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Westchester



**Family Planning and Fertility:
A Doctor's Perspective on
Health and Cost**

Whether shaped by societal expectations or internal reflections, many young women who hope to have children are familiar with the quiet, persistent reminder of their “biological clock.” In the context of fertility, this term refers to the natural decline in a woman’s reproductive capacity with age. Fertility typically begins to decrease around age 30 and drops more sharply after 35, and by 45, almost no one can conceive naturally.¹

This biological reality can feel daunting, especially today, as the timeline for motherhood continues to shift. In 1970, the average American woman had her first child at 21.² By 2023, that average had risen to 27.5.³ This change reflects broader social and cultural shifts. In 1965, only 40% of married women used birth control;⁴ today, nearly 65% of women use some form of contraception.⁵

There are many reasons why women are choosing to delay motherhood: pursuing higher education, building careers, achieving financial stability, or simply waiting to find the right partner. These choices reflect empowerment and autonomy, but they also intersect with the biological realities of fertility.

As a result, the demand for fertility treatments has grown, highlighting the tension between modern life choices and the natural limits of reproductive health.

In an interview with Dr. Rebecca Flyckt—a nationally known reproductive surgeon and Director of Reproductive Endocrinology and Infertility at the University Hospitals Fertility Center in Ohio—Dr. Flyckt shed light on the growing reliance on fertility treatments, along with some of the emotions that women and their partners experience when going through it. Flyckt also explains the financial impact that these costly treatments have on couples’ wallets and provides tips on how to plan for pregnancy and the potential roadblocks that may be faced when trying to conceive.



HOW MODERN FERTILITY TREATMENTS ARE CHANGING THE PARENTHOOD JOURNEY

As previously mentioned, the likelihood of achieving a viable pregnancy declines as women reach their mid-30s. With more women choosing to delay motherhood, the demand for medical assistance through fertility treatments has grown significantly. According to a 2023 Pew Research Center study, 42% of adults reported either using fertility treatments themselves or knowing someone who has—an increase of 9% since the 2018 survey.⁶

There are several fertility treatment options available, depending on the underlying cause of infertility. Below are some of the most common treatments, which may be used individually or in combination:

- **Fertility medications** are typically prescribed when a woman experiences irregular or absent ovulation. These medications stimulate the release of follicle-stimulating hormone (FSH) and luteinizing hormone (LH), both essential for egg production.⁷
- **Intrauterine insemination (IUI)** is often recommended for couples with unexplained infertility, women with mild endometriosis, or men with mild male factor infertility. In this procedure, healthy sperm are placed directly into the uterus around the time of ovulation.
- **Laparoscopic and hysteroscopic surgery** are minimally invasive procedures used to diagnose and treat conditions that may affect fertility, such as fibroids, polyps, endometriosis, scar tissue, and pelvic adhesions.
- **Assisted reproductive technology (ART)** encompasses all treatments involving the handling of eggs or embryos to facilitate pregnancy. The most common ART methods include in vitro fertilization (IVF) and oocyte cryopreservation (egg freezing).

These treatments offer hope to both partnered women and those planning to raise children on their own, according to Dr. Flyckt. In 2023, approximately 2.6% of all U.S. births were the result of IVF—a figure that continues to rise.⁸ For egg freezing, success rates vary based on the woman's age at the time of preservation and the viability of the embryos. Nevertheless, it was found that 70% of women who froze their eggs before age 38 and thawed at least 20 eggs at a later date, had a baby.⁹

Ultimately, these advancements in fertility care are helping more women realize their dreams of parenthood—regardless of age or reproductive challenges.

EMOTIONAL CONSIDERATIONS

With the growing demand for fertility treatments, wait times are getting longer. Dr. Flyckt shares that many of her patients wait six months to a year just for an initial consultation. For couples who have already been trying to conceive, this delay can feel especially painful.

General guidelines suggest that if you're under 35, not using birth control, and have been trying to conceive for 12 months, it's time to consult a fertility specialist. If you're 35 or older, that window shortens to six months. And for women 40 and above, who are considered high-risk, seeking specialist care is recommended even sooner.¹⁰

Even after women are able to see a doctor and begin treatment, conception doesn't always happen right away. It's common for patients to experience a wide range of emotions due to the uncertainty and the often lengthy process. Fertility treatments like IVF and IUI often require multiple cycles before achieving a successful pregnancy. Each cycle brings renewed hope, but after one or more unsuccessful attempts, feelings of anxiety, grief, anger, depression, stress, and burnout can emerge. These emotional responses can, in turn, disrupt hormone levels, potentially reducing the chances of implantation and further prolonging the treatment journey.

FINANCIAL CONSIDERATIONS

The repetitive nature of fertility treatments, combined with the high cost of specialized medications and procedures, often deters patients from pursuing care. In a 2015 survey of 213 female fertility patients, 83% reported being concerned or very concerned about the financial burden. These concerns are well-founded. A single cycle of IVF—excluding medications and testing—can cost an average of \$12,400. When fertility medications and genetic testing are included, the cost can range from \$15,000 to over \$30,000 per cycle.¹²

Unsurprisingly, the same survey found that 70% of respondents who underwent IVF went into debt. This is largely due to limited or nonexistent insurance coverage. Many patients either lack health insurance altogether or have plans that only partially cover, or completely exclude fertility treatments. While there is no federal mandate requiring private insurers to cover infertility care, some states have enacted laws that require coverage. These jurisdictions include Colorado, Connecticut, Delaware, Hawaii, Illinois, Kentucky, Louisiana, Maryland, Massachusetts, Montana, New Hampshire, New Jersey, New York, Oklahoma, Rhode Island, Texas, Utah, West Virginia, as well as the District of Columbia.

It's important to note that coverage in these states can vary based on your specific insurance plan and medical circumstances. Patients are strongly encouraged to contact their health insurance provider to fully understand the scope of their fertility treatment coverage.

HOW TO PLAN AHEAD

If you're managing reproductive health conditions such as fibroids, endometriosis, polycystic ovary syndrome (PCOS), an overactive thyroid, or if you're planning to have children later in life, it's a good idea to work with your doctor on a fertility preservation plan. Your doctor can assess your age, medical history, and reproductive health to help you understand your chances of conceiving, even if you're not ready to start a family yet. They may recommend a blood test, such as the anti-Müllerian hormone (AMH) test, which estimates your ovarian reserve, or the number of eggs you have remaining. Based on the results, your doctor can guide you on the best next steps for preserving your fertility.

If you're in your 20s or early 30s and plan to have children in the future, you might also consider elective fertility preservation, such as freezing your eggs or embryos. One of the biggest factors affecting fertility is time. While fertilization after egg freezing isn't guaranteed, starting the process earlier typically results in a higher number of eggs retrieved, which can improve your chances of a successful pregnancy later on.

WHERE TO FIND SUPPORT

Infertility is a deeply personal and emotional experience, and it's important that women and their partners feel supported throughout the journey. Your feelings are valid and should never be something you feel the need to hide. A strong support system—whether it's family, friends, or trusted individuals—can make a meaningful difference in helping you cope emotionally.

Many women also find comfort and solidarity in connecting with others who are going through similar experiences. Online forums and social media groups can offer a sense of community. Dr. Flyckt recommends exploring RESOLVE: The National Infertility Association, which provides educational resources, as well as access to both in-person and virtual support groups. They also offer professionally led groups facilitated by licensed mental health professionals. For more information about RESOLVE and their mission, visit [their website](#).



YOU'RE NOT ALONE – WE'RE HERE TO HELP

Fertility treatment can be emotionally, physically, mentally, and financially demanding—for both women and their partners. That's why preparation is so important. If you have concerns about affording fertility medications or IVF, please don't hesitate to reach out. We're here to help you explore your options and adjust your financial plan, so you feel confident and supported every step of the way.

From fertility grants and scholarships to loans, employer benefits, and payment plans, we can help you navigate the resources available. We can also assist with setting up a dedicated savings account specifically for your treatment, so you're financially prepared when the time comes.

We also encourage you to find a doctor and healthcare facility you trust—one with a strong track record of success. Resources like the [Centers for Disease Control \(CDC\)](#) and the [Society for Assisted Reproductive Technology \(SART\)](#) can help you identify reputable clinics in your area and verify lab accreditations.

By combining the guidance of trusted medical professionals with our financial support, we hope to be a steady partner in your fertility journey. You don't have to go through this alone—we're here to walk alongside you.



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