

1
2
3 **Title: Oncofertility and Fertility Preservation Treatment**
4
5 **Introduced by: Ali Moiin, MD, for the Wayne County Delegation**
6
7 **Original Author: Raphael Yechieli, MD**
8
9 **Referred to: Reference Committee E**
10
11 **House Action: Adopted**
12

13
14 **Whereas, approximately 70,000 adolescents and young adults between**
15 **the ages of 15 and 39 years of age will be diagnosed with cancer this year¹, and**
16

17 **Whereas, the risk of infertility due to cancer therapy should be discussed**
18 **with all cancer patients at the time of diagnosis and fertility preservation**
19 **therapy should be an essential part in the management of adolescents and**
20 **young adults with cancer, and referral for fertility preservation should be made**
21 **within 24 hours^{2,3}, and**
22

23 **Whereas, 34-72 percent of patients are counseled about the risk of**
24 **iatrogenic infertility from cancer treatment, only 2-4 percent of patients pursue**
25 **fertility preservation⁴, and**
26

27 **Whereas, insurance will not routinely cover payments for fertility**
28 **preservation treatments, even in states with mandated infertility coverage⁵;**
29 **therefore be it**
30

31 **RESOLVED: That MSMS support payment for fertility preservation**
32 **therapy services by all payers when iatrogenic infertility may be caused,**
33 **directly or indirectly by necessary oncologic treatments as determined by a**
34 **licensed physician; and be it further**
35

36 **RESOLVED: That our AMA support payment for fertility preservation**
37 **therapy services by all payers when iatrogenic infertility may be caused,**
38 **directly or indirectly by necessary oncologic treatments as determined by a**
39 **licensed physician; and be it further**
40

41 **RESOLVED: That MSMS lobby for appropriate legislation requiring**
42 **payment for fertility preservation therapy services by all payers when iatrogenic**
43 **infertility may be caused, directly or indirectly by necessary oncologic**
44 **treatments as determined by a licensed physician; and be it further**
45

46 **RESOLVED: That our AMA lobby for appropriate legislation requiring**
47 **payment for fertility preservation therapy services by all payers when iatrogenic**
48 **infertility may be caused, directly or indirectly by necessary oncologic**
49 **treatments as determined by a licensed physician.**
50

51 **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**

¹ NCI. www.cancer.gov/cancertopics/aya. Accessed 3/28, 2012.

² Lee SJ, Schover LR, Partridge AH, et al. American Society of Clinical Oncology Recommendations on Fertility Preservation in Cancer Patients. *Journal of Clinical Oncology*. June 20, 2006;24(18):2917-2931.

³ Reproduced with permission from the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) for Adolescent and Young Adult Oncology (V.1.2012) © 2012 National Comprehensive Cancer Network I.

⁴ Letourneau JM, Smith JF, Ebbel EE, et al. Racial, socioeconomic, and demographic disparities in access to fertility preservation in young women diagnosed with cancer. *Cancer*. 2012:n/a-n/a.

⁵ Basco D, Campo-Engelstein L, Rodriguez S. Insuring Against Infertility: Expanding State Infertility Mandates to Include Fertility Preservation Technology for Cancer Patients. *The Journal of Law, Medicine & Ethics*. 2010;38(4):832-839.