



Freedom of Information request & West Norfolk CCG response

WN-2017-0165 – IVF Funding

1. Name of CCG:

NHS West Norfolk Clinical Commissioning Group

2. When was your fertility policy last updated?

See attached policy

3. Is there a date/year set to review your current fertility policy?

Yes

4. IF yes, when?

See attached policy, which is current under review

Questions regarding fertility preservation for women:

5. Do you provide fertility preservation due to medical conditions/treatments that may impact future fertility to women?

Yes

6. What age range of women do you provide fertility preservation to?

Women of reproductive age, including adolescent girls.

7. Do you restrict fertility preservation based on relationship status, BMI, or any other factor (bar need for immediate onset of medical treatment) to such women?

Yes, smoking status, parental status (i.e. living children from a current or previous relationship) and previous sterilisation.

8. What fertility preservation options do you offer for women? (please list all offered from egg storage, embryo storage, laparoscopy).

See attached policy

9. If medical advice and time allows, do you enable women to undergo multiple cycles of ovarian stimulation to store multiple batches of eggs/embryos?

10. If yes to above, is there a limit to number of cycles?

Yes

11. If egg storage is offered, where and by whom are the eggs stored?

See attached policy

12. If embryo storage is offered, where and by whom are the embryos stored?

See attached policy

13. Is egg storage funded by the CCG?

Yes

14. How long is egg storage for such women fully funded for by your CCG?

One year following egg collection.

15. Do you cease funding egg storage for any other reason than this time period expiring (for example, stopping funding for storage when a women reaches a certain age). Please list these other reasons to stop funding storage.

No

16. Once the CCG stops funding egg storage, can the woman pay for storage themselves, privately?

Yes

17. If yes, how much per year is this cost?

This level of information is not held by the CCG

18. Is this the full cost of the storage, or is this subsidised in part by the CCG?

Any costs relating to the continued storage of the embryos beyond the first calendar year of the retrieval date is the responsibility of the couple.

19. Is this cost decided by the CCG? If no, who sets the tariff? Please inform who sets the cost, even if the actual cost is unknown.

This level of information is not held by the CCG

20. How is the cost determined? Please include factors considered

This level of information is not held by the CCG

21. Are there any restrictions on storage length in this situation?

This level of information is not held by the CCG

22. If embryo storage is offered, where and by whom are the embryos stored?

See attached policy

23. How long is embryo storage for such women funded for by your CCG?

See attached policy

24. Do you cease funding embryo storage for any other reason than this time period expiring (for example, stopping funding for storage when a women reaches a certain age). Please list these other reasons to stop funding storage.

No

25. Once the CCG stops funding embryo storage, can the woman pay for storage themselves, privately?

Yes

26. If yes, how much per year is this cost?

This level of information is not held by the CCG

27. Is this the full cost of the storage, or is this subsidised in part by the CCG?

Any costs relating to the continued storage of the embryos beyond the first calendar year of the retrieval date is the responsibility of the couple.

28. Is this cost decided by the CCG? If no, who sets the tariff? Please inform who sets the cost, even if the actual cost is unknown.

This level of information is not held by the CCG

29. How is the cost determined? Please include factors considered

This level of information is not held by the CCG

30. Are there any restrictions on storage length in this situation?

This level of information is not held by the CCG

31. Sometimes, medical treatment means a woman receives treatment that affects fertility (such as chemotherapy) followed by further treatment for that condition (such as tamoxifen to prevent recurrence), during this hormonal therapy women should not get pregnant. Do your policies account for such events? If so, how?

See attached policy

32. According to your policies, should counselling always be offered for fertility preservation, even if timelines are tight?

See attached policy

33. Do you have procedures to allow for emergency fertility counselling if there is limited time? If yes, what are they?

See attached policy

34. Do your guidelines include informing female patients of the cost of their chosen fertility preservation method?

See attached policy

35. To confirm, should female patients always be told at the time of their decision the future cost of their chosen fertility preservation method, according to the CCGs guidelines?

See attached policy

36. What action is taken if women are not told of the full future potential cost?

The CCG does not hold this level of information.

Questions regarding fertility preservation for men:

37. Do you provide fertility preservation due to medical conditions/treatments that may impact future fertility to men?

Yes

38. What age range of men do you provide fertility preservation to?

No upper age limit

39. Do you restrict fertility preservation based on relationship status, BMI, or any other factor (bar need for immediate onset of medical treatment) to such men?

See attached policy

40. What fertility preservation options do you offer for men? (please list all offered)

See attached policy

41. Sperm Banking:

Not funded

42. If medical advice and time allows, do you enable men to provide multiple batches of sperm for freezing?

See attached policy

43. If yes to above, is there a limit to number of cycles?

See attached policy

44. IF sperm banking is offered, where and by whom is the sperm stored?

See attached policy

45. Is sperm banking funded by the CCG?

See attached policy

46. How long is sperm banking for such women fully funded for by your CCG?

See attached policy

47. Is the cost 'by batch' or is it one cost for all sperm, if several deposits are allowed to be stored.

See attached policy

48. Do you cease funding sperm storage for any other reason than this time period expiring (for example, stopping funding for storage when a women reaches a certain age). Please list these other reasons to stop funding storage.

See attached policy

49. Once the CCG stops funding sperm storage, can the man pay for storage themselves?

Yes

50. If yes, how much per year is this cost?

The CCG does not hold this level of information

51. Is this the full cost of the storage, or is this subsidised in part by the CCG?

The CCG does not hold this level of information

52. Is this cost decided by the CCG? If no, who sets the tariff? Please inform who sets the cost, even if the actual cost is unknown.

The CCG does not hold this level of information

53. How is the cost determined? Please include factors considered

The CCG does not hold this level of information

54. Are there any restrictions on storage length in this situation?

The CCG does not hold this level of information

IVF or Embryo freezing when a man's fertility is affected:

55. If medical advice and time allows, do you enable a couple, where the man is to undergo treatment that may impede his fertility, to undergo IVF, or embryo freezing prior to the man's treatment?

See attached policy

56. If IVF is offered to a couple in this situation, up to how many rounds would be offered (were medical advice that as many rounds as possible were allowed)?

See attached policy

57. If embryo freezing, with 'fresh' sperm is allowed is the embryo storage funded by the CCG?

See attached policy

58. How long is embryo storage for such men fully funded for by your CCG?

See attached policy

- 59. Do you cease funding embryo storage for any other reason than this time period expiring (for example, stopping funding for storage when a man reaches a certain age or the female partner). Please list these other reasons to stop funding storage.**

See attached policy

- 60. Once the CCG stops funding embryo storage using 'fresh' sperm, can the man pay for storage themselves?**

Yes

- 61. If yes, how much per year is this cost?**

The CCG does not hold this level of information.

- 62. Is this the full cost of the storage, or is this subsidised in part by the CCG?**

The CCG does not hold this level of information.

- 63. Is this cost decided by the CCG? If no, who sets the tariff? Please inform who sets the cost, even if the actual cost is unknown.**

The CCG does not hold this level of information.

- 64. How is the cost determined? Please include factors considered.**

The CCG does not hold this level of information.

- 65. Are there any restrictions on storage length in this situation?**

The CCG does not hold this level of information.

- 66. If embryo storage is offered, where and by whom are the embryos stored?**

Individual Fertility Clinics

- 67. How long is embryo storage for such couples funded for by your CCG?**

The CCG does not hold this level of information.

- 68. Is this the full cost of the storage, or is this subsidised in part by the CCG?**

Storage is not subsidised.

- 69. Is this cost decided by the CCG? If no, who sets the tariff? Please inform who sets the cost, even if the actual cost is unknown.**

The CCG does not determine this cost which is the responsibility of each Fertility Clinic.

- 70. According to your policies, should counselling always be offered to men for fertility preservation, even if timelines are tight?**

The CCG does not hold this level of information.

- 71. Do you have procedures to allow for emergency fertility counselling for men if there is limited time? If yes, what are they?**

The CCG does not hold this level of information.

- 72. Do your guidelines include informing male patients of the cost of their chosen fertility preservation method?**

The CCG does not hold this level of information.

- 73. To confirm, should male patients always be told at the time of their decision the future cost of their chosen fertility preservation method, according to the CCGs guidelines?**

CCG policy on cryopreservation does not state this /the provider is responsible for advising patients of the costs

- 74. What action is taken if men are not told of the full future potential cost?**

The CCG does not hold this level of information.

For any future correspondence regarding this request, please quote the reference number **FOI.17.NNO159**, **FOI.17.SNO153**, **FOI.17.WNO165** & **FOI.17.NOR165**.