterans.

No longer experimental

The VA covers fertility assessments, counseling and some treatment, such as surgeries, medications and intrauterine insemination, but has not been able to provide IVF benefits under the Veterans Health Care Act of 1992. When the law was enacted, IVF was considered experimental.
New AMA policy supports lifting the ban on the VHA from covering IVF costs for veterans who have become infertile due to service-related injuries and encourages interested stakeholders to collaborate in lifting the ban. The AMA also will encourage the Department of Defense to offer service members fertility counseling and information on available health care benefits before deployment and during the medical discharge process.

“The brave men and women who put their lives on the line to defend our country should not be sacrificing their chance to have a family in the process,” said AMA Immediate-Past Chair Stephen R. Permut, MD, JD. “The men and women of our military, as well as future service members, deserve the peace of mind that such an important benefit will be available if they need it.”