

Dear Ms. Reilly,

The Minister for Health, Mr. Stephen Donnelly, T.D., has asked me to thank you for your correspondence concerning public funding for IVF services and notes the motion of South Dublin County Council in this regard.

As you probably will be aware, a commitment to "introduce a publicly funded model of care for fertility treatment" is included in the Programme for Government, "Our Shared Future".

The model of care for infertility was developed by the Department of Health in conjunction with the HSE's National Women & Infants Health Programme (NWIHP) in order to ensure that infertility issues are addressed through the public health system at the lowest level of clinical intervention necessary.

This model of care comprises three stages, starting in primary care (i.e., GPs) and extending into secondary care (i.e., Regional Fertility Hubs) and then, where necessary, tertiary care (i.e., IVF, and other advanced assisted human reproduction (AHR) treatments), with patients being referred onwards through structured pathways.

Phase One of the roll-out of the model of care has involved the establishment, at secondary care level, of Regional Fertility Hubs within maternity networks, in order to facilitate the management of a significant proportion – estimated by NWIHP to be in the range of 50% to 70% – of patients presenting with infertility issues at this level of intervention.

Funding of €2m was provided to the HSE to commence Phase One of the roll-out in 2020 and this was utilised specifically in respect of the development of the first four Regional Fertility Hubs – namely, Cork University Maternity Hospital, the Rotunda Hospital, the National Maternity Hospital and the Coombe Women & Infants University Hospital. These four Hubs are currently operational.

Additional funding was made available in Budget 2021 to enable the continuation of Phase One last year, including through the setting-up of the final two Regional Fertility Hubs, one located within the Saolta Hospital Group, at University Hospital Galway, and one within the University of Limerick Hospital Group, at Nenagh General Hospital. Work is well underway in relation to the recruitment, refurbishment and equipping of these two Hubs.

Therefore, the completion of Phase One of the roll-out of the model of care, envisaged before the end of 2022, will result in operational Regional Fertility Hubs in each of the six Hospital Groups across the country.

Phase Two of the roll-out will see the introduction of tertiary infertility services, including IVF, in the public health system, but will not commence until such time as infertility services at secondary level have been developed across the country, required resources have been allocated and the AHR legislation commenced, which will allow for a robust regulatory framework to be put in place.

The Health (Assisted Human Reproduction) Bill 2022 regulating the area of AHR is a priority for the Minister for Health and the Government, and it is expected to be introduced to the Dáil and heard at Second Stage before the end of March.

While advanced AHR treatment, such as IVF, is not currently funded by the Irish public health service, a defined list of fertility medicines needed for fertility treatment is covered under the High Tech Arrangements administered by the HSE. Medicines covered by the High Tech Arrangements

must be prescribed by a consultant/specialist and authorised for supply to the client's nominated community pharmacy by the High Tech Hub managed by the Primary Care Reimbursement Service. The cost of the medicines is then covered, as appropriate, under the client's eligibility, i.e., Medical Card or Drugs Payment Scheme. Given the costs associated with certain fertility medicines, the Department understands that these schemes can have a material impact on the total cost of AHR treatment for individuals who avail of them.

In addition, there is other support available in that patients who access IVF, or other advanced AHR treatment, privately may claim tax relief on the costs involved under the tax relief for medical expenses scheme.

The underlying aim of the policy to provide a model of funding for AHR, within the broader AHR regulatory framework, is to improve accessibility to AHR treatments, while at the same time embedding safe and appropriate clinical practice and ensuring the cost-effective use of public resources.

I hope this information will be of assistance to you.

Yours sincerely,

Miriam Rooney,
Private Secretary to the Minister for Health