

## SUPPLEMENTAL TABLE 1

Unadjusted and adjusted risk ratios for the association between insurance mandate status and ET practices and perinatal outcomes among ART deliveries resulting from fresh ETs.

Variable	Unadjusted risk ratio	All maternal ages		95% CI
		95% CI	Adjusted risk ratio <sup>a</sup>	
eSET				
<35 y	0.20	(0.12–0.33)	0.12	(0.07–0.20)
≥35 y	0.38	(0.23–0.63)	0.22	(0.14–0.34)
≥3 embryos transferred				
<35 y	3.42	(2.24–5.20)	4.05	(2.62–6.26)
≥35 y	1.08	(0.79–1.47)	1.41	(1.13–1.76)
Twins	1.23	(1.15–1.32)	1.17	(1.09–1.25)
Triplet or higher order birth	2.33	(1.70–3.21)	2.51	(1.17–5.39)
Preterm delivery	1.38	(1.26–1.52)	1.24	(1.13–1.37)
Very preterm delivery	1.79	(1.45–2.20)	1.61	(1.27–2.04)
Low birth weight	1.34	(1.24–1.46)	1.22	(1.09–1.37)
Very low birth weight	1.59	(1.27–1.99)	1.31	(1.06–1.61)
Good perinatal outcome	0.86	(0.83–0.89)	0.88	(0.84–0.92)

Note: The mandate state was the referent for all comparisons.

<sup>a</sup> All models adjusted for age, race, education, parity, prior ART cycles, infertility diagnosis, use of assisted hatching, number of embryos cryopreserved, ART type (donor, nondonor) year of birth, embryo stage, and use of ICSI. The models for eSET and ≥3 embryos transferred also included the interaction of mandate status and age.

Boulet. Insurance and ART. *Fertil Steril* 2015.