March 30, 2015

s.30(1)

Dear [Name],

s.30(1)

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act (the Act) [Our File #: HCS/025/2015]

On February 26, 2015, the Department of Health and Community Services (the Department) received your request for access to the following records/information:

"Any information on birth rate, death rate as well as any briefing notes, information notes, discussion papers, fact sheets on in-vitro fertilization (from 2013-onward)."

Please be advised that the department does not collect information relating to birth and/or death rates, however, you can contact Yvonne Oram, ATIPP Coordinator with the Newfoundland and Labrador Centre for Health Information at Yvonne.oram@nlchi.ca.

The Department has reviewed your request in the context of the Access to Information and Protection of Privacy Act and is pleased to inform you that access to these records has been granted. In accordance with your request for a copy of the records, the appropriate copies have been enclosed.

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. If you have any further questions, please contact Cheryl Joy, ATIPP Coordinator at (709) 729-7010 or by email cherylio@gov.nl.ca.

Sincerely,

BRUCE COOPER
Deputy Minister

/kas
/Encl.

ATIP/0313/002/003
Decision / Direction Note
Department of Health and Community Services

Title: In Vitro Fertilization (IVF)

Decision / Direction Required:
- To increase access to fertility treatment at Eastern Health by offering IVF services in this province as an insured service. In the interim, fund the direct medical costs to access this procedure out of province.

Background and Current Status:
- Eastern Health offers fertility service on Major's Path in St. John's through Newfoundland and Labrador Fertility Services (NLFS). NLFS is staffed with three physicians, 2 full-time and 6 part-time nurses, 3 laboratory staff and 2 support staff.
- Medical procedures available at NLFS include:
  - Controlled ovarian hyper stimulation and intrauterine insemination (COH/IUI) - the injection of sperm into the uterus;
  - Donor Insemination (DI) - also known as "artificial insemination", a process of placing frozen/thawed sperm from a donor into a woman's uterus at the time of ovulation, and
  - Ovulation induction - stimulation of ovulation through medication.
- In Vitro Fertilization (IVF) is the uniting of egg and sperm in the laboratory environment. Embryos are then transferred into the uterus through the cervix and pregnancy is allowed to begin. IVF is currently not available in this province and individuals wishing to access this service must travel out-of-province and pay privately as it is not an insured health service in this province as in the regulations under the Medical Care Insurance Act.
- IVF costs include drugs ($3,000+), procedure ($6,000+), travel (dependent on where patient travel to access service), as well as time off work. Some individuals recover a portion of the drug costs through private insurance. Some of the cost of airfare/meals/accommodations can be claimed through income tax returns.
- While the actual procedure is not offered in this province, NLFS provides pre-screening, counselling, prescriptions for infertility drugs and other services to prepare women who wish to avail of IVF. Once the IVF is successfully achieved in another province the woman is then followed up by a fertility specialist in NL.
- Full IVF services are performed in Nova Scotia, New Brunswick, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia.
- Quebec became the first jurisdiction in Canada to pay for fertility treatments in 2010, including the cost of drugs. For three to six IVF cycles. Manitoba offers a tax credit to cover part of the costs to a maximum of $8,000 a year. In Ontario IVF is funded for women whose fallopian tubes are blocked. In April 2014, Ontario announced that it would be expanding its IVF program to include patients suffering from all forms of infertility but it would be limited to one cycle of IVF but patients will still cover the cost of their own drugs. The expansion is slated to begin early 2015. Ontario has not determined how the new funding will be delivered (i.e. whether directly through the public-health insurance system, OHIP, or via tax credit).
- Budget 2006 allocated $350,000 annually to enable NL residents to benefit from IVF procedures in St. John's. However, once more detailed analysis was completed it was identified that additional funding would be required. In 2006, the cost to provide IVF services in St. John's was estimated at $2.0M in capital and $1.0M in operating. In lieu of the additional funding was used to hire additional staff.
- To work within the limited budget allocation, several options were explored including the transport specimens to Montreal to fertilization with all other related procedures provided in St. John's and providing financial assistance for couples/women to travel an out-of-province IVF Centre. Neither of these options was adopted.
• Dr. Terry O'Grady with NLFS has approached the Department again to reconsider offering and funding IVF services in NL. Currently most families request multiple embryo transfer to increase the likelihood of pregnancy as it is a very costly procedure that requires out of province travel. Based on her proposal, Dr. O'Grady proposes a single embryo be transferred through the IVF process which will reduce the risk multiple births which cost significantly more than single births. Multiples have a greater chance of premature delivery and other medical problems that keep them in neo-natal care and in hospital for weeks or months. Dr. O'Grady feels that the cost savings associated with the decreased admission to the NICU could be directed to fund IVF in this province. Based on her calculations, it would cost approximately $50,400 to keep twin babies in the NICU for four days (14 days X $1,800/bed X 2 babies). There are no statistics in the proposal detailing this analysis (i.e., number of annual multiple births and associated costs).

• Dr. O'Grady recognizes that capital cost of approximately $1.0M would be required to enhance laboratory services in St. John's. This cost has decreased since the 2006 estimate as this program has since relocated from the Health Sciences Centre to Major's Path.

• She advises that if families continue to pay for this uninsured service, the cost would be recovered through this revenue. Ultimately, she is advocating for this service to be insured with the cost covered by Government. She feels this province would be an initiative would support Government’s Population Growth Strategy.

• In the interim, Dr. O'Grady is recommending that the direct medical costs be covered for patients who require transport out of province to access this service.

• Currently there is a 50% pregnancy rate which has increased substantially since 1991 when the success rate was 15%.

• According to EH, approximately 70 NL residents travel out of province annually for IVF. It is expected that the number of people accessing this service would double if offered in province.

• Dr. O’Grady is seeking to do a presentation to the Department on this proposal.

• This initiative is supported, in principle, by senior officials at EH however further work is required.

Recommendation:
• Advise Dr. O’Grady in writing of the following:
  o The VP, Children and Women’s Health has been contacted and will ensure a complete and thorough analysis of the proposal including projected costs (both capital and operational).
  o A submission must be supported in writing by EH through the 2015/16 Budget process. There may be consideration in fall 2014 for a presentation to inform further on the proposal.

Prepared / Approved by: Karen Nolan/Bev Griffiths/Denise Tubrett
Approved by: 

June 13, 2014
Invitro Fertilization (IVF)
November 2014

- Under the *Canada Health Act* and the *Medical Care Insurance Act*, 1999 *medically necessary services* are provided to MCP beneficiaries free of charge.

- Services that are included as insured services under our Medical Care Plan include “all services properly and adequately provided by physicians to beneficiaries who are suffering from an illness requiring medical treatment or advice.” We call these *medically necessary services*.

- Recognizing the importance of IVF to some families in the province, IVF is provided as a partial service in St. John’s through the Newfoundland and Labrador Fertility Services (NLFS) clinic at Major’s Path.

- Government provides annual funding of $350,000 a year for professional staff (physician and nursing) for the program to provide prescreening, counselling, etc. to help prepare women who want to avail of IVF out of province.

- Currently, Eastern Health is investigating the logistics and feasibility of providing IVF services here in Newfoundland and Labrador. The examination includes consideration of the costs of providing such a service, determining the appropriateness and availability of the required human resources and the required space and infrastructure needs, such as laboratory space.

**Secondary Messages**

- Fertility specialists at Eastern Health provide pre-screening, counseling, prescriptions for infertility drugs and other services
to prepare women who travel to avail of IVF procedures in another province. Referrals to these centres are coordinated by NLFS.

- The woman is then followed up by a fertility specialist in Newfoundland and Labrador should the procedure be successful.

- Our position on this issue is in line with most other provinces. Full IVF services are offered in eight other provinces; however IVF is currently only publicly funded in Quebec. We understand that Ontario will provide funding beginning in 2015. Residents of the remaining provinces are required to pay out-of-pocket for IVF services.

**Background:**

- The NLFS is funded and administered through Eastern Health (EH) as a provincial program. The medical director of the NLFS (Dr. T. O'Grady) has been lobbying Government for a number of years to fund IVF as an insured service.

- She has presented several options over the years and in 2006 Government provided $350,000 annually for increased professional staff (physician and nursing) for the program to provide prescreening, counselling, etc. to better prepare women who wanted to avail of IVF out of province.

- In the interim, Dr. O'Grady is recommending that direct medical costs should be covered for patients who go out of province for IVF.

- Currently there is a 50% pregnancy rate for out of province IVF procedures which has increased substantially since 1991 when the success rate was 15%.
• Approximately 70 NL residents travel out of province annually for IVF. It is expected that the number of people accessing this service would double if offered in province based on information available through the NLFS.

• The VP, Children and Women’s Health at EH, has been contacted and will ensure a complete and thorough analysis of any budget proposal including projected costs (both capital and operational) that EH may choose to submit on this issue.
**Information Note**  
**Department of Health and Community Services**

**Title:** In Vitro Fertilization (IVF)

**Issue:** A request to meet with the Minister to discuss IVF has been received by the Department. This note provides background information and current status of IVF.

**Background:**
- Eastern Health offers fertility service on Major’s Path in St. John’s through Newfoundland and Labrador Fertility Services (NLFS). NLFS is staffed with three physicians, 2 full-time and 6 part-time nurses, 3 laboratory staff and 2 support staff.

- Medical procedures available at NLFS include:
  - Controlled ovarian hyper stimulation and intrauterine insemination (COH/IUI) - the injection of sperm into the uterus;
  - Donor Insemination (DI) - also known as “artificial insemination”, a process of placing frozen/thawed sperm from a donor into a woman’s uterus at the time of ovulation, and
  - Ovulation induction - stimulation of ovulation through medication.

- In Vitro Fertilization (IVF) is the uniting of egg and sperm in the laboratory environment. Embryos are then transferred into the uterus through the cervix and pregnancy is allowed to begin. IVF is currently not available in this province and individuals wishing to access this service must travel out-of-province and pay privately as it is not an insured health service in this province as in the regulations under the Medical Care Insurance Act.

- IVF costs include drugs ($3,000+), procedure ($6,000+), travel (dependent on where patient travel to access service) as well as time off work. Some individuals recover a portion of the drug costs through private insurance. Some of the cost of airfare/meals/accommodations can be claimed through income tax returns.

- While the actual procedure is not offered in this province, NLFS provides pre-screening, counselling, prescriptions for infertility drugs and other services to prepare women who wish to avail of IVF. Once the IVF is successfully achieved in another province the woman is then followed up by a fertility specialist in NL.

- Full IVF services are performed in Nova Scotia, New Brunswick, Quebec, Ontario, Manitoba, Saskatchewan, Alberta, British Columbia.

- Quebec became the first jurisdiction in Canada to pay for fertility treatments in 2010, including the cost of drugs, for three to six IVF cycles. Manitoba offers a tax credit to cover part of the costs to a maximum of $8,000 a year. In Ontario IVF is funded for women whose fallopian tubes are blocked. In April 2014, Ontario announced that it would be expanding its IVF program to include patients suffering from all forms of infertility but it would be limited to one cycle of IVF but patients will still cover the cost of their own drugs. The expansion is
slated to begin early 2015. Ontario has not determined how the new funding will be delivered (i.e. whether directly through the public-health insurance system, OHIP, or via tax credit).

- Quebec has experienced a significant uptake and cost since they implemented an IVF universal program. In early December 2014 Quebec tabled a Bill (Bill 20) designed to place restrictions on their IVF program. If the bill is passed they will not provide any funding to women over the age of 42 and will require a psychological evaluation for women between the ages of 18 and 42. They will also limit the number of embryos implanted to one except for women between 37 and 42 to two implants. They also want to put restrictions (fines) on physicians who refer women outside of their province for IVF as the chances for multiple births is elevated which may impact health care costs in Quebec.

- Budget 2006 allocated $350,000 annually to enable NL residents to benefit from IVF procedures in St. John’s. However, once more detailed analysis was completed it was identified that additional funding would be required. In 2006, the cost to provide IVF services in St. John’s was estimated at $2.0M in capital and $1.0M in operating. In lieu, the additional funding was used to hire additional staff.

- To work within the limited budget allocation, several options were explored including the transport specimens to Montreal to fertilization with all other related procedures provided in St. John’s and providing financial assistance for couples/women to travel an out-of-province IVF Centre. Neither of these options was adopted.

- Dr. Terry O’Grady with NLFS has approached the Department again in Spring 2014 to reconsider offering and funding IVF services in NL and provided the Department with a Power Point Presentation. Currently most families request multiple embryo transfer to increase the likelihood of pregnancy as it is a very costly procedure that requires out of province travel. Based on her proposal, Dr. O’Grady proposes a single embryo be transferred through the IVF process which will reduce the risk multiple births which cost significantly more than single births. Multiples have a greater chance of premature delivery and other medical problems that keep them in neo-natal care and in hospital for weeks or months. Dr. O’Grady feels that the cost savings associated with the decreased admission to the NICU could be directed to fund IVF in this province. Based on her calculations, it would cost approximately $50,400 to keep twin babies in the NICU for four days (14 days X $1,800/bed X 2 babies). There are no statistics in the presentation supporting this analysis (i.e., number of annual multiple births and associated costs)

- Dr. O’Grady recognized that capital cost of approximately $1.0M would be required to enhance laboratory services in St. John’s. This cost has decreased since the 2006 estimate as this program has since relocated from the Health Sciences Centre to Major’s Path.

- She advises that if families continue to pay for this uninsured service, the cost would be recovered through this revenue. Ultimately, she is advocating for this service to be insured with the cost covered by Government. She feels this province would be an initiative would support Government’s Population Growth Strategy. Departmental staff contacted the
Population Growth Strategy staff and was advised their focus at the present time is immigration initiatives.

- In the interim, Dr. O'Grady is recommending that the direct medical costs be covered for patients who require transport out of province to access this service.

- Currently there is a 50% pregnancy rate which has increased substantially since 1991 when the success rate was 15%.

- According to EH, approximately 70 NL residents travel out of province annually for IVF. It is expected that the number of people accessing this service would double if offered in province.

**Current Status:**
- Eastern Health is currently investigating the logistics and feasibility of providing IVF services in this Province. The analysis includes consideration of the costs of providing the service, the appropriateness and availability of the required human resources and the required space and infrastructure needs, such as laboratory space.

- EH, however, did not submit a budget proposal for IVF this year.

Prepared / Approved by: Debbie Morris/Bev Griffiths/Denise Tubrett
Deputy Minister Approval: [Signature]
Ministerial Approval: [Signature]
December 16, 2014