



# FAMILY FORMING:

Building Inclusive Programs for Better Outcomes and Value

JULY 2025

In Partnership with:

CARROT

MAVEN



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# THE EVOLUTION OF FAMILY FORMING BENEFITS: ADDRESSING CRITICAL GAPS IN PREGNANCY, BIRTHING, AND FERTILITY CARE

## Introduction

The landscape of employee benefits is undergoing a fundamental transformation as employers increasingly recognize the strategic importance of comprehensive family forming support. As healthcare costs continue to escalate and employee expectations evolve, many organizations are reexamining their approach to pregnancy, birthing, and fertility benefits. This shift represents more than a mere expansion of traditional health offerings; it reflects a growing understanding that family forming support directly reflects company culture and how much employees perceive their employer cares about them, extending to retention, productivity, and organizational competitiveness in today’s talent-driven economy.

The urgency of this evolution becomes apparent when examining the current state of reproductive healthcare in the United States. Overall, American families face both high costs and suboptimal outcomes throughout their family forming journey. This disconnect between investment and results has created both a crisis of care and an opportunity for innovative employers to make an impact.

### The State of Pregnancy and Birthing Care in America

The United States presents a troubling disconnect in maternal healthcare: it ranks among the highest globally in per-capita spending on pregnancy and birthing care, yet consistently underperforms compared to other developed nations across key maternal and infant health outcomes. This gap signals fundamental inefficiencies in care delivery that extend far beyond individual clinical encounters to encompass systemic issues of access, coordination, and quality measurement.

Maternal mortality rates in the United States have fluctuated significantly over recent years, with rates falling from 32.9 maternal deaths per 100,000 live births in 2021 to 22.3 per 100,000 in 2022, then declining further to 18.6 deaths per 100,000 live births in 2023, before rising again to 19 deaths per 100,000 live births in 2024—rates that still significantly exceed those of comparable developed nations.<sup>1</sup> This upward trajectory stands in stark contrast to global trends, where most peer countries have achieved consistent reductions in maternal mortality. The disparities become even more pronounced when examined through demographic lenses, with Black women experiencing maternal mortality rates nearly three times higher than their white counterparts, highlighting deep-seated inequities in care access and quality.<sup>2</sup> These statistics underscore the urgent need for systematic improvements in maternal care delivery.

<sup>1</sup> CDC (2025)

<sup>2</sup> CDC (2025)

<sup>3</sup> Peterson-KFF (2022)

<sup>4</sup> CDC (2024)

<sup>5</sup> Forbes (2023)

The financial burden associated with pregnancy and childbirth has similarly escalated, with average costs for uncomplicated vaginal deliveries now nearing \$15,000 and cesarean sections approaching \$30,000 before insurance adjustments.<sup>3</sup> These figures represent substantial increases over the past decade, outpacing general healthcare inflation and creating significant financial stress for families, even those with comprehensive insurance coverage. The unpredictability of these costs, combined with complex insurance structures and surprise billing practices, compounds the financial anxiety experienced by expectant families during an already vulnerable period.

Beyond immediate delivery costs, the broader pregnancy care continuum presents additional financial and logistical challenges. Prenatal care, while theoretically covered under most insurance plans, often involves substantial out-of-pocket expenses through copayments, deductibles, and services deemed “non-essential” by insurance providers. Postpartum care, critically important for both maternal and infant health outcomes, frequently receives inadequate attention and coverage, contributing to higher rates of postpartum complications and maternal mental health challenges.

### The Fertility Care Crisis

Infertility affects approximately 15.4% of women and 12.8% of men ages 25–49 in the United States, representing millions of individuals whose family forming journeys require specialized medical intervention.<sup>4</sup> Despite the prevalence of fertility challenges, access to comprehensive fertility care remains severely limited by insurance coverage gaps, geographic accessibility issues, and the high costs associated with assisted reproductive technologies.

The financial barriers to fertility treatment are particularly acute. A single cycle of in vitro fertilization (IVF) typically costs between \$15,000 and \$20,000, with many patients requiring multiple cycles to achieve pregnancy.<sup>5</sup> Comprehensive fertility evaluations, diagnostic procedures, and preliminary treatments add additional thousands of dollars to the total investment required. For most American families, these costs represent prohibitive barriers to care, leading to delayed treatment, incomplete treatment protocols, or the abandonment of fertility treatment altogether.

When designing fertility benefits, employers must consider how to structure coverage for various treatment options and support services. Fertility treatments span a range of interventions, from lifestyle modifications and ovulation induction to intrauterine insemination and IVF, each with different cost profiles and clinical considerations. Patients experience infertility differently and may have varying clinical needs. In some cases, it may be clinically appropriate to start with a more intensive treatment like IVF, while in others, pursuing IUI first may be appropriate. Coverage decisions involve balancing multiple factors including clinical appropriateness, cost considerations, physical and emotional impacts on patients,

and alignment with established medical guidelines. Comprehensive fertility benefits may include preconception programs, wraparound coaching support, and flexible plan designs that enable healthcare providers to develop individualized, evidence-based care plans. Many employees lack knowledge about health optimization strategies that could help them achieve a healthy pregnancy, making educational and coaching components potentially valuable additions to fertility coverage. The design of fertility benefits requires careful consideration of how different coverage structures and treatment options can work together to support both clinical effectiveness and financial sustainability for employers and patients alike.

Insurance coverage for fertility services varies dramatically across states and employer plans, creating a patchwork system that leaves many patients without meaningful support. While some states have enacted insurance mandates requiring coverage of fertility treatments, these mandates often contain significant limitations regarding eligible treatments, provider networks, and lifetime benefit caps. The result is a system where access to fertility care depends heavily on geographic location, employer benefits design, and individual financial resources rather than medical necessity.

The geographic distribution of fertility specialists and treatment centers further compounds accessibility challenges. Rural and underserved communities often lack nearby fertility specialists, requiring patients to travel significant distances for routine care and procedures. This geographic barrier creates additional costs in terms of travel, accommodation, and time away from work, making fertility treatment even more challenging for families with limited resources or inflexible employment arrangements.

Access to family forming care is further complicated for same-sex couples and single-intending parents, who face additional barriers beyond traditional fertility coverage limitations. Same-sex couples often must demonstrate “medical necessity” through multiple failed intrauterine insemination attempts before accessing more advanced treatments, despite their fertility challenges being structural rather than medical. Single-intending parents frequently encounter insurance policies that require proof of partner infertility, effectively excluding them from coverage for donor-assisted reproductive technologies. These populations also face higher out-of-pocket costs due to the need for donor gametes and additional medical procedures, with limited insurance support for these essential components of their family forming journey.

### Critical Clinical Metrics and Their Significance

Understanding the quality and effectiveness of family forming care requires careful attention to specific clinical metrics that serve as indicators of both individual outcomes and system-wide performance. These metrics vary widely between clinicians but provide essential benchmarks which are necessary for evaluating provider quality, treatment protocols, and overall care effectiveness.

Cesarean section rates represent one of the most widely tracked and clinically significant metrics in pregnancy care. While cesarean deliveries are essential life-saving procedures in appropriate clinical circumstances, rates significantly above the World Health Organization’s recommended range of 10-15% often indicate overutilization that can increase maternal and infant risks while driving up costs.<sup>6</sup> Current U.S. cesarean rates hover around 32%, suggesting substantial opportunities for improvement through better care protocols, provider education, and patient-centered decision making.<sup>7</sup>

The implications of elevated cesarean rates extend beyond immediate delivery outcomes. Cesarean deliveries are associated with longer recovery periods, increased risk of complications in subsequent pregnancies, and higher healthcare costs. For employers, this translates to extended disability leave usage, higher insurance claims, and potentially reduced employee productivity during recovery periods. Understanding and addressing the factors contributing to high cesarean rates therefore represents both a clinical quality initiative and a strategic business consideration.

Neonatal intensive care unit (NICU) admission rates serve as another critical indicator of both maternal and infant health outcomes. The percentage of infants admitted to the NICU in the United States is approximately 10%.<sup>8</sup> High NICU admission rates within a provider network may signal issues with prenatal care quality, premature delivery management, or inappropriate risk stratification. For employers, NICU admissions represent substantial cost drivers, with NICU stays costing at least \$3,000 per day and potentially extending for weeks or months.<sup>9</sup>

In fertility care, multiple key metrics provide insight into program quality and effectiveness. IVF live birth rates, which measure the percentage of embryo transfer cycles resulting in live births, serve as the gold standard for treatment success. Live birth rates vary significantly by age, with women under 35 achieving live birth rates of approximately 55.6% per cycle, while rates decline substantially with advancing maternal age. IVF pregnancy rates, which measure biochemical pregnancies per cycle, typically exceed live birth rates by 10-15%, reflecting pregnancy losses between initial implantation and delivery.<sup>10</sup>

Single embryo transfer (SET) rates serve as a crucial quality indicator that reflects both clinical sophistication and patient safety priorities. The transfer of multiple embryos during IVF procedures increases the likelihood of multiple pregnancies, which are associated with significantly higher risks for both mothers and infants, including preterm birth, low birth weight, and pregnancy complications. High-quality fertility programs typically maintain SET rates above 80% for appropriate patient populations, demonstrating their commitment to optimizing outcomes while minimizing risks. IVF preterm birth rates and IVF multiple birth rates serve as important safety metrics, with high-quality programs typically achieving preterm birth rates below 15% and multiple birth rates below 5% through appropriate SET protocols.

Mental health considerations throughout the family forming journey represent a critical but often overlooked dimension of care quality. Individuals undergoing fertility treatment experience depression and anxiety rates comparable to those diagnosed with cancer or heart disease.<sup>11</sup> The stress of

<sup>6</sup> WHO (2015)  
<sup>7</sup> CDC (2024)  
<sup>8</sup> CDC (2025)  
<sup>9</sup> Resolve (2023)  
<sup>10</sup> SART (2025)  
<sup>11</sup> Fertility and Sterility (2015)



pregnancy loss, treatment failures, and financial burden creates substantial psychological distress that can persist throughout the family forming process and beyond. Comprehensive programs increasingly recognize the need for integrated mental health support, including counseling services, support groups, and stress reduction interventions.

Return-to-work rates following pregnancy and fertility treatment represent both clinical and economic indicators of program effectiveness. Extended leave periods, delayed return-to-work, or reduced productivity upon return signal potential gaps in care coordination, recovery support, or workplace accommodation. Progressive employers and vendors are implementing comprehensive return-to-work programs that include lactation support, flexible scheduling, mental health resources, and care coordination services to facilitate smooth transitions back to productive employment. These programs demonstrate measurable improvements in employee retention, job satisfaction, and overall healthcare utilization patterns.

### The Global Context for Family Forming Benefits

The challenges facing family forming benefits in the United States become even more pronounced when viewed in an international context. Multinational employers must navigate a complex web of local laws, regulations, and cultural norms that vary dramatically across jurisdictions, creating significant operational and strategic challenges for benefits leaders seeking to provide consistent, equitable coverage across diverse markets.

International fertility treatment coverage similarly highlights the distinctive challenges of the US market. Many European countries integrate fertility treatments into their national health systems, while Japan initiated insurance coverage for fertility treatments in 2022, representing a significant policy shift.<sup>12</sup> Cost variations are equally striking, with IVF treatments in India ranging from approximately \$3,600-\$5,000 USD per cycle compared to \$15,000-\$20,000 in the United States.<sup>13</sup>

The regulatory landscape for family forming benefits varies significantly across countries, creating substantial compliance challenges for multinational employers. Different jurisdictions maintain distinct requirements for benefit mandates, provider licensing, treatment protocols, and patient privacy protections. For example, some countries restrict certain fertility treatments based on marital status or sexual orientation, while others mandate comprehensive coverage regardless of family structure. Data privacy regulations, particularly under frameworks like Europe's GDPR, impose additional requirements for how sensitive reproductive health information is collected, stored, and shared across borders.

Cultural and religious considerations add another layer of complexity to international family forming benefits. Attitudes toward fertility treatments, pregnancy termination, genetic testing, and non-

traditional family structures vary dramatically across cultures and can significantly impact both benefit design and employee utilization patterns. What constitutes appropriate care coordination and support services also differs based on local healthcare delivery models, professional licensing requirements, and cultural expectations around patient autonomy and family involvement in medical decisions. Understanding local healthcare infrastructure and provider networks presents ongoing challenges for employers and their vendor partners. Provider qualification standards, treatment availability, clinic accreditation processes, and quality metrics vary substantially across markets. Rural and urban disparities in access to specialized care exist globally but manifest differently depending on each country's healthcare system structure and geographic distribution of specialists. Additionally, language barriers and the need for culturally competent care coordination require significant investment in local expertise and support systems.

For multinational employers, these differences create complex strategic considerations. Companies expanding their benefits internationally must navigate varying regulatory requirements, cultural attitudes toward fertility treatments, and dramatically different cost structures. US companies entering markets with government-funded fertility benefits may find opportunities to differentiate through premium services or reduced wait times, while international companies establishing US operations must prepare for significantly higher benefit costs and employee expectations shaped by more limited baseline coverage.

### The Business Case for Comprehensive Family Forming Benefits

The intersection of poor clinical outcomes, high costs, and significant employee demand creates a compelling business case for innovative approaches to family forming benefits. Traditional benefits models, which often treat pregnancy and fertility care as discrete medical events rather than comprehensive life experiences, fail to address the complex needs of modern families while missing opportunities for both cost management and employee engagement. In addition to promoting health outcomes, family forming benefits are an important tool to attract and retain talent.<sup>14</sup>

Furthermore, the preventive and coordinated care models emerging in family forming benefits demonstrate potential for significant cost savings compared to traditional fee-for-service approaches.

By emphasizing evidence-based care protocols, provider quality metrics, and patient education and support, innovative benefits programs can reduce unnecessary interventions, improve outcomes, and create more predictable cost structures for employers.

<sup>12</sup> Cureus (2024)

<sup>13</sup> Maven Clinic (2023)

<sup>14</sup> Mercer (2024)

## Future Directions

The current state of family forming care in the United States presents both significant challenges and opportunities for innovative employers. The combination of high costs, suboptimal outcomes, and substantial employee demand creates a unique environment where strategic benefits investments can yield meaningful returns in terms of employee satisfaction, retention, and overall healthcare cost management.

As benefits leaders consider their options in this evolving landscape, the focus must extend beyond simple coverage expansion to encompass comprehensive approaches that address quality, accessibility, and coordination of care.

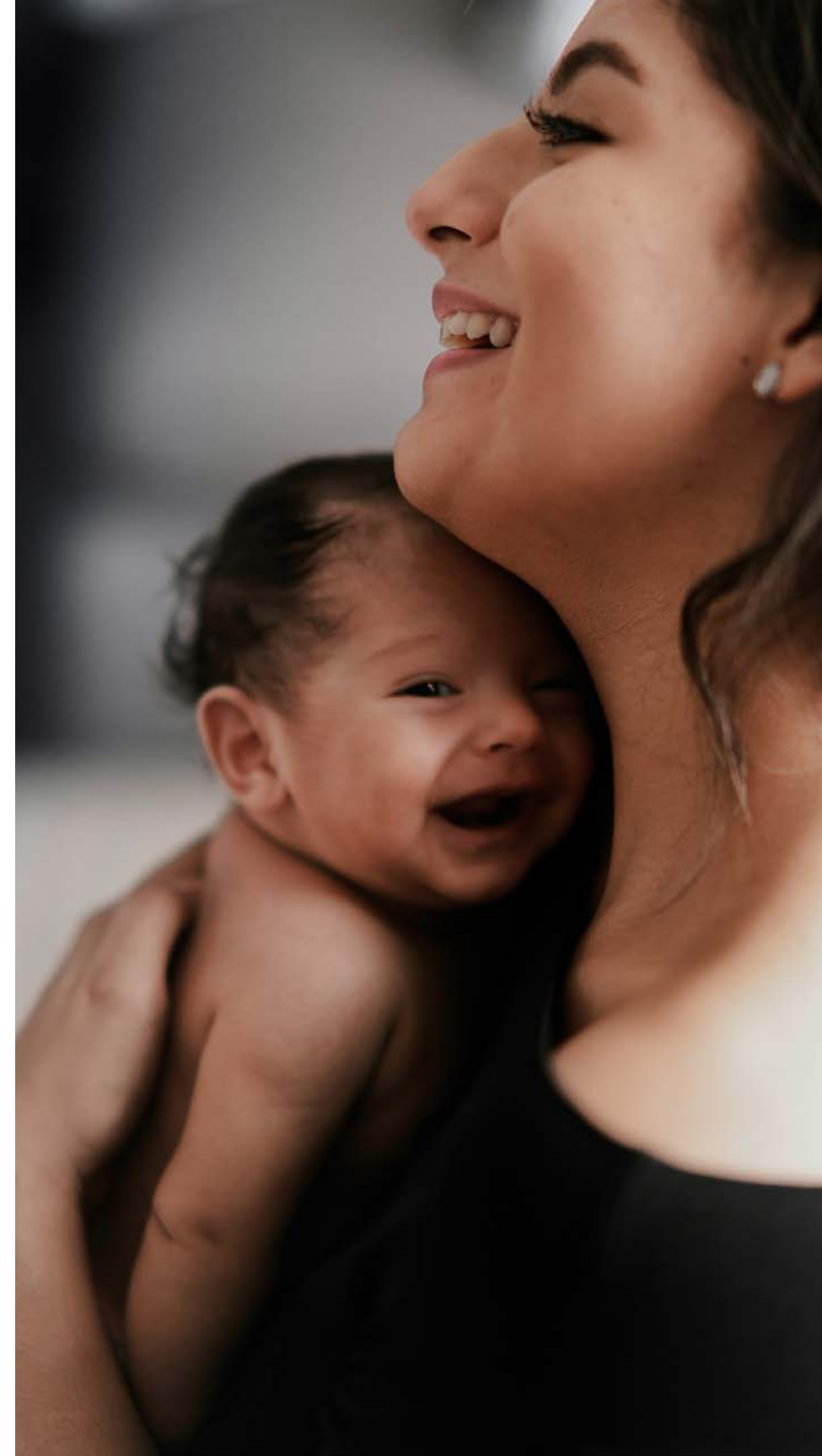
The following analysis examines specific approaches being implemented by leading employers and innovative vendors, providing practical insights for benefits leaders seeking to develop comprehensive family forming strategies that serve both employee needs and organizational objectives.

## Resources in this Report

This report presents our findings regarding current employer approaches to family forming benefits. The members of our Employer Benefits Accelerator community are well-recognized as forward-thinking leaders in the employer health and wellness benefits space and have shared their experiences, concerns, and solutions via an extensive survey supplemented by interviews. Our members also often work towards their goals with vendor partners. Three leading vendors in this space—Carrot, Maven, and Progyny—partnered with us to provide case studies and supplemental information on their program offerings to help enrich your understanding of key solutions and how employers have deployed them. We also provide a vendor landscape overview, identifying many of the leading providers of innovative solutions, as well as a set of questions to consider if you are planning to evaluate these vendors for your own company. This report should help employers understand what best-in-class outcomes look like and where they can focus their efforts for improvement.



# EMPLOYER BENEFITS ACCELERATOR INSIGHTS



# NAVIGATING FAMILY FORMING BENEFITS IN AN ERA OF CHANGE

## Member Survey and Interview Findings

World 50 Employer Benefits Accelerator surveyed 35 of our members, who are leaders in the employer health and benefits space, to understand how they measure outcomes and ROI from their family forming benefits, as well as the biggest challenges they are addressing.

### Cost Challenges Dominate for Organizations

The survey reveals a striking contrast between what respondents identify as their primary organizational challenges with family forming benefits versus what they perceive as the top issues affecting their employee populations (Figure 1).

**Organizational Challenge Focus:** From the perspective of our benefits leader respondents, cost concerns dominate, with 54% citing high maternity care prices and 34% identifying fertility care prices as their biggest program challenges. This reflects the direct financial pressure on organizational budgets and vendor negotiations, in line with Employer Benefits Accelerator members’ current focus on cost containment. Furthermore, from an organizational perspective, these high spend categories pose a greater threat than subpar clinical outcomes, which only 20% of respondents highlighted as a top challenge.

**Employee Experience Reality:** However, when these same respondents assess employee challenges, the picture shifts dramatically. Birthing outcomes emerge as the primary concern at 44%, while out-of-pocket costs for infertility treatment are a lesser but still significant concern (26%). Similarly, pregnancy and postpartum health is a major pain point for birthing families, with 24% of respondents calling out this issue. Out-of-pocket costs of pregnancy and childbirth are generally perceived as manageable for birthing families, with only 6% of respondents highlighting this as a top challenge.

**What This Means:** Several factors could be at play with this disconnect:

- **Cost Absorption Success:** Organizations may be effectively shielding employees from direct financial impact through comprehensive coverage, making clinical outcomes the more visible employee concern.
- **Available Levers:** While self-insured employers can adjust their point solution offerings and plan design fairly readily, and therefore mitigate employee out-of-pocket costs, impacting the poor care quality and patient experience entrenched in the U.S. healthcare system is a much thornier issue.
- **Engagement Gap:** Nearly 90% of respondents offer at least one family forming vendor to their population, with mature, comprehensive solutions dominating the space. From an employer’s perspective, this is a meaningful step towards improving outcomes and reducing out-of-pocket costs for the employee, but only for those who engage with the benefit.
- **Different Visibility:** Benefits leaders have direct insight into total program costs but may have less visibility into employee clinical experiences and outcome satisfaction.

What are the biggest challenges you're facing within your benefits program with family forming?

High prices for maternity care (including NICU admissions)	54%
High prices for infertility care	34%
High utilization of infertility care	0%
Subpar clinical outcomes	20%
Lack of engagement with existing benefits	3%
Lack of leadership buy-in for offering family forming benefits	6%
Administrative complexity of managing family forming point solutions	9%
Ensuring equitable care across global employee populations	17%
Other	14%
Not Sure	0%
N/A, we don't have any major challenges with family forming benefits	14%

What do you feel are the top issues affecting birthing families in your population currently?

Out-of-pocket cost of pregnancy care and childbirth	6%
Access to pregnancy and birthing care (e.g. OB/GYNs, midwives, doulas, birthing centers)	3%
Pregnancy and postpartum health (e.g. preeclampsia, gestational diabetes)	24%
Birthing outcomes (e.g. NICU stays, C-section rates)	44%
Mental health challenges during infertility, pregnancy, and/or postpartum	18%
Out-of-pocket cost of infertility treatment	26%
Access to infertility treatment providers	12%
Other	15%
Not Sure	9%
N/A, no major issues in my population	6%

Figure 1. Organizational vs. Employee Challenges with Family Forming; n = 35 and 34, respectively. Respondents selected up to two choices.



**Finding the Best Path to Parenthood:** Employees who are fortunate enough to have access to multiple paths to parenthood, ranging from fertility treatment to adoption to surrogacy, often lack impartial guidance about finding the path to parenthood that is truly the best fit for them. Employers recognize that this is an incredibly personal decision that ideally accounts for the individual’s reproductive health and desired timeline. Matt Deegan, Health and Welfare Benefits Analyst at State Farm, described this area of opportunity: “I would like to see more personalized, unbiased guidance to support members about the different paths to family forming, which is challenging because it’s such a personal decision filled with emotion for individuals. Members often go down a path, say in-vitro fertilization, and a reproductive endocrinologist will help them down that path, because that is their specialty, but there’s a gap in helping the member weigh their options to determine the most effective path forward to forming a family.” Addressing this gap more effectively could help employers address cost concerns while improving the employee experience by helping them achieve their family forming goals more effectively.

ROI Measurement: A Multi-Dimensional Approach

The survey respondents track a variety of quantitative and qualitative metrics to measure the impact of their investment in family forming benefits.

**Key Finding:** Clinical outcomes lead measurement approaches at 57%, followed closely by utilization rates (50%) and qualitative employee feedback (40%). Many employers look to their vendor partners to help them bend the cost curve, as reflected by 40% of respondents tracking pharmacy cost savings and 57% monitoring medical cost savings.

**What This Means:** Organizations are developing comprehensive measurement frameworks that balance clinical success, employee experience, and financial impact. The high emphasis on qualitative feedback (40%) indicates recognition that quantitative metrics alone don’t capture program value, particularly considering that family forming benefits have a greater focus on employee experience in comparison to other categories. Courtney Mun, Benefits Program Partner at Netflix, spoke to her team’s rationale behind offering a family forming point solution: “We primarily offer this benefit to give employees choice and options in an inclusive manner, versus driving towards a specific family size or other quantified outcome. But, this adds some challenges for specifically measuring outcomes and impact.” She also highlighted the impact of qualitative employee feedback and organic, word-of-mouth promotion between employees: “We see employees supporting each other in this space, more so than other benefits.”

Measuring Health Outcomes

Employers and their vendors are increasingly sophisticated in their approach to tracking specific health metrics, recognizing that granular outcome data drives both clinical improvements and cost management strategies.

**Key Finding:** Three quarters of respondents indicate that they track at least one pregnancy/childbirth outcome metric, while just over half do the same for fertility outcomes. Most employers track NICU admissions (68%) and C-section rates (54%), both of which are major cost drivers in the family forming

space. Employers track a broader set of fertility outcomes, including live birth rate per fertility cycle (41%) and number of cycles completed (37%).

**What This Means:** Benefits teams are often small, with limited bandwidth for tracking and analyzing outcomes. Access to the data itself can also be an immediate challenge. Many employers rely on their point solutions, carriers, and consultants for these functions, alleviating pressure on the team but potentially leaving other parties to decide when, how, and what to measure. The focus on high-cost, high-impact metrics like NICU admissions and C-section rates suggests organizations are prioritizing outcomes that directly correlate with both clinical quality and financial performance.

Do you currently provide access to doula services?

Yes, virtually	15%
Yes, via an in-person network	12%
Yes, via an in-person network AND virtually	12%
No, but we are interested in providing access	18%
No, this isn't a priority right now	36%
Not sure	6%

Figure 2. Access to Doula Services; n = 33.

Growing Interest in Doula Care

The emergence of doula care as a mainstream benefit reflects growing recognition of the gap between traditional medical care and comprehensive birthing support.

**Key Finding:** 39% of respondents provide access to doula care virtually, in-person, or both. Another 18% of respondents are interested in providing access. Most (53%) of those who provide or hope to provide access are targeting improvements in health outcomes.

**What This Means:** The strong interest in doula care represents a shift toward more holistic, person-centered approaches to family forming benefits. Organizations are recognizing that clinical outcomes and employee experience are enhanced when birthing individuals receive continuous, personalized support beyond traditional medical interventions. This trend aligns with growing evidence that doula support can reduce complications, improve satisfaction, and potentially lower costs through better birth outcomes.

**Future Trends:** Organizations with a specific focus on improving health outcomes, supporting the employee experience, or both will likely continue adding doula care to their family forming portfolio, aligning on best practices for covered use cases and providers. Employers are also demanding greater standardization of doula care. Courtney Mun, Benefits Program Partner at Netflix, highlighted some of

these gaps: “Right now, the doula industry is mostly unstandardized. Doulas rarely submit CPT codes to a billing department like midwives, so price comparisons are challenging, and employers are forced to determine what services should or should not be eligible for their program.”

### The Segmentation Opportunity

One of the most striking findings relates to data segmentation practices, with 78% of organizations not segmenting their fertility or pregnancy data by demographic factors such as age, gender identity, racial/ethnic background, sexual orientation, or income.

**Key Finding:** The vast majority of organizations are taking a population-level approach to measurement rather than examining differential outcomes across demographic groups. This represents a significant untapped opportunity for program optimization and equity assessment.

**What This Means:** The limited use of demographic segmentation may indicate missed opportunities to address known disparities in reproductive healthcare. Research consistently shows differential outcomes across racial, ethnic, and socioeconomic lines, suggesting that aggregate measurement could obscure important program improvement opportunities.

**Future Direction:** Individuals from diverse backgrounds often face worse outcomes with pregnancy and childbirth, and these disparities persist even for higher-income individuals and those with employer-sponsored insurance. Access issues are also persistent for diverse individuals. Employers face logistical and privacy challenges with gathering these data, but they are also uniquely positioned to make a real difference in these unacceptable disparities.

# CARROT

Carrot is a leading global fertility, family-building, and lifelong hormonal healthcare platform providing care for everyone, everywhere. Trusted by more than a thousand multinational employers, health plans, and health systems, Carrot's comprehensive clinical program delivers industry-leading cost savings for employers and award-winning experiences for millions of people. From maternity through menopause and pre-pregnancy through parenting, Carrot is dedicated to expanding access and improving outcomes.

*Content for this section provided by Carrot.*



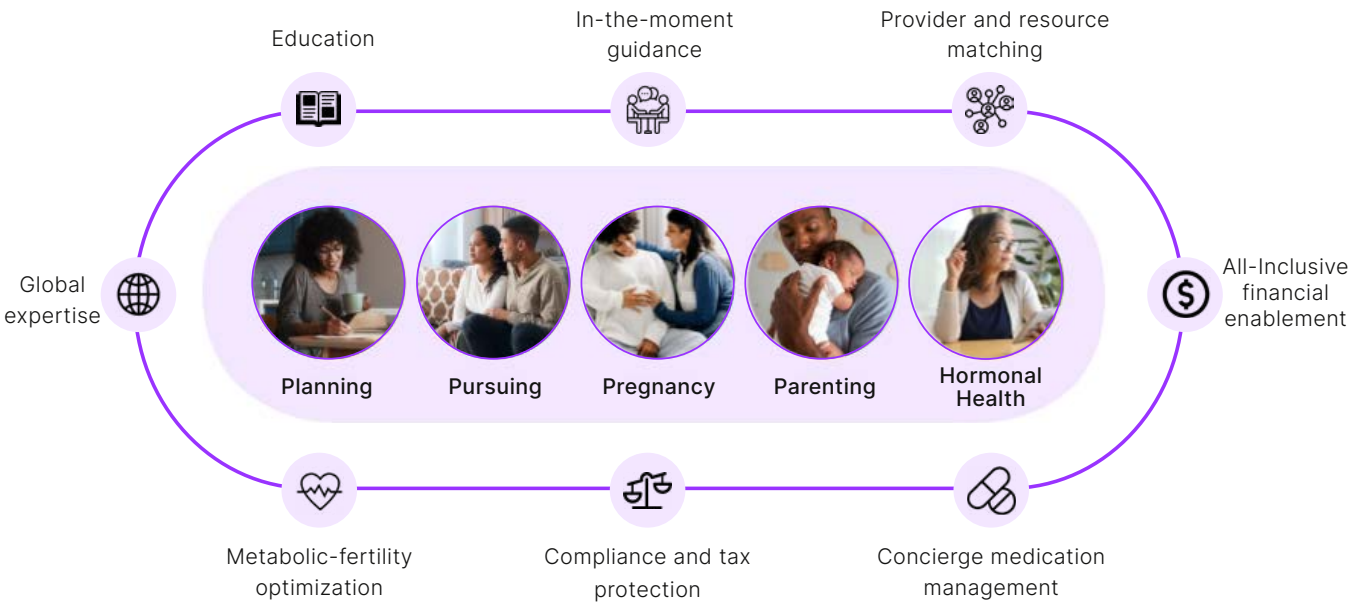
## High-touch member experience:

Carrot offers comprehensive support for fertility, family-building, and hormonal healthcare, accessible to members through a user-friendly digital platform and mobile app. From the outset, all members benefit from unlimited access to their dedicated Care Team, insightful articles within the Carrot Academy, a personalized digital benefit guide, and a range of other valuable resources.

For members seeking more in-depth and ongoing support, Carrot provides a personalized Carrot Plan. This dynamic, step-by-step guide directs individuals to relevant resources and suggests tailored next steps based on their unique journey and health goals. To request a Carrot Plan, members complete a thorough intake questionnaire. This process gathers essential information regarding their timeline, goals, preferences, and relevant medical history, enabling Carrot to create highly personalized plans and identify individuals who may require prioritized care. Through Carrot, members have access to:

- **Personalized Carrot Plans:** Tailored guidance, helping members navigate the best next step for their unique journey and goals.
- **Carrot Academy:** Ability to attend journey-specific educational group sessions, and explore trusted, medically reviewed articles, videos, and long-form guides.
- **Provider and resource matching through CarrotMatch:** Guidance to high quality providers, menopause prescribers, community resourcing, and existing benefit programs and vendors. Members have access to a network of 11,000+ clinics, agencies, attorneys, and specialists globally.
- **In-the-moment guidance:** Real-time support every step of the way from Carrot Companions and specialized Carrot Experts.
- **Concierge medication management with CarrotRx:** 24/7 clinician support, education, and savings on medication, without PBM markups.
- **All-inclusive financial enablement with the Carrot Card (if offered):** Instant access to benefit dollars, eliminating out of pocket costs. Carrot provides members with a financial dashboard to easily track and manage each member's financial benefit. Members are able to view exactly how much coverage they have at any given moment as well as upload receipts for reimbursement.
- **Global expertise:** Carrot supports members in 170+ countries, offers a fully translated platform, and support for 50+ currencies.
- **Metabolic-fertility optimization with Sprints:** Hyper-personalized program aimed at reversing infertility through motivational technology and treatment, including GLP-1s.

## Impact wrapped around every person and every journey



Members with Carrot Plans experience significant engagement, averaging 40 meaningful touchpoints annually. These interactions span expert chats, care navigation, group sessions, informative articles, provider recommendations, the payments platform, and more.

## Proven Clinical and Financial Outcomes:

Carrot conducted an internal study to assess the clinical effectiveness of its fertility benefits program.<sup>1</sup> For this study, Carrot tracked the fertility outcomes of members enrolled in Carrot's benefits program and compared this data against national data from the Society for Assisted Reproductive Technology (SART). To evaluate the measurement methodology that Carrot used to calculate its key outcomes and compare them against national benchmarks, Carrot engaged Milliman, Inc., who found that Carrot's methodology for measuring fertility management performance relative to national benchmarks is consistent with industry practices.<sup>2</sup>

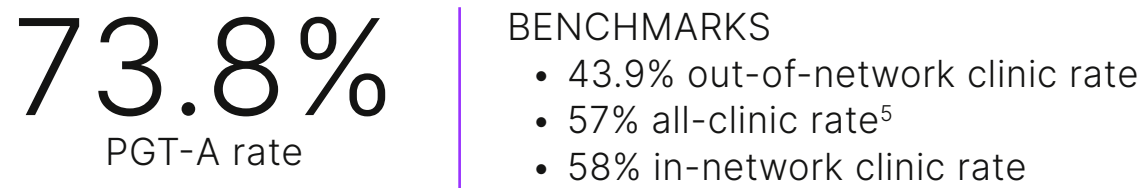
<sup>1</sup>Carrot (2024)

<sup>2</sup>SART (2024). Calculated based on the SART 2021 National Summary Report, finalized in 2024. Milliman (2025). Milliman did not review Carrot's methodology for assessing performance compared to competitors.



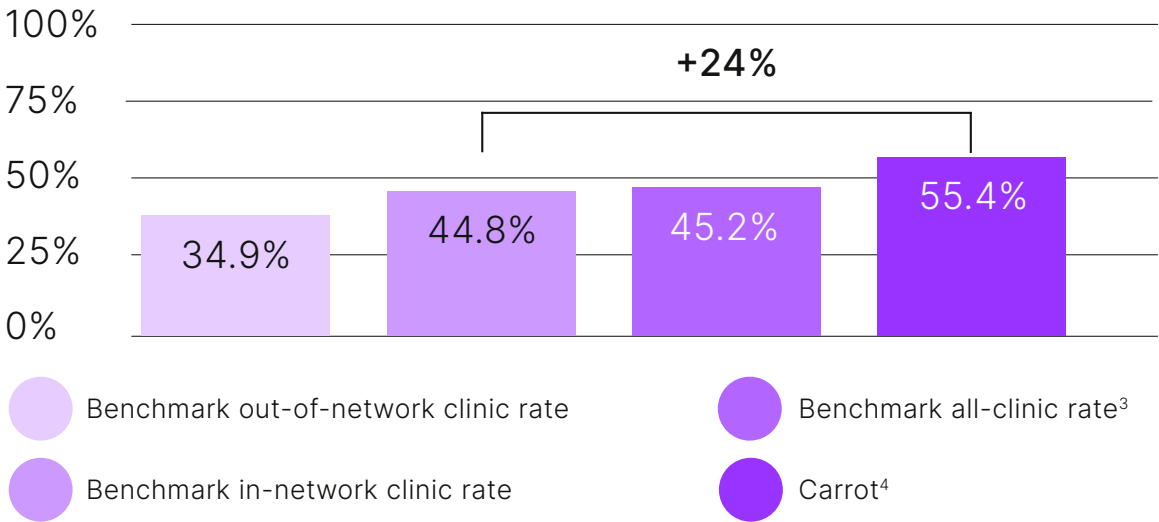
PGT-A rate (per transfer)<sup>5</sup>:

Carrot's flexible benefit design allows for the member and their provider to decide, in any given case, whether PGT-A is appropriate. A PGT-A rate of 73.8% is consistent with Carrot's age mix and best practices for testing within certain age group.



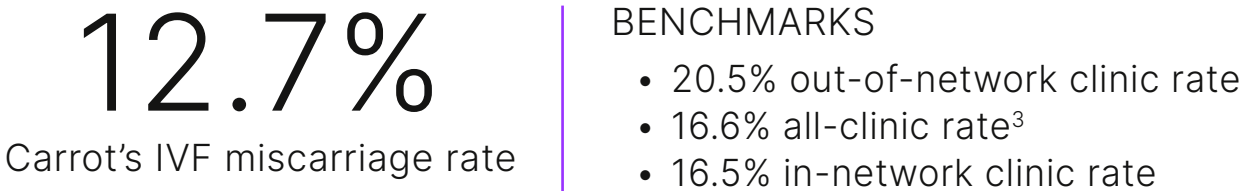
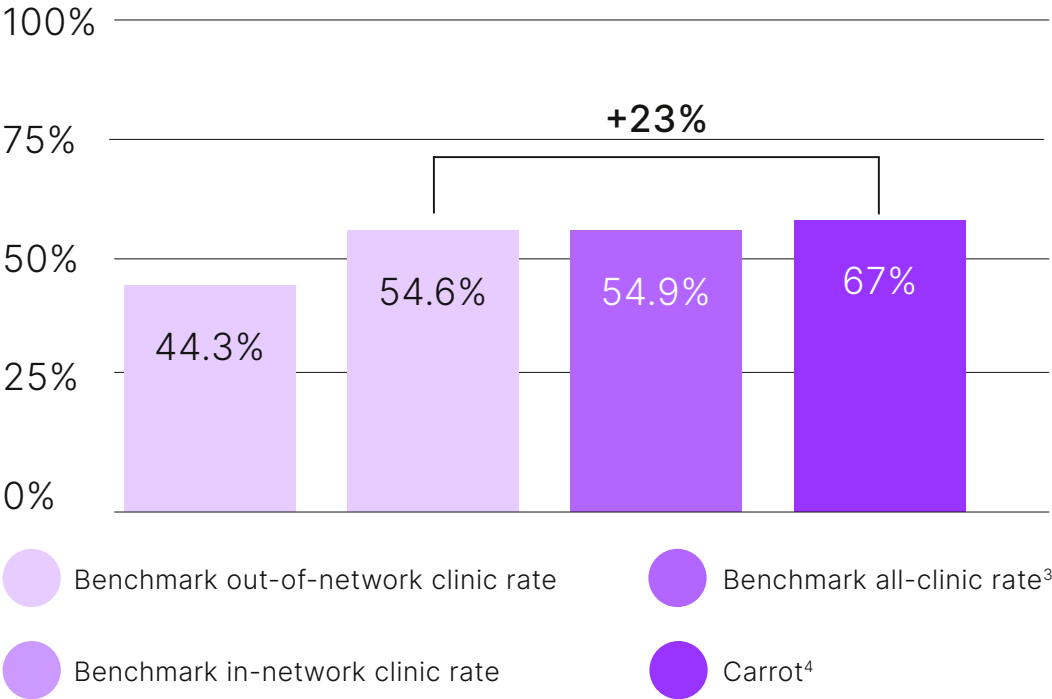
IVF live birth rate (per transfer)<sup>2</sup>:

IVF live birth rate is perhaps the single most important outcome metric for evaluating the overall effectiveness of a fertility benefits program. Carrot's 55.4% live birth rate exceeds both the national average (44.8%) and the benchmark, in-network average (45.2%) by roughly 20%. Even more remarkable is Carrot's ability to achieve its 55.4% live birth rate while also keeping multiple birth rates low. Transferring more than one embryo is typically associated with higher live birth rates, but Carrot's results demonstrate that employers do not have to trade one for the other.



IVF pregnancy rate (per transfer)<sup>2</sup>:

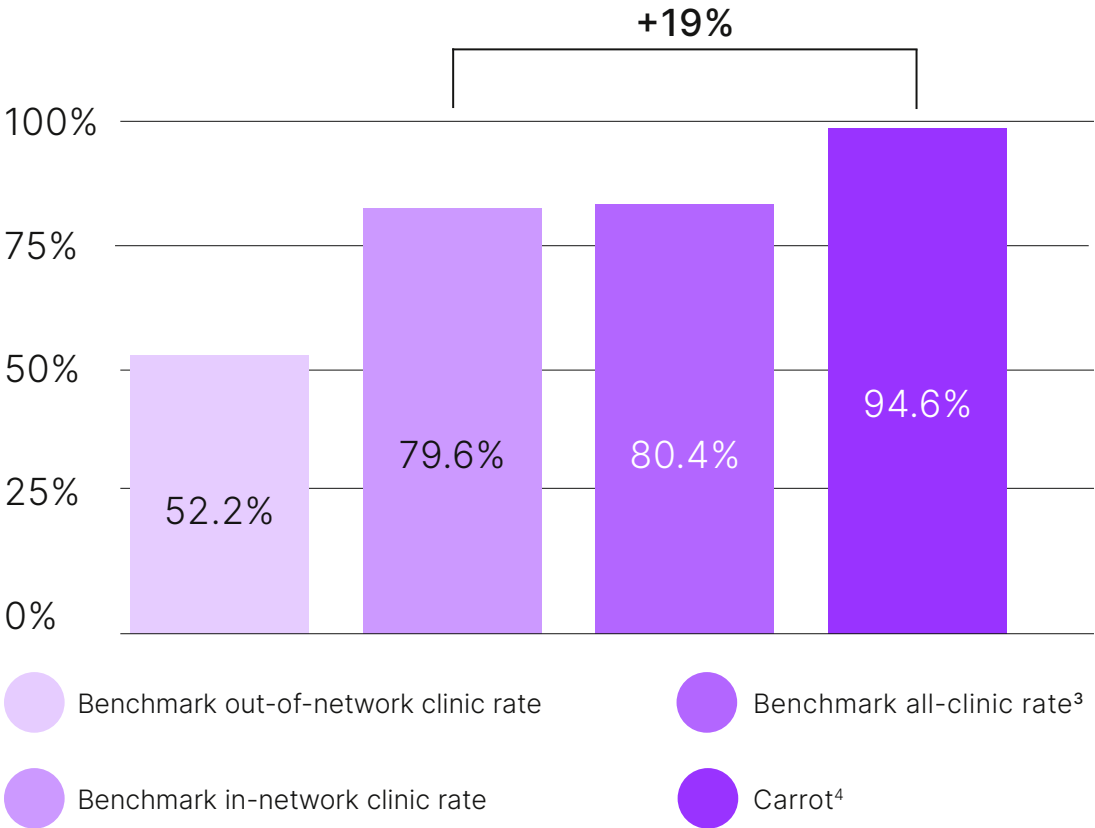
Carrot's IVF pregnancy rate of 67% indicates that Carrot members are more likely to get pregnant, and our miscarriage rate of 12.7% indicates that they are more likely to stay pregnant, too.



<sup>2</sup>SART (2024). Calculated based on the SART 2021 National Summary Report, finalized in 2024.  
<sup>3</sup>SART(2024). National Rate. SART collects 90% of ART cycle data in the United States.  
<sup>4</sup>CDC (2024). Carrot members at Carrot's in-network SART providers. Carrot outcomes data captures live births through November 1, 2024.  
<sup>5</sup>CDC (2024). Calculated based on the CDC 2021 Final Assisted Reproductive Technology (ART) Patient and Cycle Characteristics, last updated on September 11, 2024.

SET rate (per transfer)<sup>2</sup>:

Transferring embryos one at a time significantly reduces the risk of multiple gestation pregnancy, which are associated with longer NICU stays and higher rates of pre-term births. Carrot has an industry-leading SET rate of 94.6%.



# 1.08

mean number of embryos transferred

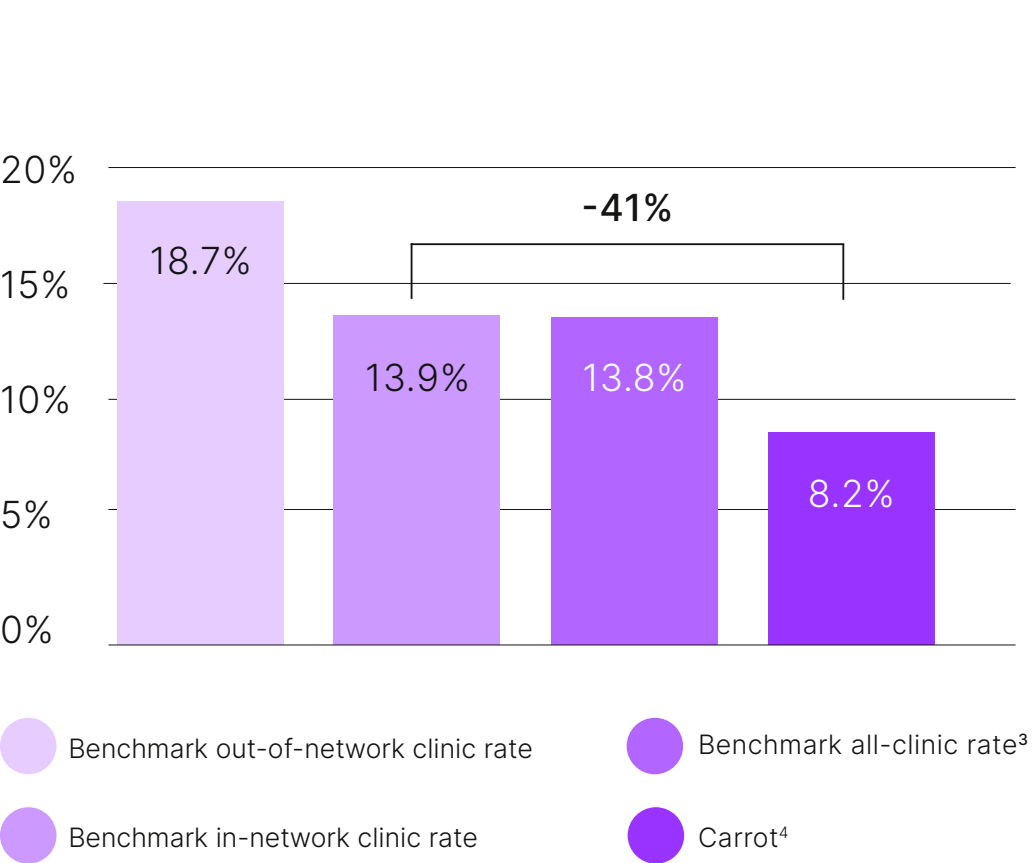
BENCHMARKS

- 1.49 out-of-network clinic rate
- 1.20 all-clinic rate<sup>3</sup>
- 1.19 in-network clinic rate

<sup>2</sup>SART (2024). Calculated based on the SART 2021 National Summary Report, finalized in 2024.  
<sup>3</sup>SART(2024). National Rate. SART collects 90% of ART cycle data in the United States.  
<sup>4</sup>CDC (2024). Carrot members at Carrot's in-network SART providers. Carrot outcomes data captures live births through November 1, 2024.

IVF pre-term birth rate:

Pre-term births are associated with NICU admissions and higher costs for the birthing parent and the infant. Carrot's 8.2% pre-term birth rate is significantly lower than all benchmarks.



# 98.2%

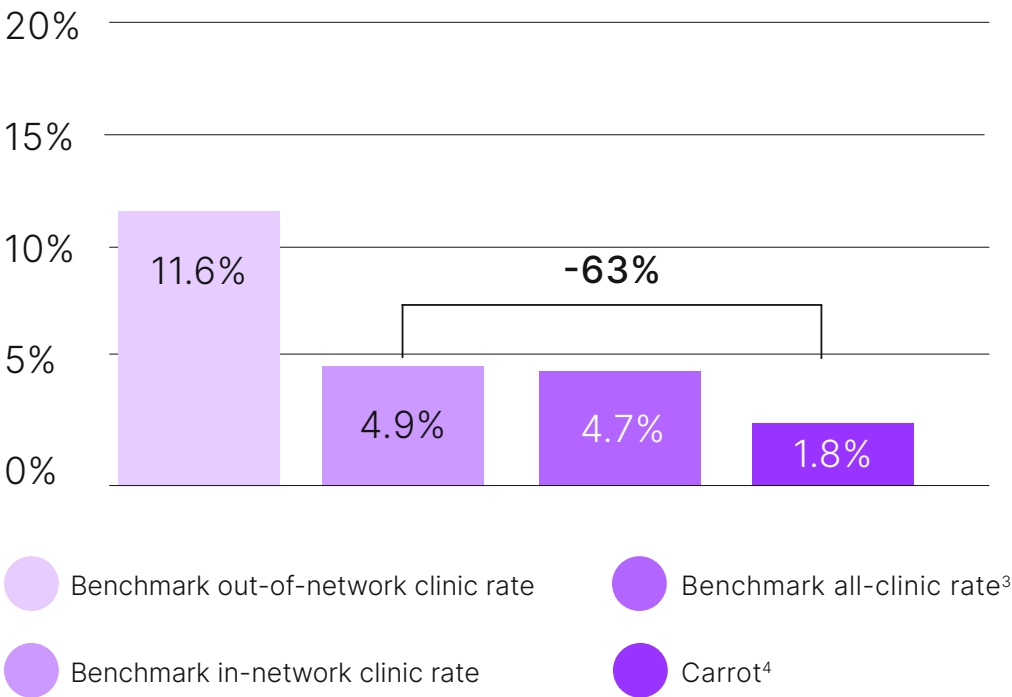
Carrot's singleton birth rate

BENCHMARKS

- 88.4% out-of-network clinic rate
- 95.1% all-clinic rate<sup>3</sup>
- 95.3% in-network clinic rate

IVF multiple birth rate:

Carrot’s 94.6% SET rate translates to the lowest reported multiple birth rate in our industry at the time of publication, at 1.8%.



How Carrot achieves its best-in-class outcomes

The hallmark of a best-in-class fertility benefits program is a combination of high live birth rates coupled with low rates of multiple births. Programs like Carrot successfully support their members through healthy, singleton pregnancies while minimizing the emotional and financial costs that accompany each transfer.

Carrot’s clinical outcomes lead the industry and demonstrate the overall quality of care that Carrot delivers to its members. Our results consistently surpass national benchmarks and underscore the effectiveness of our approach to fertility care, which combines vetted, high-quality providers with comprehensive clinical programs designed to provide personalized, evidence-based support to members at every stage of their journey.

Carrot provides best-in-class outcomes to its members through a multifaceted approach centered on personalized, expert-guided care and a commitment to clinical excellence, including:

- **Personalized and expert-guided care**
  - Carrot’s best-in-class outcomes are significantly driven by our commitment to personalized and expert-guided care. Through **personalized Carrot Plans**, each member receives a customized roadmap based on their unique medical history, personal aspirations, and risk factors, ensuring their support evolves dynamically with their journey. This individualized approach is amplified by **in-the-moment guidance from Carrot Experts**, providing unlimited, virtual access to specialized support. Further enhancing the member experience, **24/7 Care Navigation Experts** are readily available to clarify options, connect individuals with suitable providers, and streamline their care navigation. Underpinning this comprehensive support system is Carrot’s **global network of vetted providers**, guiding members to high-quality, vetted providers around the world.
- **Programs and initiatives focused on clinical excellence**
  - **Single Embryo Transfer (SET) education:** Carrot has one of the highest reported SET rates in the fertility benefits industry. Promoting SET reduces the risk of multiple pregnancies, which are associated with higher medical costs and poorer health outcomes for birthing parents and infants.
  - **Focus on education and alternatives to IVF:** Carrot’s clinical program helps members explore less invasive and costly options like ovulation tracking and nutrition counseling when appropriate, with 60% of members opting for these alternatives based on personalized guidance.
  - **Rigorous provider vetting and standards of excellence:** Carrot’s clinical team annually reviews our network of providers to ensure they meet high standards based on training, certifications, embryology lab accreditation, and patient experience – ensuring members are receiving care from top quality, cost-effective providers.

Carrot delivers strong financial ROI for both our plan sponsors and members through care management, our focus on improving clinical outcomes, and proactive strategies to reduce high-cost complications and optimize pharmacy spend. Our program is rooted in clinical excellence, and leverages a data-backed approach to ensure members are routed to the best care, exactly when they need it.

<sup>3</sup> SART (2024). National Rate. SART collects 90% of ART cycle data in the United States.  
<sup>4</sup> CDC (2024). Carrot members at Carrot’s in-network SART providers. Carrot outcomes data captures live births through November 1, 2024.

Global expertise

The global fertility and family-building landscape is complex and constantly changing, which is why it's vital to monitor regulatory, cultural, legal, social, and financial shifts to ensure members are receiving the most comprehensive guidance possible. Not all care is created equal, and Carrot has developed a global care model that not only improves access to care, but also provides best-in-class, localized support for every region globally.

Carrot has been global since day one, helping members navigate the complexities of care around the world. Our expert care team and in-platform localized content bring to life our knowledge base of millions of cultural, legal, financial, and medical data points.

Carrot’s approach to global care:

- **Unlimited access to virtual experts that deliver culturally competent care:** Our Care Team is trained to help members navigate the various cultural, political, and religious sensitivities related to fertility, family-building, and hormonal health journeys. Nearly 50% of Carrot Experts are located outside of the U.S.
- **Vetted, global in-person provider network:** Global eligible providers, including fertility providers, menopause specialists, reproductive urologists, attorneys, and agencies, are evaluated to ensure that members receive the highest quality of care.
- **24/7 Care Navigation:** Members receive a connected care experience through round-the-clock guidance from Carrot Companions.
- **Robust language accessibility support:** The Carrot platform is available in 25+ languages across 50+ countries, and live translation support for Carrot Companion and Carrot Expert chats are available in 300+ languages.
- **All-inclusive financial enablement:** Carrot has a deep understanding of how private and public health systems operate, helping members navigate costs and coverage accordingly. If additional coverage is needed, members can use Carrot funds and the Carrot Card.
- **Global claims adjudication and reimbursement:** Carrot manages direct reimbursements, claims adjudication, taxation reporting, and tracking of the financial benefit in-house, providing administrative ease for our customer and their internal teams.

- 
- 20%+ of Carrot members reside outside of the U.S.
  - 32% of Carrot customers offer a Carrot benefit globally
  - 11,000+ vetted eligible providers and agencies
  - 50+ currencies supported
- 

Pioneering support for metabolic-fertility care

Sprints is the first-and-only program to address infertility linked to obesity and poor metabolic health. Focused on hyperpersonalized habit-building, members receive fertility focused prompts across nutrition, movement, sleep and stress management – helping them get pregnant faster without the need for costly interventions.

Nearly 60 percent of engaged Carrot members choose less expensive and less invasive fertility interventions before IVF – with 30 percent successfully getting pregnant without IVF. Sprints harnesses this motivation and provides deeper, more robust and hyperpersonalized pathways to overcome fertility challenges either without IVF, or with fewer IVF cycles.

The clinically-backed program will include key elements such as:

- **Pre-conception habit-building program:** Clinically-backed daily coaching for nutrition, movement, sleep, and stress during the “Premester” period. Members are given a Carrot Welcome Kit with smart-scale integration and the option to invite a partner or spouse to the app so they can train together as they try to conceive.
- **Hyperpersonalized Carrot App experience:** Hyperpersonalized plans shaped by members’ unique health concerns, fertility goals, and motivational profiles. Backed by Carrot’s expert care team, the adaptive experience will combine clinically-validated guidance with content tailored in real time to help members build healthier habits, stay engaged, and make meaningful progress toward pregnancy.
- **Clinically managed medication access:** Managed access to fertility-supporting medications (e.g., metformin and GLP-1s such as semaglutide and tirzepatide) and hormone supplements for members facing obesity-related fertility challenges.
- **Complete integration with existing care journeys:** Seamless integration with existing Carrot app features, enhancing support from Carrot Companions and metabolic-fertility experts for high-impact member support.



## Global support, local impact: How Salesforce brings its values to life with Carrot

**Client:** Salesforce

**Industry:** Technology

**Total Membership:** almost 40,000 globally

**Year Implemented:** 2021

**Products offered:** fertility (IVF, IUI, preservation), adoption, gestational surrogacy with financial coverage. Pregnancy, menopause, and low testosterone support where available.

Salesforce is one of the best-known customer relationship management and sales and marketing platforms in the world. We talked with Motoharu Miyazaki, Senior Director, Global Rewards, at Salesforce about why Carrot was the best choice when the company decided to change its approach to global fertility benefits.

### How Salesforce delivers on its values with global fertility benefits

When U.S.-based employees received access to fertility benefits through their insurance plan, the global benefits team wanted to ensure non-U.S. employees could get support, too. They started by launching a pilot program in two countries. However, their initial solution—handling fertility care reimbursements in-house—proved to be a significant challenge. The HR team audited claims, answered specific questions about fertility care, and even fielded calls from local hospitals when patients had questions about what care was reimbursable.

“Employees would reach out to us and say, ‘Am I eligible for this or that?’ But there’s a lot of medical terminology we don’t know, so it was hard for us to say yes or no,” said Motoharu (Moto) Miyazaki, Senior Director, Global Rewards.

In order to provide better support for employees and scale their fertility support outside of the U.S., the team decided it was time to take a different approach.

“Our in-house system was too hectic and took a lot of time and effort,” said Moto. “We decided we needed to have this outsourced to an expert.”

That’s where Carrot came in.

### Choosing Carrot: expert, global support

Salesforce has employees in more than 30 countries across Asia, Europe, North America, and South America. Rules and regulations related to fertility care vary widely worldwide, so finding a benefit provider with true expert knowledge of each country where Salesforce employees lived was crucial, in addition to ensuring employees had access to vetted care in their area.

Based on their experience administering their fertility benefit in-house, they also knew they needed to find a vendor with significant knowledge of all fertility and family-forming journeys.

“We would get someone asking about something like massage services, and we wouldn’t know whether that should be covered or not,” said Moto. “It was really challenging for us to audit without being experts in fertility care.”

The breadth of Carrot’s expert support and global reach immediately stood out to the search team. Carrot members have unlimited virtual access to experts across 5,000+ areas, including reproductive endocrinology, urology, nutrition, and emotional support. In addition, Salesforce provides their employees with a financial stipend to help with the cost of care, converted into the currency of each applicable country, allowing equitable support across the globe. Wherever members are in the world, Carrot care navigators provide personalized guidance, incorporating navigation of complex local rules and regulations. When members are ready to find in-person care, they can search 11,000+ vetted providers, agencies, and attorneys through an easy-to-use online tool. Since Carrot is available in more than 170 countries, the Salesforce team knew they had a benefit that all of their global employees would be able to use.

“We chose Carrot, and it’s been a game changer,” said Moto. “You’re experts. There are Carrot-approved fertility clinics, and it’s a super straight line for employees to get reimbursed. It’s like night and day.”

### The results: a life-changing benefit that crosses borders

Since launching Carrot, the Salesforce HR team has regularly promoted the benefit to employees, starting during the interview process.

“People outside the U.S. don’t necessarily ask about fertility benefits, but recruiters do sell it,” said Moto. “It’s a point of differentiation because it’s not really that prevalent outside the U.S.”

When making offers to new talent, the team includes Carrot in materials featuring key benefits at Salesforce. Fertility benefits are also part of employee onboarding and are easy to search for within the company’s intranet. The company has seen strong engagement by ensuring Salesforce employees are aware of all the ways Carrot can support them. As of this writing:

- While 8.7% of eligible employees have enrolled in Carrot, a significant 4.7% have actively engaged with the platform to receive a personalized Carrot Plan, outlining the precise resources and support tailored to their individual needs.
- With an active Carrot Plan, members engaged with the platform an average of 30 times, utilizing features like article views, provider searches, expert chats, support messages, and expense submissions, showcasing the active and personalized support Carrot provides.
- 97% of Salesforce Carrot members surveyed would stay with their company longer because of Carrot.

Best of all, Moto regularly hears from employees who have used Carrot to grow their families, including LGBTQ+ couples and employees navigating cross-border journeys. For members of the LGBTQ+ community, accessing local resources isn’t always possible. Carrot care navigators help guide members through their options, which may include seeking cross-border care. Moto noted that seeking care in other countries can be costly, which is one reason Salesforce is proud to offer a generous financial benefit to help employees meet their fertility and family-forming goals.

“Carrot really aligns with our values and our value-driven decision making,” said Moto.

In addition to supporting members of the LGBTQ+ community, Moto also said he appreciates Carrot’s ongoing innovations to reach even more employees, such as through Carrot’s menopause and low testosterone support.

“The flexibility and continuous innovation that the Carrot team provides are key differentiators,” said Moto. “If you’re considering fertility benefits, it’s something you can’t really build in-house. You should ask the professionals to do it right. And you should definitely consider Carrot.”

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### Top journeys

- Assisted reproduction
- Fertility preservation
- Trying to get pregnant

### Top Carrot expert chats

- Medical experts
- Fertility experts
- Adoption experts

### Top countries by enrollment

- India
- Japan
- United Kingdom

### Why did Salesforce choose Carrot?

- Unlimited virtual access to experts across 5,000+ areas, including reproductive endocrinology, urology, nutrition, and emotional support
  - Available in 170+ countries
  - Personalized support for all journeys, including guidance related to local rules and regulations
  - Inclusive support regardless of age, race, income, sex, sexual orientation, gender, faith, marital status, and geography
-



Maven Clinic is the largest virtual clinic for women's and family health. Maven delivers unparalleled virtual care across the full reproductive health journey—from preconception through menopause—on a single integrated platform. Maven's care model is proven to significantly reduce healthcare costs and improve clinical outcomes and employee retention. Supporting fertility, pregnancy, parenting, pediatrics, and midlife health, Maven serves over 2,000 organizations worldwide, covering more than 23 million lives across 175+ countries.

*Content for this section provided by Maven Clinic.*



## Overview

Maven achieves superior outcomes and significant cost savings across the entire reproductive health journey. Unlike point solutions focused on fertility administration alone, Maven’s clinically rigorous and integrated care model provides dynamic and personalized support from preconception through parenting and menopause all on one platform, with no gaps in care. Maven stands out as one of the only vendors in the industry with an externally-validated outcomes methodology for both fertility<sup>1</sup> and maternity<sup>2</sup> care, providing employers a combined clinical and business ROI of up to 4x.

## The Maven model: Designed to drive better outcomes

Maven delivers comprehensive clinical, emotional, and financial support across the entire reproductive and family health journey. Our seamless digital experience connects members to specialized virtual care, personalized guidance, and curated resources tailored to their unique needs. This personalized model ensures that members receive timely, coordinated support that bridges gaps left by traditional in-person systems.

From initial enrollment, Maven crafts a deeply personalized experience. Each interaction is dynamically adjusted based on the member’s evolving journey and needs. Members receive tailored care plans with actionable steps, recommendations for specific virtual specialists, and curated clinically-validated articles, workshops, and more.

## Our differentiated model addresses three core pillars:

- **Clinical:** Maven members receive 24/7 support from virtual specialists, continuous care coordination, referrals to in-person providers including doulas, and access to our network of quality fertility clinics. For those pursuing fertility treatment or navigating a high-risk pregnancy, we offer robust coaching support and pair these members with a dynamic care plan powered by machine learning and AI, and a high-risk Care Coach and team who specialize in the member’s specific risks.
- **Emotional:** Dedicated Care Advocates and mental health specialists support members every step of their journey, ensuring they’re connected with the resources they need. Virtual classes, moderated forums, and community groups connect members with their peers during joyful and vulnerable moments.

<sup>1</sup>Milliman, Fertility Validation (2022)

<sup>2</sup>Milliman, Maternity Validation (2022)

<sup>3</sup> Maven internal research analysis on BoB fertility member outcomes (2024)

<sup>4</sup> Maven internal research analysis on the [Maven Managed Benefit](#) member outcomes compared to national and competitive benchmarks (2024). National benchmarks used weighted 2022 SART and CDC data by age. Competitive benchmarks are from publicly available metrics from competitors.

- **Financial:** Maven Wallet is an easy-to-use and secure expense management solution providing seamless access to financial coverage for fertility treatment, doula coverage, childcare support, adoption reimbursement, and other services, simplifying financial benefit administration.

## Superior outcomes

Maven’s proven outcomes extend far beyond fertility treatment, delivering impactful results across every program we offer. By providing compassionate care and deep expertise for every path, we have the ability to impact health outcomes throughout a member’s entire reproductive health journey. This comprehensive approach also delivers significant cost savings, as proven by Milliman’s independent analysis and several claims-based studies which demonstrated clients consistently saved up to \$5,000 per member.<sup>1,2</sup> These savings stem from the reduced likelihood of costly interventions like C-sections, NICU admissions, fertility treatments, unmanaged mental health needs, and more.

## Family building: Optimizing paths to parenthood

While many traditional fertility benefits focus primarily on treatment access, Maven’s integrated Fertility & Family Building model combines personalized guidance, specialized trying-to-conceive coaching, dedicated mental health support, and a large network of high-quality fertility clinics to optimize both member experience and clinical results. For those pursuing alternate paths to parenthood, we also support egg and sperm freezing, adoption, and surrogacy.

Maven’s novel Trying to Conceive (TTC) Coaching program offers personalized guidance and support from trained Care Coaches, who help optimize the chances of natural conception through tailored care plans, continuous check-ins, fertility education, mental health support, and referrals to diet and nutrition specialists. Members in our TTC Coaching program are 55% more likely to conceive without treatment, saving employers and their employees up to \$25,000 per avoided treatment cycle.<sup>3</sup>



For members who do pursue treatment, Maven demonstrates superior clinical outcomes, surpassing both national averages and our top competitors.<sup>4</sup> This significant difference translates directly to fewer cycles needed and reduced pregnancy complications (including NICU admissions), creating additional cost savings and better experiences. These results underscore the effectiveness of Maven’s integrated approach, which combines a managed benefit and high-quality network with 24/7 care management via the Maven app and platform.

- 94% SET rate, 20% higher than the national average<sup>4</sup>
- 66% IVF Pregnancy rate, 18% higher than the national average<sup>4</sup>
- 59% IVF Live Birth rate, 30% higher than the national average<sup>4</sup>
- 9% IVF Miscarriage rate, >30% lower than the national average<sup>4</sup>
- 2% IVF Multiples rate, 50% lower than the national average<sup>4</sup>

**Maternity: Safer and healthier pregnancies**

Maven’s Maternity & Newborn Care program helps reduce the most common and costly complications associated with maternity care, lowering medical costs and improving maternal health outcomes. By providing personalized programming for every stage of pregnancy and postpartum, Maven demonstrates significant improvement in clinical outcomes such as:

- 8 to 27% reduction in NICU admissions<sup>5</sup>
- 6 to 15% lower C-section rates<sup>6</sup>
- 21% of members report that they benefited from improved mental health support<sup>7</sup>

These industry-leading outcomes are driven by our high-risk coaching and resources, data-driven personalized care plans, unlimited virtual access to maternity providers (including doulas, lactation consultants, and high-risk OB/GYNs), and dedicated postpartum and return-to-work support. Our published research highlights the impact of this engagement:

- Maven members who met with their Care Advocate are six times more likely to have a vaginal birth instead of a C-section<sup>8</sup>
- Maven members who met with a Maven Doula had a 60% reduction in risk of repeat C-sections compared to members who did not use a doula<sup>9</sup>

**Parenting: Continuous support for growing families**

Maven extends its integrated support model beyond birth through our comprehensive Parenting & Pediatrics program, supporting families with children up to age 18. We uniquely combine pediatric expertise with holistic family wellness resources on a single, unified platform. Parents gain seamless access to specialized pediatric providers, personalized parent coaching, career guidance for working parents, and targeted mental health resources.

Members benefit from unlimited virtual appointments with pediatric specialists, reducing the need for disruptive time off work—25% of members avoided scheduling workday appointments due to Maven.<sup>10</sup> The program also fosters connection and reduces feelings of isolation, a critical factor in parent wellbeing, with 45% reporting that Maven significantly reduced parenting isolation.<sup>10</sup>

<sup>4</sup> Maven internal research analysis on the [Maven Managed Benefit](#) member outcomes compared to national and competitive benchmarks (2024). National benchmarks used weighted 2022 SART and CDC data by age. Competitive benchmarks are from publicly available metrics from competitors.

<sup>5</sup> Maven internal research analysis on BoB maternity member outcomes (2024); based on Maven members joining in their first, second or third trimester, adjusted for underreporting in self-reported data compared to a national benchmark NICU admission rate of 18.3% for the same time period.

<sup>6</sup> Maven internal research analysis on BoB maternity member outcomes (2024); based on Maven data from PRAMS states, compared to privately insured mothers in the PRAMS database weighted by state.

<sup>7</sup> Maven internal research analysis on BoB maternity member outcomes (2024); compared to national benchmarks of mental health treatment in pregnancy of 10% and 5% for the low and high ends of the range.

<sup>8</sup> [Journal of Midwifery & Women’s Health \(2023\)](#)

<sup>9</sup> [Obstetrics & Gynecology \(2023\)](#)

<sup>10</sup> Maven internal research analysis on BoB parenting member outcomes (2024)

### Menopause & Midlife: Navigating reproductive life changes

Maven addresses the often-overlooked needs of individuals navigating midlife through trusted educational resources, personalized symptom management, and proactive health guidance.

- 93% of users experience reduced severity in at least one menopause symptom<sup>11</sup>
- 90% of members who received HRT through Maven reported improved menopausal symptoms<sup>11</sup>
- Members who engage with Maven OB/GYNs are 3x more likely to feel equipped to navigate menopause effectively and 2x as likely to confidently implement proactive health improvements<sup>12</sup>

Our patient-centered model removes healthcare bias by offering genuine choice in treatment pathways. While we provide symptom management through appropriate medications including HRT when needed, 40% of members receiving HRT consultations ultimately choose alternative approaches.<sup>11</sup> These personalized alternatives include specialized coaching, evidence-based nutritional guidance, and targeted lifestyle modifications—all delivered through Maven’s integrated platform ensures members receive the right care for their unique needs.

### Proven value and positive impact

Employers are increasingly demanding proof of value from their benefit vendors—and Maven delivers. Our approach to care is supported by peer-reviewed studies and claims-based ROI evaluations across multiple clients, and verified by independent third parties.

Maven is unique among women’s and family health partners with our independent validation of clinical methodology and outcomes for both fertility<sup>1</sup> and maternity.<sup>2</sup> Our calculations show that Maven clients see an average of:

- **2x clinical ROI**, driven by reductions in NICU admissions, C-sections, ED visits, fertility treatments, multiple births after IVF, and unmanaged mental health needs.<sup>13</sup>
- **4x clinical and business ROI**, factoring in improved return-to-work rates, reduced absenteeism, and increased employee productivity.<sup>13</sup>

Furthermore, Maven’s approach and outcomes have been rigorously studied and published in peer-reviewed journals. More than 15 peer-reviewed studies have been published validating the impact of digital care across key outcomes. These studies reflect the effectiveness of a model built from the ground up to close gaps in traditional care.

These comprehensive studies and reports underscore Maven Clinic’s commitment to evidence-based, high-quality care, validating the positive impact on clinical outcomes and financial efficiencies for our clients.

<sup>11</sup> Maven internal research analysis on BoB menopause member outcomes (October 2024)

<sup>12</sup> Maven internal research analysis on BoB menopause member outcomes (April 2024)

<sup>13</sup> Maven internal ROI calculation methodology

## Redefining global women's and family health benefits: Why Amazon made the switch to Maven

**Client:** Amazon

**Industry:** Technology, Retail

**Total employees:** 1.5M+ globally

**Year implemented:** 2023

**Products offered:** Fertility & Family Building, Maternity & Newborn Care

As Amazon's workforce grew, so did the complexity of delivering inclusive, consistent, and high-quality support for employees navigating family-building. Recognizing the need for a unified and scalable approach, Amazon partnered with Maven to enhance its benefits strategy to meet the diverse needs of employees across all paths to parenthood.

### The challenge

With hundreds of thousands of employees growing their families in different ways, Amazon recognized the importance of offering inclusive, flexible, and scalable support. Team members needed personalized guidance, emotional support, and a more seamless experience navigating family-building care in their region. Ultimately, Amazon needed a solution that:

- Provides inclusive and equitable care across all paths to parenthood
- Reduces unnecessary treatments and costs through smarter, earlier interventions
- Offers a more flexible, scalable solution aligned with Amazon's culture of innovation
- Builds on financial support by including pre-conception guidance, mental health resources, equitable care for LGBTQIA+ families and single parents, and access to virtual doula care

### The solution

In 2023, Amazon partnered with Maven to introduce its family-building benefits to 50 countries outside of the U.S. and Canada. Following the early success of the program, Amazon expanded its partnership with Maven in 2025 to include fertility and family-building care, offering comprehensive support for preconception, fertility treatment, egg and sperm freezing, adoption, surrogacy, and pregnancy support with doula care—all delivered through Maven's fully integrated digital platform.

“Maven is an employee-friendly benefit that takes the guesswork out of the family-building process, which can often be confusing and overwhelming. Our benefits are designed to care for all our employees' needs, and that means ensuring they have the resources they need to live their best lives, regardless of their personal circumstances.”

- Lian Neeman, Global Director of Benefits at Amazon

Amazon selected Maven after an extensive evaluation process. As a single-source partner, Maven provides:

- Holistic, comprehensive support from preconception through postpartum
- 24/7 virtual care from a network of providers across 30+ specialties
- High-quality clinic partnerships through the Maven Performance Network in the U.S.

Maven's model prioritizes outcomes. By identifying risks earlier in the care journey, offering emotional support alongside clinical care, and guiding members to high-quality providers, Maven helps Amazon employees find the shortest, most effective route to bringing home a healthy baby.

### Implementation and launch

Maven worked closely with Amazon's internal teams to coordinate a phased rollout, including localized employee communications and region-specific clinic referrals. In the U.S., Maven also administers financial benefits for fertility treatments, adoption, and surrogacy. A digital-first model and hands-on implementation support helped the program exceed enrollment and member-satisfaction targets.

Amazon's collaboration with Maven simplifies and modernizes fertility and family-building benefits, delivering a consistent, inclusive experience for employees.

Outcomes achieved

Early indicators—including strong engagement and positive member feedback—suggest the program is adding meaningful value while supporting Amazon's commitment to innovation, equity, and employee well-being:

- 14,000+ Maven sign-ups, 8,000+ in the U.S. and 4,000+ internationally. This includes nearly 1,000 Amazonians in the U.S. who have signed up for pregnancy support with doula care
- 900,000+ interactions with Maven (including provider appointments and messages)
- 20,000+ Maven provider appointments, including OB-GYNs, reproductive nurses, and doulas
- 4.9/5 average appointment satisfaction rating
- 292 interactions per member

Among Amazon’s Fertility & Family-Building members:

- 52% reported that Maven helped them understand their fertility treatment plan or approach
- 33% say Maven helped them learn about alternatives to fertility treatment
- 20% say Maven helped them identify issues affecting their ability to conceive

Employees in both corporate and fulfillment center roles are engaging consistently in their family-building journeys, thanks to 24/7 access to care, diverse providers, and referrals to top-tier clinics. Over a third of U.S. members who have enrolled in Maven work in fulfillment centers, and two-thirds identify as people of color.

Summary

Amazon’s shift to Maven reflects a strategic decision to simplify and modernize its approach to fertility and family-building benefits. By consolidating support with Maven, Amazon is delivering a more consistent, inclusive experience for employees.

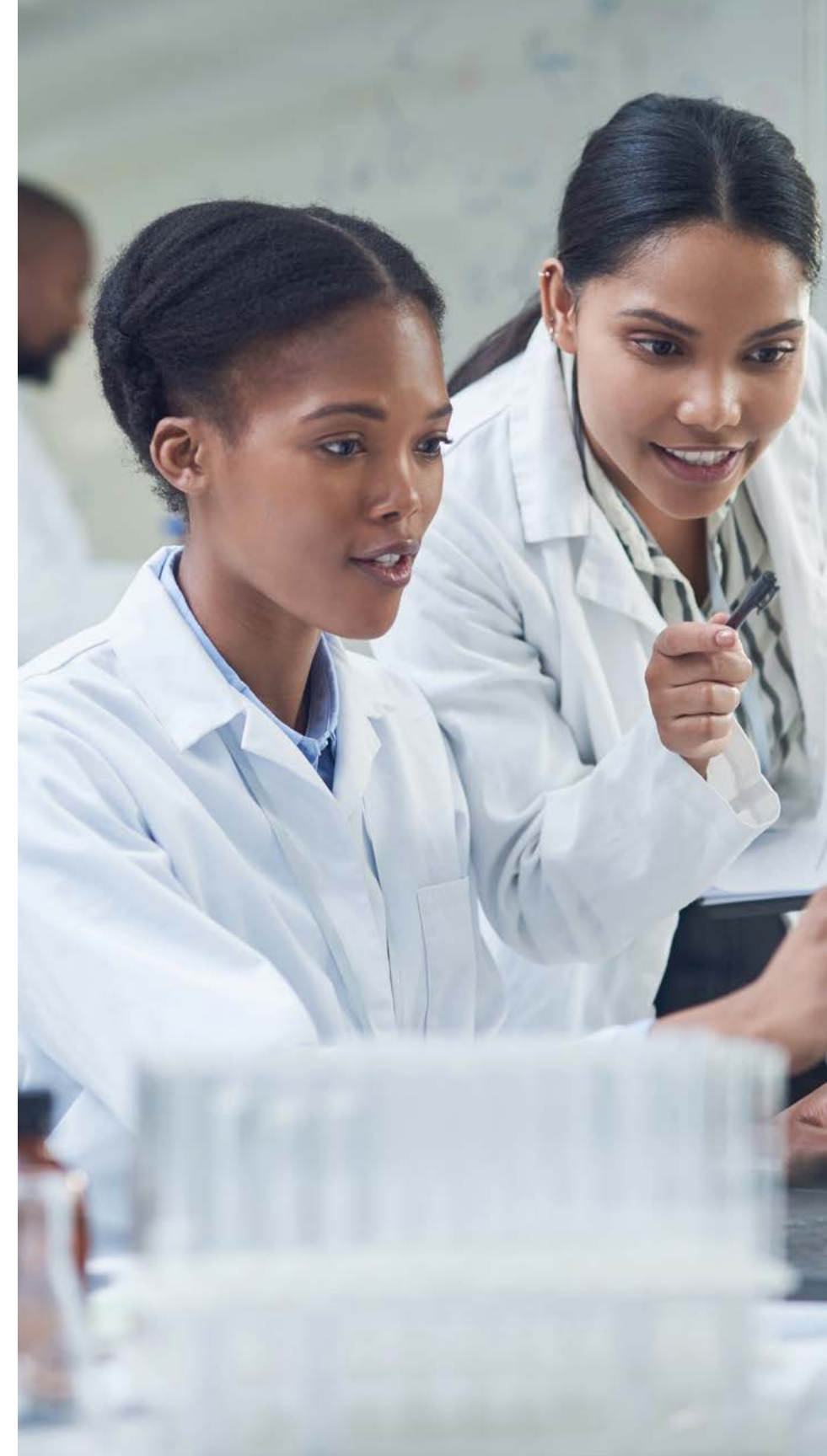
Early results show strong engagement, cost savings, and high employee satisfaction—indicators that the benefit is delivering both impact and value. This partnership positions Amazon to scale support more effectively as its workforce continues to grow, while aligning with long-term goals around innovation, equity, and employee experience.





Progyny (Nasdaq: PGNY) is a transformative fertility, family building, and women's health benefits solution, trusted by the nation's leading employers, health plans, and benefit purchasers. We envision a world where everyone can realize their dreams of family and ideal health. Our industry-leading outcomes prove that comprehensive, inclusive, and intentionally designed solutions simultaneously benefit employers, patients, and physicians.

*Content for this section provided by Progyny.*



## Overview

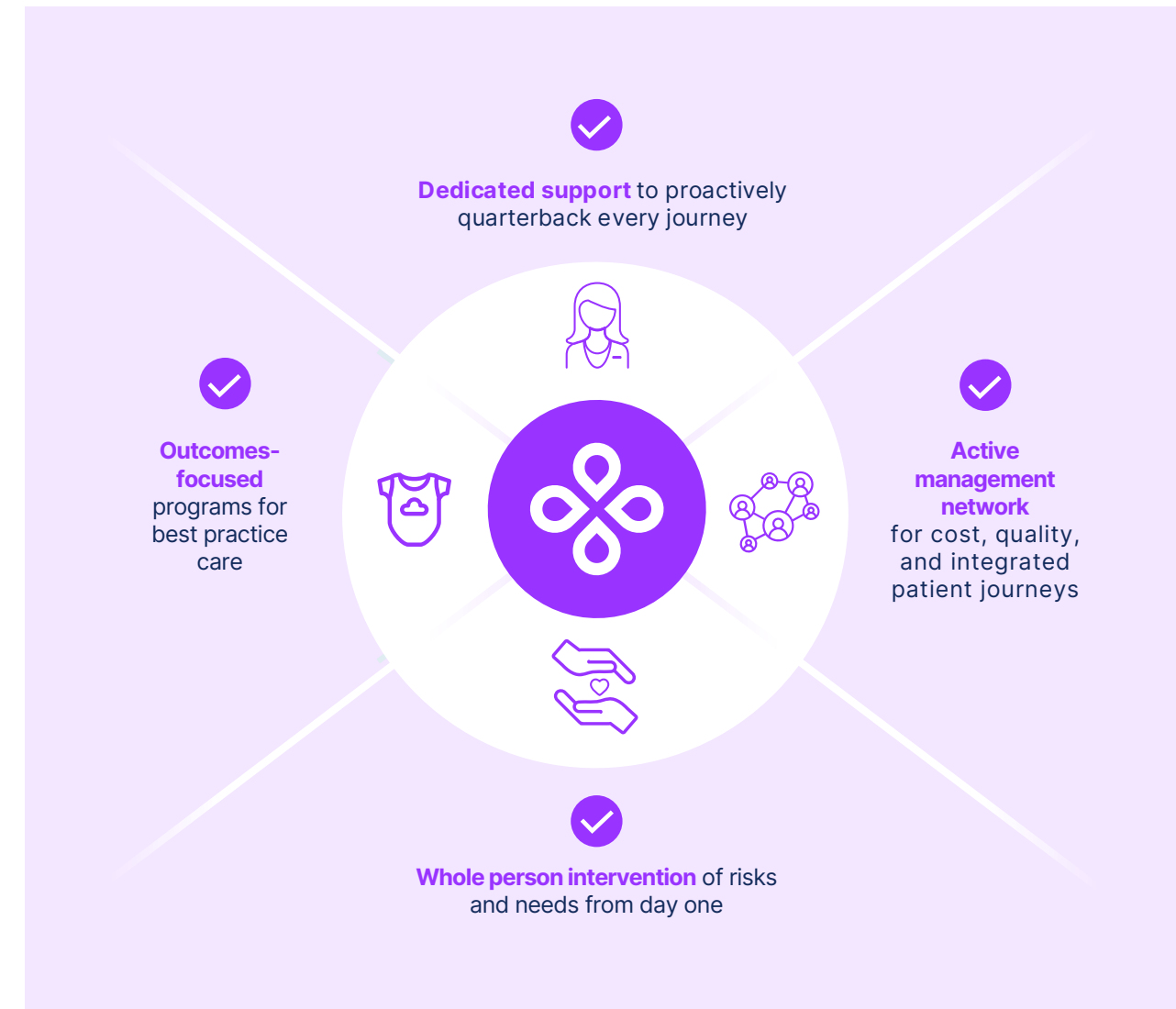
At Progyny, our mission is to redefine women's health and family building benefits by eliminating barriers to care and delivering superior health outcomes. We are creating a new paradigm for women's and family health, bringing together clinically integrated expert care management and specialized provider networks. With demonstrated outcomes for more than a decade, we help employers deliver better care, reduce costs, and support employees at life's pivotal moments including:

- Preconception, Fertility, and Family Building
- Pregnancy and Postpartum
- Parenting and Child Well-being
- Menopause and Midlife
- Global Fertility and Family Building

Progyny was founded in 2015 to specifically address the pain points that fertility patients experienced with dollar cap or limited management plans – such as limited access to quality care, poor clinical outcomes, unsupported members, and restrictive benefit design. Today, Progyny's model supports members with expert-led clinical concierge support and in-person and virtual care for all paths to parenthood (trying to conceive, fertility preservation, fertility treatment, male infertility, surrogacy/adoption, etc.); maternal health and postpartum (including doulas, lactation specialists, pelvic floor therapists); parenting; and menopause and midlife (specialized menopause providers), serving:

- 530+ clients
- 6.7M+ covered lives
- 45+ industries
- Global populations everywhere around the world

Our clients trust Progyny to enhance member experience and deliver proven health outcomes and cost savings—reflected in our 99% client retention rate.



## The Progyny Difference

Progyny’s clients and their members benefit from a model that we have been refining and enhancing for over 10 years. Our comprehensive approach helps members access needed care and proactively manage their health earlier; build their families with inclusive, expert support; and feel more equipped to navigate their unique journey and underlying needs. Our solution is built around these key components that work together across our entire product suite, enabling us to meaningfully impact member care and outcomes while containing employer costs.

### Cohesive, expert led member experience

Progyny provides a human-led approach to care, ensuring that every member has access to personalized, expert guidance at every stage of their journey. Each member’s experience starts with being matched to a dedicated Progyny Care Advocate (PCA), who are licensed nurses, clinical social workers, and other experts with clinical and/or occupational experience in fertility, pregnancy, postpartum, parenting, menopause, and male-factor care. PCAs offer continuous, one-on-one clinical coaching, emotional support, care and benefits navigation as well as proactive risk identification related to their life stages and health journeys. On average, members engage with their PCA over 15 times per journey. Calls last an average of 15+ minutes, covering benefit navigation, emotional support, and clinical education.

Members start with Progyny’s preconception and trying-to-conceive program, which offers personalized clinical programming and dedicated expert support from Progyny Care Advocates to help members get pregnant. For those who do require treatment, the PCA will help them find the right provider fit within our nationwide network of premier clinics. If they want to build their family through adoption or surrogacy, they have unlimited access to adoption and surrogacy coaches.

### Innovative benefit design

Our innovative benefit design eliminates barriers to care, simplifies the member experience, and provides access to state-of-the-art treatment options. For fertility and family building, the Smart Cycle is Progyny’s easy-to-understand benefit currency. Unlike fee-for-service and dollar cap models, everything required for a successful episode of care is bundled within the Smart Cycle, including diagnostic testing and the latest technology. Our Smart Cycle design removes the discriminatory impact of dollar-cap designs, and with no restrictive diagnosis or step therapy requirements, Progyny’s model is inclusive of LGBTQ+ individuals and single parents by choice. Our benefit design closes care gaps in pregnancy and postpartum, specialized women’s condition support, and menopause with streamlined claims.

## Largest actively managed provider network

Members can choose from our extensive network of over 1,100+ providers at more than 650+ locations, including reproductive endocrinologists and urologists for infertility care, MSCP-certified menopause providers, and pelvic floor therapists. Our NCQA accreditation in credentialing and active management of providers for cost, quality, and best-practice care standards provide an unparalleled consistency in achieving industry-leading outcomes. In fact, Progyny has compared outcomes between large COE networks and our own network, finding that Progyny physicians produce better outcomes for their Progyny patients than their non-Progyny patients.<sup>1</sup> Alongside our credentialed network, we embed access to vetted doulas, board-certified lactation consultants (IBCLCs), and clinical social workers (LCSWs, MSWs) into our pregnancy and postpartum and parenting programs to foster timely clinical intervention across stages of family building.

### Full-service, expert benefit administration

Progyny has established integrations with all carriers for coordination of claims and member cost share. For our fertility benefit, this includes the management of fertility medications under Progyny Rx. This integrated pharmacy solution eliminates common pain points like treatment delays and excess medication waste, providing seamless support during a critical phase of the fertility journey. Altogether, our administrative capability gives employers the flexibility to expand their benefit for inclusivity in family building, reproductive, and women’s health, while ensuring streamlined authorization and expert utilization management for the delivery of timely, effective care.

<sup>1</sup>Progyny in-network provider clinic averages for Progyny members based on the 12-month period ended December 31, 2023, representing 14,589 transfers. Calculated based on the Society for Assisted Reproductive Technology 2021 National Summary Report, [SART \(2024\)](#), and [CDC \(2024\)](#)

Superior Outcomes: Setting the Standard

Independently Verified Member Outcomes

Progyny collects outcomes directly from all providers for its entire member population. Providers are contractually obligated to report 49 clinical data points to us after each treatment cycle. Progyny receives detailed clinical outcomes by treatment type through actual medical records, rather than inferred from claims data, self reported data, or clinic-level data. We provide an accurate view of utilization, cost, outcomes, and engagement, elevating the industry standard for measurement and reporting—while raising expectations for what infertility care can achieve.

We’re proud to be a top performing solution at scale across all fertility outcomes tracked by the CDC. Progyny uniquely collects and reports outcomes for our entire member population—more than 19,000 transfers. Currently, we are the only solution to independently validate all fertility outcomes for all member data (entire Book of Business) through Milliman.<sup>2</sup>

Progyny significantly outperforms national averages across all key clinical metrics:<sup>3-5</sup>

Healthier Pregnancies

IVF Pregnancy Rate: 60.8% (vs. 54.3% national average)  
Miscarriage Rate: 14.4% (vs. 18.2% national average)

Healthier Babies

Live Birth Rate: 52.1% (vs. 42.2% national average)

Fewer Treatments Needed for Success

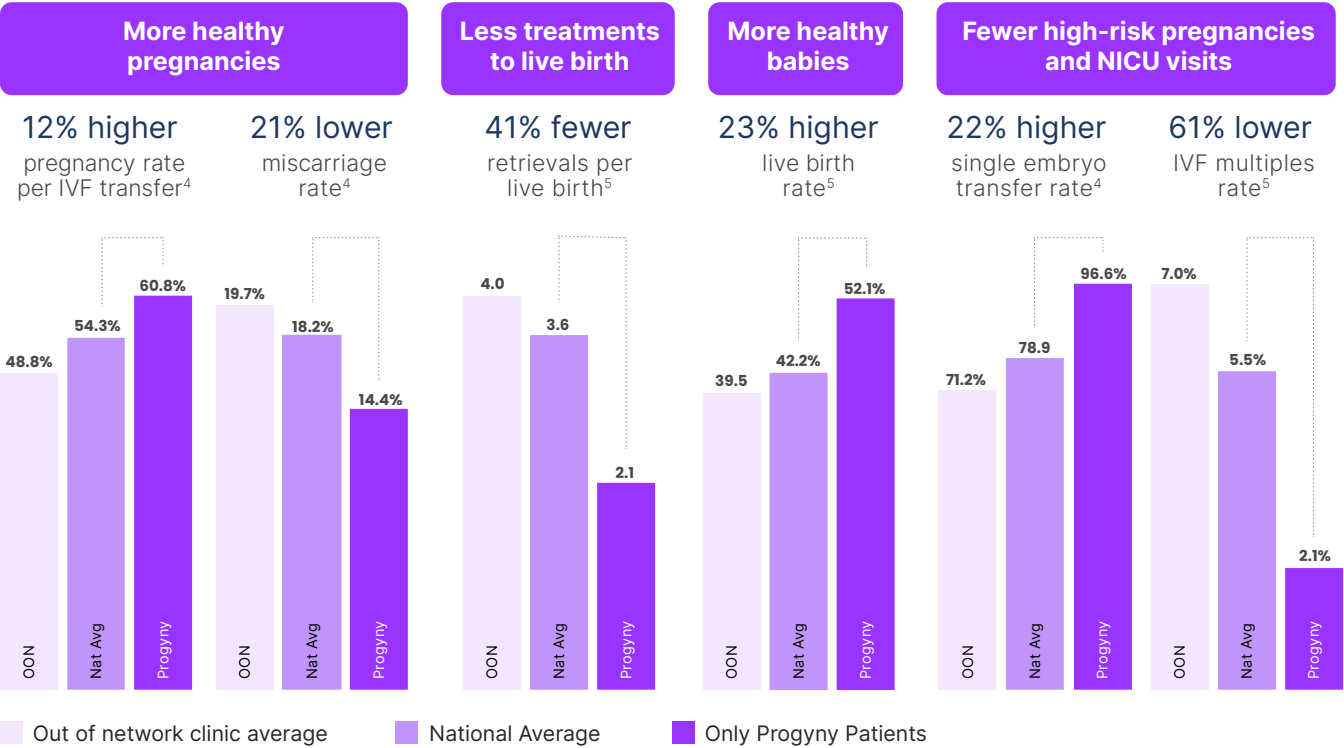
Average Retrievals to Live Birth: 2.1:1 (vs. 3.6:1 national average)

Fewer High-Risk Pregnancies and NICU Visits

IVF Multiples Rate: 2.1% (vs. 5.5% national average)

Progyny’s human-centered approach extends beyond clinical outcomes to create meaningful, life-changing experiences for members who consistently report high satisfaction with the benefit, as reflected in Progyny’s industry-leading NPS of +80.

Key Clinical Metrics<sup>3</sup>



<sup>2</sup> Milliman (2025)

<sup>3</sup> Progyny represents Progyny in-network provider clinic averages for Progyny members based on the 12-month period ended December 31, 2023. For each Progyny outcome presented, the p-value when compared to the national average is <0.0001.

<sup>4</sup> SART (2024)

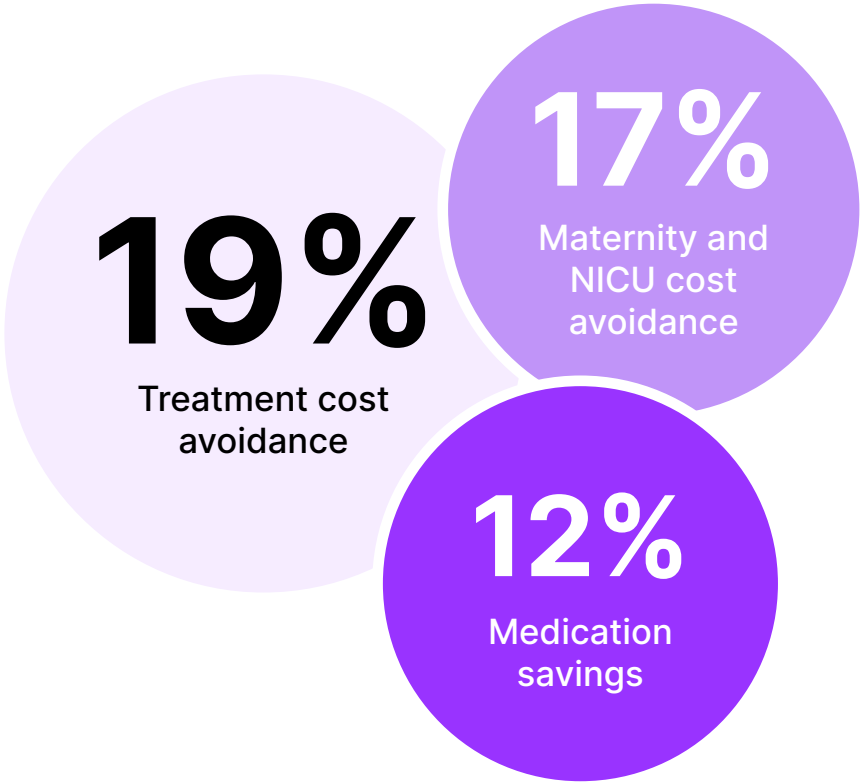
<sup>5</sup> CDC (2024)

Driving Value for Employers

Progyny delivers financial value in three main areas:

- 1. **Fertility cost savings**  
Progyny’s 23% higher birth rate and 21% lower miscarriage rate decreases the total fertility treatment and associated medications needed to achieve a healthy, singleton pregnancy. Our 61% lower multiples rate and 96.6% SET rates means employers avoid the cost burden of high-risk pregnancies, NICU stays, and post-partum complications associated with multiple births. Because Progyny focuses on singleton births, employers can expect significant cost avoidance due to fewer multiples. For clients that elect to provide integrated fertility medication, Progyny Rx delivers an additional 10% savings from our waste management protocols.  
  
Progyny’s high-touch Pregnancy and Postpartum management from early pregnancy through 1 year postpartum reduces perinatal risk factors through early intervention. This drives a reduction in preterm birth and NICU rates, non-medically necessary C-section rates, and urgent care and ER visits. In addition, increasing breastfeeding initiation, connection to timely behavioral health resources, and improved return-to-work rates drive a reduction in total cost of care from high-risk maternity journeys.
- 2. **Productivity and absenteeism**  
With superior clinical outcomes, members require fewer treatments and less medication, need fewer appointments, and with full PCA support, have reduced stress. Members in our Pregnancy and Postpartum as well as our Menopause and Midlife programs experience an earlier return to work and fewer absences and leaves from unmanaged symptoms.
- 3. **Negotiated rates and outcome guarantees**  
Progyny leverages its scale, reduced administrative burden for providers, growth, and leadership to negotiate favorable rates with its network providers, laboratories, and pharmacies. Our model enables us to provide clients with outcome guarantees that are directly related to cost savings.

Through Progyny’s unique combination of competitive provider rates, bundled episodes of care, active clinical quality oversight, and targeted waste reduction, our clients consistently realize measurable outcomes and sustainable cost containment.<sup>6</sup>



<sup>6</sup> Outcomes data is from 7/1/2023 to 6/30/2024, for the Progyny Book of Business allowing for the time required to gather accurate clinical outcomes for ART cycles.



## Investing in Families: How Prudential's Fertility and Family Building Benefit Drives Employee Well-being and Cost Savings

**Client:** Prudential

**Industry:** Insurance and Financial Services

**Benefits-Eligible Lives:** 20,000+

**Year Implemented:** 2021

**Progyny Benefit:** Fertility and family building program, including: Fertility treatment coverage, fertility preservation, integrated fertility medication, adoption and surrogacy financial assistance programs; Menopause and midlife care

**Benefit launch:** 2022 (fertility and family building); 2025 (menopause and midlife care)

### The Challenge

Prudential, a trusted leader of insurance and financial services, understands that investing in the professional and personal well-being of its employees is essential for success. When multiple employees shared their difficulties in navigating their family building journey, including with their dollar maximum fertility benefit, the Prudential benefits team knew it was time to find a new solution. Employees faced a fragmented member journey and sometimes ran out of coverage before they achieved a successful outcome. They weren't guided to high-quality providers and the lack of clinical guidance led to poor outcomes, high rates of multiple births, and high maternity costs. A one-size fits all benefit didn't support the needs of a diverse employee population. They wanted to solve for their pain points but with the right benefit program — one that was supportive, equitable, clinically-oriented and built around outcomes.

Prudential embarked on a market search where they evaluated various solutions. They selected Progyny, a transformative fertility, family building, and women's health benefits solution that has created a proven model for fertility and women's health, driving superior clinical outcomes and cost containment year after year. For Prudential, this partnership has led to more healthy pregnancies and babies, fewer high-risk pregnancies and NICU visits — with considerable cost savings and high member satisfaction.

Now in year four of the program, Prudential has continued to enhance their benefit, providing increased financial assistance for adoption and surrogacy and new support all the way through menopause and midlife care — ensuring that all eligible employees can access essential support for all life's family-building milestones.

### The Solution

Building a family is a highly personal journey, and Prudential wanted to ensure that a new solution would allow employees access to high-touch, dedicated support from integrated clinical experts; comprehensive, inclusive coverage that drives evidence-based care; and high-quality care from a nationwide network of top providers.

Prudential was drawn to Progyny's flexible benefit model, which ensures members get the right care at the right time for their unique needs. Progyny Care Advocates (PCAs) are the first point of contact for members, providing one-on-one clinical guidance and emotional support for every family building journey. Members start with Progyny's preconception and trying-to-conceive program, which offers personalized clinical programming and dedicated expert support from PCAs to help members reach their goals without fertility treatment. For those who do require treatment, Progyny's model addresses the complexity and nuances of fertility care while closing the gaps commonly found in carrier coverage and dollar max plans.

The company was also impressed that Progyny's model was clinically-focused and outcomes-oriented throughout, where Prudential employees have access to a directly contracted, actively managed single-tier network of top providers — all credentialed by Progyny as an NCQA-accredited organization for credentialing.

### Implementation and Launch

Prudential was pleased with Progyny's "easy button" approach to contracting and implementation. Progyny offers dedicated Client Success and Implementation support and has established integrations with more than 60 different medical carriers, health plans, and payors. Progyny's team handles everything from carrier integration and transition of care to coordination with other benefit partners, and member communication materials.

To ensure that all employees were aware of the new benefit, Progyny provided Prudential with the communications and support they needed to make a splash prior to launch. They used multiple methods and channels of communication to spread the word and build excitement and awareness, including engaging with business resource groups and their benefits hub.

Results

Superior clinical outcomes

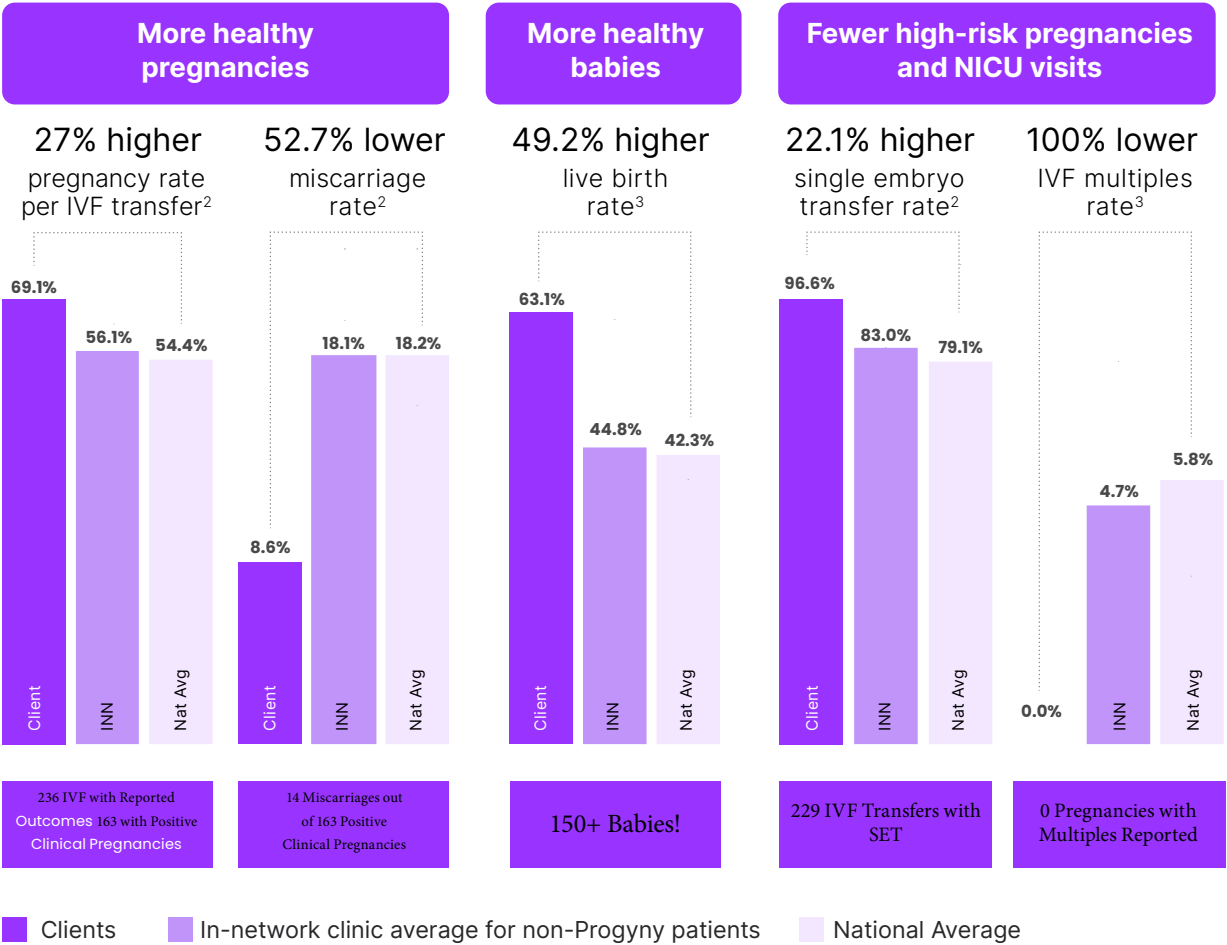
Progyny is unique in that they collect outcomes for every patient, so Prudential receives detailed levels of reporting on engagement, utilization, treatment mix, and spend that allow them to fully understand the value of the Progyny program. With Progyny, Prudential employees are getting pregnant faster, requiring less treatment and medication, and having healthier pregnancies and babies—saving valuable time and money, and limiting personal and professional disruption.

Prudential has achieved clinical outcomes that far surpass the national average on every meaningful measure:

- 100% lower multiples rate
- 22.1% higher single embryo transfer rate
- 52.7% lower miscarriage rate
- 49.2% higher live birth rates
- 27% higher pregnancy rate

The impact has been truly life changing – with 150+ babies born to date.

Clinical Outcomes Achieved<sup>1</sup>



<sup>1</sup>Client represents client member usage of Progyny in-network provider based on the program-to-date period ended December 31, 2024. For each client outcome presented, the p-value when compared to the national average is <0.0001. Client IVF Multiples calculation does not count pregnancies which are a result of a natural split.

<sup>2</sup>SART (2024)

<sup>3</sup>CDC (2024)

Highly-satisfied member experience

Prudential employees expressed extreme satisfaction with the benefit, noting the deep relationships they formed with their PCAs and extensive choice of top-tier providers. Over 40% of engaged Prudential members benefited from high-touch, dedicated expert coaching alone without the need to pursue fertility treatment. PCAs engaged with Prudential employees on average 7 times during their treatment, for an average of 19+ minutes – reflected in the NPS of +81 and highlighting the importance of an engagement model which is high touch and high tech.

“My PCA did such an amazing job explaining everything to me. It was the best experience. I’ve never had this type of service at a company before.”

- Prudential Member

Savings that drive value — short-term and long-term

With Progyny, Prudential has a clear view into the ROI of the benefit and superior clinical outcomes translate to savings – the 49.2% higher live birth rate means Prudential spends less on treatment and medication and the 100% lower IVF multiples rate helps Prudential avoid high-risk maternity and NICU expenses. Since launching with Progyny, Prudential has realized \$5.5M in program-to-date cost avoidance.

Since the company’s launch in 2022, Progyny’s benefit has been instrumental for the company’s employees, helping them grow their families with a supportive, high-quality member experience and outcomes that, quite literally, changed their lives. Progyny is proud and humbled to play a role in supporting Prudential’s employees in achieving their dreams of family for years to come.

“Thank you to my PCA! You provided me with all of the necessary information and answered all of my questions during my initial call. You made me feel at ease by going through all of my fertility benefits and treatment options. I am happy to have Progyny as a service provider and I am looking forward to working with you.”

- Prudential Member



# SOLUTION EVALUATION GUIDE





Solution Evaluation Guide

The following resources will be helpful to employers when evaluating vendors in the family forming space. The chart below (Figure 1) provides an overview of indicative vendor solutions. Employers have diverse family forming needs and may wish to provide comprehensive support, while others may focus

on a specific phase of the journey. To assist in the evaluation process, we have also provided a set of questions to consider when evaluating vendors.



**Figure 1.** Family Forming Landscape Overview. This graphic is intended to provide an indicative, but not comprehensive, view of the family forming solution market. For convenience, the solutions have been sub-categorized based on their primary focus; however, the sub-categories are not mutually exclusive. Solutions in this category may address other areas such as primary care, caregiving, and women’s health.

## Sample RFI/RFP Questions

This list should not be considered a comprehensive list of all questions an RFP should include. Rather, these are additional questions that can be included to elicit differences between solutions that may be less visible in typical RFP questionnaires, supporting you in finding the partner that is most aligned with the interests and needs of your organization.

While some questions below may specifically address a specific part of the family forming journey, we encourage you to ensure you are asking questions addressing all the journeys you are considering—e.g. preconception, fertility, male fertility, adoption/surrogacy, pregnancy, postpartum, return-to-work, parenting, and/or midlife/menopause.

### Member Experience

1. How do you support those pursuing fertility treatments? Do you offer support for those who wish to conceive without fertility treatment?
2. Describe your services – preconception, fertility, pregnancy, and postpartum support services. Detail if you provide in-person or virtual care by area of service.
3. Do you offer additional support for members in between in-person appointments (e.g., care advocacy, telehealth appointments with providers, educational resources)?
4. How do you ensure members receive comprehensive fertility guidance that prioritizes lifestyle modifications and natural conception support before progressing to more invasive treatments?
5. Do you provide assistance to members who have care preferences based on their faith? Please describe.
6. Please provide programming available to address members with SDoH needs.
7. Which features of your program (i.e. trying-to-conceive support, maternity support, video appointments, etc.) occur within your platform and which are delivered via third-party partners?
8. Describe each provider type that is available to members for virtual support (please note any provider types that are accessible only via third-party partners).
  - a. What is the availability of these providers?
  - b. Is there any limitation on how frequently members can engage with providers?
  - c. Is there any cost to clients or members for each appointment?
  - d. What are their credentials/qualifications?
9. Describe your specific services and support model, and detail if it is an included service or an add on:
  - a. Male-specific services (e.g. male infertility and testosterone deficiency)
  - b. Menopause care
  - c. Pregnancy and postpartum care
  - d. Doula care
  - e. Pelvic floor care

10. For each of the services listed above that you offer, describe how you encourage and measure engagement.
11. Describe the services you provide to members who are looking to have a doula to support their pre- and post-natal experience. Do you provide information only or do you directly match members with a certified doula? How are doula services integrated with your maternal health services?
12. How do you support parents who are returning to work after taking family/parental leave?
13. Describe the services you offer to support parents. What age ranges are included in your support? What are the backgrounds of experts who support parents? Are these available on-staff or via contractors or partner networks?
14. Are members required to pay for treatment services? Are they required to pay upfront before treatment can be rendered? Do you offer a benefit/wallet/pre-paid card? Is there a fee (and how much is it) charged to the member by either you or the provider for using the card?
15. How do you approach pricing transparency for the member in regards to fertility treatment costs? Are members provided with an outline of total cost (member and employer share) prior to treatment?
16. How do you approach member transparency in regards to pregnancy and birthing costs? Are members provided with an outline of total cost (member and employer share) prior to receiving treatment?

### Clinical

17. How are your clinical guidelines and policies developed and governed? How are they adapted to incorporate emerging technologies / services? How frequently are they reviewed and updated?
18. What ability does your organization have to monitor and assure that your providers are following best clinical practices?

### Pharmacy

19. Please describe your medication model.
20. What Rx discounts do you provide and how do you provide them?
21. Do members have to pay up front? Can members go to any pharmacy?
22. Who are your pharmacy partners and how long have you been working/partnered with them?
23. How are costs contained in your Rx program?

### Network

- 24. What types of providers do you have in the U.S. and how many?
- 25. For each of the services listed below, describe your provider network. Do you own the network, contract directly with providers, credential providers?
  - a. Male-specific services
  - b. Menopause care
  - c. Pregnancy and postpartum care
  - d. Doula care
  - e. Pelvic floor care
- 26. How does your organization handle out-of-network coverage? For example, if a member has tissue stored at an out-of-network clinic.
- 27. How is your clinical management relationship with fertility clinics developed? How often do you review the clinics that our members will engage with? Describe the review process in detail.
- 28. Describe the extent of your network management. Do you have a discount-based network, or do you directly credential and manage providers for both quality and cost? Do you apply quality standards to your contracts with providers?
- 29. Describe your provider network model/care delivery model. Include how providers can join your network, if they are exclusive to your network and how they are credentialed. How frequently do you refresh new/terminating providers?
- 30. How are network provider fees negotiated and managed?
- 31. At what cadence do you renegotiate rates of reimbursement with your network providers?
- 32. What percentage of your clinic partners report to SART and/or CDC?

### Global

- 33. Please describe your Global reimbursement capabilities. Will members have full access to a pre-funded card outside of the U.S.? Can reimbursements be processed in a member's local language and currency?
- 34. What types of providers do you have in your network outside of the U.S. and how many?
- 35. Describe your language capabilities. Is your platform available in other languages? If so, does the translation include adjustments for cultural relevance? Are members able to receive live support in their native language?
- 36. Are all of your services available globally? How do these services differ by country?
- 37. How many appointments do you have available weekly for global members?
- 38. How do you ensure consistent, culturally competent care for members around the world?
- 39. How are in-person referrals vetted and personalized for the members' needs? How do you ensure global network quality?

### Clinical Outcomes

- 40. Have your fertility and maternity outcomes been validated by a third party? Please provide your outcomes as compared to national averages and describe how you collect the member data that you report on.
- 41. Please explain the clinical outcomes you can show from your pregnancy and postpartum support.
- 42. Has your organization published or conducted peer-reviewed or claims-based studies? How many and what were the outcomes/results?
- 43. Describe how clinical outcomes are collected and reported by your organization. Do the outcomes reported to a client represent that client's actual population? The whole population or a sample? Actual or projected? Please be specific and include a description of your methodology and any third-party reports which validate your outcomes.
- 44. If providers do not share outcomes with you, how do you: A) provide client-specific reporting instead of clinic-level reporting around outcomes like pregnancy rate, live birth rate, multiples rate; and B) know if clinics are adhering to best practices like transferring a single embryo for just the client's patients?
- 45. **Outcomes Definitions and Calculation Criteria:** Please include the latest two years available and state the dates covered by each outcome. *(See next page)*

### Financial Outcomes

- 46. What are your financial outcomes? How do you track and measure the ROI of your program? E.g. employee retention, workplace productivity, etc.
- 47. Describe your cost avoidance/cost mitigation strategies.
- 48. Over the past three years, what overall pricing relief have you attained for your clients?

### Reporting & PGs

- 49. Can you provide both the utilization and claims usage projections using only the client's demographics, as opposed to providing a range or book of business projection? Why or why not?
- 50. Provide a specific list of performance guarantees and fees-at-risk you will offer for service and program outcomes.
- 51. Please provide the calculation method and data source for your Book of Business outcomes, and clarify whether they are self-reported, direct from providers/clinics, or a mixture.
- 52. Describe your reporting capabilities. What standard reports do you provide? Please provide examples.

OUTCOME	CALCULATION		DATE RANGE	YOUR%
	Numerator	Denominator		
Single Embryo Transfer	Count of all IVF treatments in which a transfer occurred within the respective date range AND where SET was performed.  N: _____	Count of all IVF treatments in which a transfer occurred with the respective date range.  D: _____		
IVF Pregnancy Rate per Transfer	Numerator: Count of all IVF treatments in which a transfer occurred within the respective date range AND clinical pregnancy was confirmed.  N: _____	Count of all IVF treatments in which a transfer occurred within the respective date range.  D: _____		
IVF Miscarriage Rate per Pregnancy	Count of IVF treatments within the respective date range with confirmed clinical pregnancy and confirmed miscarriage (loss of pregnancy).  N: _____	Count of IVF treatments within the respective date range with confirmed clinical pregnancy.  D: _____		
IVF Live Birth Rate per Transfer	Count of all live births for IVF treatments in which a transfer occurred within the respective date range.	Count of all IVF treatments in which a transfer occurred within the respective date range.		
C-section rate	Count of members joining prenatally who reported a cesarean birth within the respective date range	Count of pregnancy members joining prenatally		
NICU Admission rate	Count of members joining prenatally who reported a NICU admission within the respective date range	Count of pregnancy members joining prenatally		

## Health Plan Integration

- 53. Describe your experience working and coordinating with a plan's medical carrier. Are there any additional considerations or costs for coordinating with more than one medical carrier? Can you integrate with all carriers?
- 54. Are you able to analyze the providers in our health plan network based on cost and quality?
- 55. Can services through your program result in a claim to a health plan?

## Compliance

- 56. What level of compliance support do you provide to clients? Do you provide taxation support, guidelines relating to IRS or ERISA rules, provide a plan document/SPD, guidance as it relates to qualifying as a group health plan, eligibility, H.S.A. compatibility?

## Pricing and Revenue Sources

- 57. Please describe the differences between a cycle based and a flat dollar fee model. If a member is on multiple journeys (parenting and menopause, for example) will we be charged two case rates for that member?
- 58. Over the last year, what is the average cost increase your customers were presented with at renewal?
- 59. Do you receive revenue via claims when patients seek fertility treatment, from clinic services, or from Rx program/pharmacy arrangements?
- 60. What percentage of medical claims costs are not passed through to the provider?
- 61. If you charge via case rate, what percentage of your case rate is retained as revenue?
- 62. Please describe your pricing model. If you use a case rate, when are clients charged? Please describe what clients would be charged in the following scenarios: calling to ask about the benefit, enrolling but not taking further action, undergoing fertility care. If you charge per active member per year, what designates an active member in year 2, 3, etc.?
- 63. Do you charge an implementation fee?
- 64. What is the cost of your preconception program? If someone does not require any fertility care, what is the fee for that member?
- 65. Please describe your medication pricing and how is it managed?
- 66. How are members billed for services?
- 67. Are your financials readily available for clients to see for full transparency?

## Closing

- 68. Is there anything we didn't ask about that you would like to address, such as other solutions or product offerings, benefit recommendations, or additional clinical outcomes you achieve?



# About The Research

This report was developed by World 50 Accelerator with contributions from Natasha Coult and Sally Welborn. This report includes data derived from a survey of Employer Benefits Accelerator members who are decision-makers in health and wellbeing benefits for large organizations. The survey was conducted in April of 2025, and responses were gathered from 35 unique Employer Benefits Accelerator member companies. Organization sizes range from fewer than 5,000 employees to over 500,000 employees, and member organizations span all major industries. The survey findings were supplemented with interviews with responding Employer Benefits Accelerator members and desktop research.



## World 50 Employer Benefits Accelerator

World 50 Employer Benefits Accelerator is a coalition of the largest and most progressive employers collectively representing over 14 million lives. Our mission is to accelerate the adoption of innovation for the sake of improving employee health, wellness, and productivity. Employer Benefits Accelerator members are well-recognized as forward-thinking leaders in the employee health and wellness benefits space and have shared their experiences, goals, and solutions for achieving superior outcomes in the family forming space while ensuring access and affordability. Learn more at [accelerator.world50.com](https://accelerator.world50.com).

# About Our Research Partners:

The following organizations supported this project, including review of research questions and providing case studies and supplemental information on their program offerings. Their contributed sections are clearly indicated. The Research Partners did not influence the survey responses or interviews with the members, or the general interpretations in this report, which are the independent product of World 50 Accelerator.

## CARROT

### Carrot

Carrot is the leading global fertility, family-building, and lifelong hormonal healthcare platform providing care for everyone, everywhere. Trusted by more than a thousand multinational employers, health plans, and health systems, Carrot’s comprehensive clinical program delivers industry-leading cost savings for employers and award-winning experiences for millions of people worldwide. From maternity through menopause and pre-pregnancy through parenting, Carrot is dedicated to expanding access and improving outcomes. Carrot empowers members with compassionate, personalized, and inclusive support.

Carrot has received national and international recognition for its pioneering work, including Fast Company’s Most Innovative Companies and World Changing Ideas, Inc. Power Partners, and Modern Healthcare’s Innovators. Carrot’s global workforce has been acknowledged with several accolades, including Fortune’s Best Workplaces in Healthcare, Great Place to Work, and Age-Friendly Employer certifications. Carrot is regularly featured in media reporting on issues related to the future of work, women in leadership, and healthcare innovation, including MSNBC, The Economist, Bloomberg, The Wall Street Journal, CNBC, National Public Radio, Harvard Business Review, and more. Learn more at [get-carrot.com](https://get-carrot.com).

## MAVEN

### Maven Clinic

Maven is a women’s and family healthcare company that reaches over 23 million people around the world. Our 24/7 platform provides clinical, emotional, and financial support all in one place. We offer compassionate care at some of the most joyful and vulnerable life stages, from the dads starting their fertility journey, to the postpartum mom returning to work, to the woman navigating menopause. Over 2,000 employers and health plans partner with Maven to deliver more equitable, higher quality care that lowers costs. Visit [mavenclinic.com](https://mavenclinic.com) to explore how Maven can help your organization support women and families with greater confidence—and greater impact.

## progyny

### Progyny, Inc.

At Progyny, our mission is to redefine fertility, family-building, and women’s health benefits by eliminating barriers to care and delivering superior health outcomes. Since 2015, we’ve transformed the landscape of fertility and family-building solutions with an innovative benefit design, the largest actively managed network of fertility and women’s health specialists, and clinically integrated support that guides members proactively through their healthcare journey.

Today, we are the leading comprehensive fertility and women’s health benefits provider, serving over 6.7M lives across 45 industries, including self-insured and fully insured populations in the US and globally. Our clients trust Progyny to optimize costs, enhance member experience, and deliver proven health outcomes, reflected in our nearly 99% client retention rate. For more information, visit [progyny.com](https://progyny.com).