

ESHRE fact sheets 4 January 2017

## The funding of IVF treatment

I. There is some state funding/reimbursement for assisted reproduction (ART) in almost all EU member states (with the exception of Ireland and Lithuania). The extent of state support varies from around 90% in Belgium, France, Greece, Netherlands and Slovenia, to 20-30% in Bulgaria, Romania and Spain.

2. Most European countries provide ART from a mix of private clinics and public hospital centres, though in Belgium, the Netherlands and Slovenia almost all treatment is performed in state hospitals.

3. With no federal law to regulate ART and its reimbursement in the USA, only a small number of states require (by 'mandate') insurance companies and employers to cover the costs or part costs of fertility treatment. Otherwise, treatment is performed within a private market system which in 2014 was estimated to cost an average of \$12,400 per cycle. Critics of this private system complain that IVF in the USA is mostly a treatment for those who can afford it. The average cost of an IVF cycle in Europe is €4000-5000.

4. In Europe, where the mixed state and private model predominates, eligibility for state-funded treatment is determined mainly by patient age, previous ART attempts and relationship status. For example, treatment is reimbursed in France for up to four cycles in women up to the age of 45. However, eligibility here is only for heterosexual couples with a diagnosis of infertility. The treatment of lesbian and single women is thus not allowed. Elsewhere, the most common age limit is 40 years in the female partner. However, in many countries the reasons for an eligibility policy are not clear, but may include cost, efficacy and safety, or ethical and religious objections. Policy in Belgium has coupled reimbursement to restrictions on the number of embryos used for transfer (which in turn is related to the age of the woman). State funding in the UK depends on the regional policies of local health commissioning groups; this has resulted in variable and

limited state funding, despite the NICE recommendation that three cycles should be supported. National policy in Germany reimburses 50% of IVF/ICSI costs for up to three cycles.

5. Belgium, Denmark, Netherlands and Slovenia are reputed to have the most generous reimbursement policies in Europe, with almost full coverage for up to six cycles.(1) This high state support is reflected in high rates of IVF availability and uptake. ESHRE monitoring data for 2013 puts IVF availability in Belgium at 2200 per million inhabitants, 2100 per million in Denmark, and 1800 per million in Slovenia. These are the only three countries with availability rates over the 1500 per million estimated to meet the global need for IVF among infertile couples - and three countries with full state insurance coverage of IVF.

I. Berg Brigham K, Cadler B, Chevreul K. The diversity of regulation and public financing of IVF in Europe and its impact on utilization. Hum Reprod 2013; 28: 666-675