

suffering from **INFERTILITY?**

How Illinois Law Allows Companies To Avoid Coverage | By Dr. Randy Morris

In early 2002, then 34-year-old Jill Bonfiglio and her husband Scott, then 30, were faced with a dilemma. Jill had just found out that both of her fallopian tubes were blocked and badly damaged. Without in vitro fertilization, a treatment that bypasses blocked tubes, she would never be able to conceive. The problem was that both Jill and Scott's employers excluded fertility treatment from the medical insurance coverage they offered employees. Rather than try to pay for the costs of in vitro fertilization out-of-pocket, Scott decided to leave the job he loved and take a position elsewhere—for less pay—so he could get the insurance coverage they needed. Jill failed to achieve pregnancy in her first three in vitro fertilization attempts before coming to see me, finally conceiving in her fourth attempt.

"I didn't choose to be infertile," Jill says, "Just as cancer patients don't choose to have cancer. Infertility is a medical condition. I believe I should have had options to be able to have a family and not go bankrupt."

If they hadn't secured insurance coverage, Jill and Scott would have incurred more than \$60,000 in medical bills.

LOOPHOLES IN THE LAW

Thirteen years ago, after intense grassroots efforts by doctors and patients, a law was passed in the state of Illinois that mandated insurance coverage for couples in need of infertility treatment. Commonly referred to as the Illinois Family Building Act, the law has allowed thousands of infertile couples to conceive children ever since.

However, there are several large loopholes left in the legislation that still leaves tens of thousands of couples without coverage. In Scott and Jill's case, their companies were self-insured. Under the Federal Employee Retirement Income Security Act of 1974 (ERISA), companies that are self-insured aren't required to abide by state insurance regulations. Although originally intended to protect employees from state laws that could restrict insurance coverage, large corporations instead use ERISA to evade laws that require improvement in coverage. (Many school districts in Illinois, which employ a large number of women of reproductive age, claim exemption in this way.)

In addition to the self-insured loophole, many other Illinois employees fail to receive coverage due to their employer being based outside of Illinois. According to Illinois

Senator Kirk Dillard, companies are only required to meet insurance regulations in the state where they're based. Employers who have their company insurance policies written outside the state of Illinois are therefore exempt from the Illinois law. This is true even if the company has a large workforce in Illinois. (Maryland, on the other hand, also has a state infertility mandate. However, the law there states that employers must provide the coverage to people who live and work in the state, regardless of whether the policy is issued *inside or outside the state*.) To note, Illinois State Representative James H. Meyer, upon review of the Illinois infertility law, stated he would be, "strongly supportive of an amendment to close the Illinois loophole."

Does requiring employers to meet the requirements of the Illinois law cause a financial hardship? It doesn't seem so. A 2006 employer survey conducted by Mercer Consulting found that 91 percent of employers who offered infertility treatment coverage reported no *increase* in their medical costs. Other studies suggest that the addition of infertility coverage may actually *decrease* insurance premiums as couples use more effective treatments instead of less effective, but "covered" therapies.

I believe the Illinois law also needs to be updated to include provisions for newer therapies such as the embryo donation, freezing of embryos and advanced technologies such as preimplantation genetic diagnosis.

Time and again, as a physician, I encounter couples who can't afford treatment for infertility—no matter who their employer is—because their insurance won't provide coverage. Some of these couples are working for huge multimillion-dollar companies, yet they refuse to provide adequate infertility coverage for their employees. According to a 2003 Harris Interactive Poll, 80 percent of the general population believes infertility treatment should be covered by insurance.

Jill and Scott's baby is due this April. ■



Dr. Randy Morris is a Board Certified Reproductive Endocrinologist and Medical Director, IVF1, Chicago and Naperville, IL



Breast
WISHES



312-981-4440
WWW.MYGELDNERCENTER.COM
PETER GELDNER, MD



BEFORE

AFTER