

What next?

Hopefully this leaflet has given you enough information about the proposed changes to the joint policy.

If you choose, you can read the full version of both the existing and proposed new policies on your local CCG's website.

Or these documents can be sent to you if you do not have access to the internet.

If you have any comments about the new policy, we would like to hear from you **before 6th October 2019**

After this date, your views will help inform your local CCG as they consider whether to adopt the new policy.

You can share your views about the changes in the policy by:

Responding to our online survey here:

www.bit.ly/2ZfXuZN

Email: sheccg.engagementactivity@nhs.net

Call: 0114 305 1282

Please note, there will be different contact details for people living in different parts of Yorkshire and Humber. These details are for people living in Barnsley, Bassetlaw, Doncaster, Rotherham and Sheffield.



Proposed changes to our joint Access to Infertility Treatment policy

Clinical Commissioning Groups (CCGs) in the Yorkshire and Humber area are considering some changes to our shared approach to supporting people who are experiencing infertility to access specialist interventions to help them conceive.

Background

A joint commissioning policy was developed in partnership with the Yorkshire and Humber Expert Fertility Panel (a panel predominantly made up of clinicians and fertility experts) and adopted in 2013. Recently CCGs across the Yorkshire and the Humber agreed to work together again to update this policy in light of new NICE guidance and other policy changes.

What the policy is

The shared policy sets out **who is eligible** for specialist fertility services.

What the policy is not

This shared policy is **not** about how many cycles of infertility treatments are paid for by individual CCGs. This is covered by each CCG's own local policy around funding of specialist infertility treatment.

What this document is

The new policy contains some changes. The majority of these are simple changes to wording. These will either make the policy easier to read or reflect changes to clinical terminology as infertility treatment develops. These small changes will **not** affect how couples may be eligible for treatment.

However, there are **four** changes that might affect whether a couple may be eligible for NHS funded specialist fertility treatment.

So what are the proposed changes?

Eligibility of Overseas Visitors

Changes to the NHS (Charges to Overseas Visitors) Regulations 2015 were introduced into Parliament on 19 July 2017. As a result, from 21 August 2017, assisted conception services are no longer included in the scope of services. This means those people who need to pay the NHS surcharge are no longer eligible for NHS funded assisted conception, this includes initial fertility investigations.

Where one partner has a different immigration status to the other, treatment will not be funded if one partner is not eligible as the policy applies as a couple. So, if either of the couple has to pay the immigration health surcharge, they will not be eligible for NHS funded specialist infertility treatment.

Transgender Couples

The definition of infertility has been explicitly amended to include Transgender which will broaden access to NHS funded specialist infertility treatment to transgender couples.

Same Sex Couples

The new policy will give same sex couples access to NHS funded IUI and DI (Artificial Insemination and Donor Insemination) which increases access to treatment for same sex couples.

Couples living with a disability that affects their fertility

The new policy enhances the offer of funding to couples who by reason of disability cannot conceive naturally

Need to be smoke free

In order to be eligible for NHS funded specialist fertility treatment, couples must be able to demonstrate they have been **smoke free** for **at least three months**. This will be confirmed with a carbon monoxide breath test.

This change is based on national guidance about how smoking has a negative effect on the chances of successful IVF treatment.