

November 10, 2025

The Honorable Roger Wicker  
Chairman  
Senate Armed Services Committee  
Washington, DC 20510

The Honorable Jack Reed  
Ranking Member  
Senate Armed Services Committee  
Washington, DC 20510

The Honorable Mike Rogers  
Chairman  
House Armed Services Committee  
Washington, DC 20515

The Honorable Adam Smith  
Ranking Member  
House Armed Services Committee  
Washington, DC 20515

Dear Chairmen and Ranking Members:

We are national Military and Veteran Service Organizations committed to enhancing the quality of life for servicemembers and their families. We urge you to support provisions in both the House (Sec. 703) and Senate (Sec. 705) versions of the Fiscal Year 2026 National Defense Authorization Act (NDAA) establishing TRICARE coverage for in vitro fertilization (IVF). If enacted, these provisions would ensure that military families receive the same access to fertility treatments as Members of Congress and their staff.

TRICARE has failed to keep pace with evolving coverage policy related to fertility treatments. As of January 2025, the health insurance plans available to Members of Congress are required by law (D.C. Law 25-49) to include coverage for diagnosis and treatment of infertility, including IVF. The Federal Employee Health Benefits (FEHB) Program mandates coverage for some fertility care and multiple plans voluntarily offer comprehensive coverage of IVF, widening the gap between military family and federal employee IVF benefits.

Our nation's military families earn their health care benefits through immense service and sacrifice and members of the military face unique challenges when trying to start or grow a family, including recurrent deployments and separations, frequent moves to new duty stations, and other military life stressors. Members of the military often perform dangerous jobs and face potential toxic exposures, which can negatively impact fertility. Military families deserve to have no less than the same family-building tools as Members of Congress, congressional staff, and federal employees. This year's NDAA represents a critical opportunity to close this parity gap.

While we appreciate that Congress has recognized the challenges that many service members face in building their families and are grateful for the inclusion of provisions expanding fertility coverage in both the House and Senate versions of the NDAA, we are concerned that both provisions specifically exclude retirees from this expanded coverage. It is important to note that many military retirees are in their late thirties or early forties and may have deferred starting a family due to the demands of their military career. In addition, the military health benefit should be consistent and uniform across all categories of beneficiaries. We ask Congress to expand

coverage of reproductive health care to the entire beneficiary population including the Coast Guard, National Oceanic and Atmospheric Administration, and the U.S. Public Health Service.

Ensuring that service members have access to essential health care to build their families is vital to retaining the skilled force we need to defend our nation. Thank you for your efforts to extend this important benefit to military families.

With Respect,

Air Force Sergeants Association (AFSA)

Building Military Families Network

Commissioned Officers Association of the USPHS

HealthyWomen

Jewish War Veterans of the USA

Maternal Mental Health Leadership Alliance

Military Family Advisory Network (MFAN)

Military Officers Association of America

Minority Veterans of America

Modern Military Association of America

National Military Family Association

Paralyzed Veterans of America (PVA)

Service Women's Action Network (SWAN)

The American Legion

United States Army Warrant Officers Association