

KEY FINDINGS:

Progyny's LGBTQ+ Fertility and Family Building Survey

Family building for every couple or individual is a unique experience. It can be a complex process, where everything from where you live to whether or not you have insurance coverage can make or break a family building plan. For the LGBTQ+ community, the layers of complexity along the journey are often magnified as even fewer resources may be available when compared to hetero counterparts pursuing a family.

Inclusivity in family building lies at the heart of Progyny's mission. Since our inception, we've been helping LGBTQ+ families grow, but the unique family building challenges for this community are still often overlooked. In order to bring awareness to the needs of this growing community, Progyny surveyed 1,000 LGBTQ+ respondents about their family building journeys, coverage for family building options, and barriers encountered to share a fuller picture of this experience.

The results highlight some alarming statistics, but they also touch on key opportunities where organizations can close inequitable gaps in coverage through more meaningful support and make a life changing impact for their employees. Here's what we found.

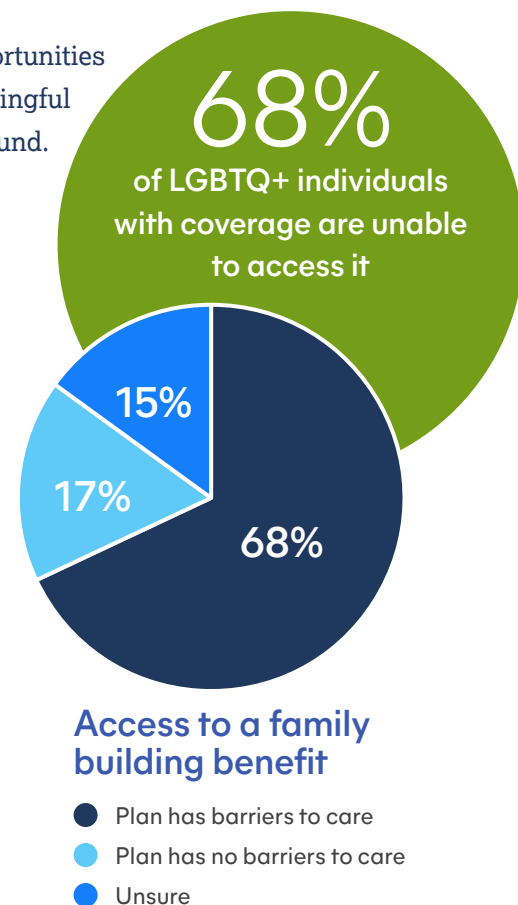
Even when offered employer-sponsored coverage, LGBTQ+ access is severely restricted

Our key finding? A stark reality:

Among those with coverage, 68% of LGBTQ+ individuals are unable to access it.

Let's break that down a bit. 61% of survey respondents who are planning to build a family said a lack of coverage prevented or delayed their family building journey, even as a recent Mercer Health & Benefits Survey¹ shows that most mid-to-large employers offer some level of fertility coverage.

While 40% of those surveyed have health insurance that covers fertility treatment and family building services, there's a catch: 68% of respondents whose employers provide this coverage said the plan requires a pre-certification or a medical diagnosis of infertility. Because these diagnoses typical-

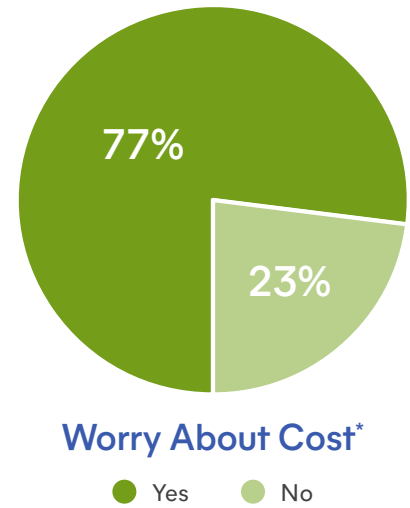


ly require a pre-determined period of heterosexual intercourse to qualify, that leaves both same-sex couples and single parents by choice out in the cold.

Desire to build families is high, but financial support is needed

More than half (51%) of respondents indicated they're actively in the process of expanding their families.

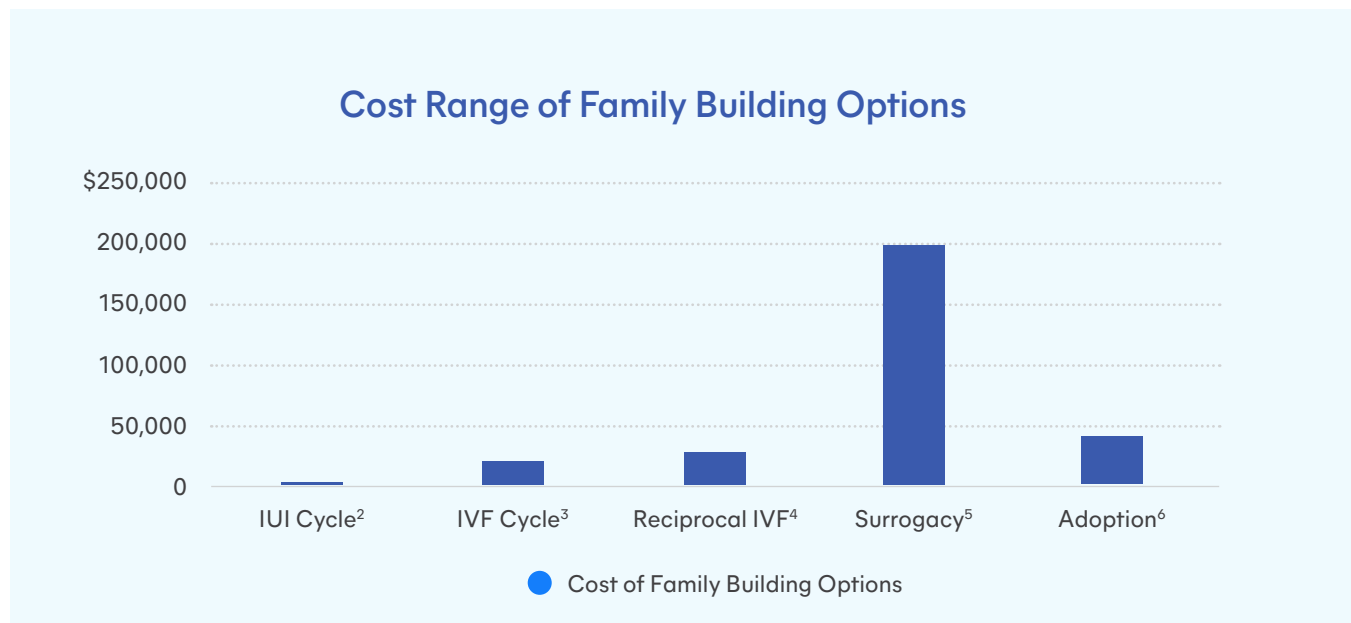
Of those trying to expand their families, 77% indicated they're worried about the cost of doing so. Because the cost for fertility treatment can easily reach \$15,000—\$30,000 per cycle, depending on required treatments, available clinics, and even geography, it's easy to see why cost is a concern. LGBTQ+ family builders often have additional needs and expenses, such as the purchase of donor tissue or costs associated with surrogacy.



Relying on savings and loans to grow families

To finance their family building efforts, respondents are relying on a combination of dipping into their savings (61%), taking out personal loans (27%), borrowing from friends or family (33%), applying for grants (11%) and using existing insurance coverage (42%). **Less than 10%** of those planning to expand their families have **said they will be able to rely on insurance coverage alone** to do so, underscoring the significant gap in accessibility and coverage for the LGBTQ+ community.

Because of the lack of access and restrictive policies, LGBTQ+ couples and individuals are taking on additional debt for services and care that may be covered for their heterosexual counterparts under the same plan.

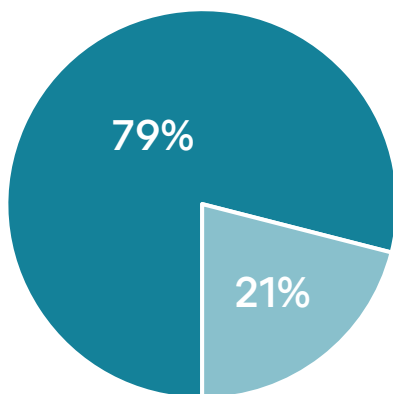
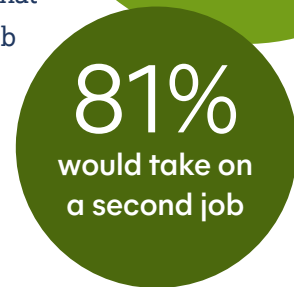


The opportunity for employers is high, and the ROI is even higher.

Employees are savvy about benefits and are looking for employers who can help them in every facet of their lives, including family building.

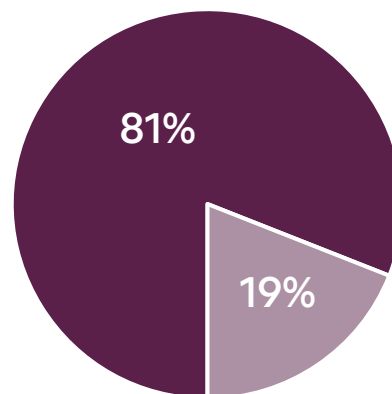
When considering employment, 62% of respondents said fertility and family building benefits were something they consider a priority. In fact, 79% of those planning to build a family would consider leaving their current employer for one that offers family building benefits. And 81% indicated they would take on a second job to lock down employer-sponsored family building care.

This highlights an opportunity for employers to take charge and make a difference. The ROI and impact of offering an equitable and inclusive family building benefit is high, especially for a community that needs better support to grow their families.



Would Leave Current Job for Better Family Building Benefits*

● Yes ● No



Would Take a Second Job for Family Building Benefits*

● Yes ● No

Tying it all together – what is this data telling us?

Progyny's LGBTQ+ Fertility and Family Building survey asked about available coverage, out-of-pocket cost factors, and the impact of these elements on LGBTQ+ family growth.

What we found is LGBTQ+ families want to grow, but coverage gaps in the services they need to realize these dreams and restrictive policies are driving them to delay their plans or cause them to make risky financial decisions. In short, despite a growing trend of employer-sponsored family building benefits, the LGBTQ+ community is still being left out.

We also found that this community is actively looking to their employers for help. They want to grow their families. They want to do it in a financially responsible way. They just need someone in their corner to drive that change.

For HR and benefit leaders: 3 actionable steps to make a difference

Data is great, but it's what we do with that data that can have a tremendous impact.

Here are 3 steps to take that can transform the benefit you offer today, drive talent, and support retention:

- 1. Look for and eliminate barriers to care.** Examine your current or prospective benefit for pre-certifications or diagnosis requirements. If they require a period of heterosexual intercourse without a pregnancy to qualify, the benefit is inequitable. Switching to or bringing on a more inclusive plan will remove that barrier and create access for your LGBTQ+ population.
- 2. Remove cost from the equation.** Employee financial health is a critical component of what makes a happy, well-adjusted workforce. Look for family building benefits that are comprehensive and cycle-based (rather than those with dollar caps, which don't provide equitable access to care). You have the power to make a difference in the financial health of your growing team.
- 3. Get specific about benefit inclusivity.** By increasing the reach of your benefit, you increase its effectiveness. Look for indicators that your benefit plan design provides specific considerations for the unique needs of your whole population. Eliminating barriers to care ensures that your benefit is considering social determinants of health and gives your team greater flexibility in how to approach their fertility care and family building options.



Examine
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Together, we can make the change

This survey reinforces something that has been core to Progyny's DNA – effective fertility and family building support is not a “one-size-fits-all” solution. With creativity, flexibility, and a broader view of the definition of family, we're confident we can craft a world where everyone has equal opportunity to build a family.

Have questions about fertility and family building benefit equity or want to learn more about how Progyny can help? [Get in touch](#). Together, we can do something incredible for your growing team.

Methodology

Progyny commissioned an online survey of ~1,000 adults across the United States. Through a mix of our data targeting parameters and screener questions, we focused on reaching individuals in the LGBTQ+ community, ages 23 to 50, to better understand the inequities in family building coverage faced by this group. Respondents were asked about their knowledge of family building coverage available to them through employer-sponsored programs as well as whether out-of-pocket costs were a factor in their family building planning.

1 Mercer. (2023). Health & Benefits Strategies for 2024 Survey Report. <https://www.mercer.com/en-us/insights/total-rewards/employee-benefits-strategy/2024-benefit-strategies-report/>

2 The cost of IUI. FertilityIQ. (n.d.). <https://www.fertilityiq.com/iui-or-artificial-insemination/the-cost-of-iui>

3 The cost of IVF. FertilityIQ. (n.d.). <https://www.fertilityiq.com/ivf-in-vitro-fertilization/costs-of-ivf>

4 Moniuszko, S. (2023, March 21). Reciprocal IVF: What to know, from how it works to how much it costs. CBS News.

5 How much does surrogacy cost?. Circle Surrogacy. (n.d.). <https://www.circlesurrogacy.com/parents/how-it-works/surrogacy-cost>

6 Average Adoption Costs in the United States. Family Equality. April 2019.

*of respondents planning to build a family

