



### Fertility Coverage Checklist

**\*\*Please be advised: It is your responsibility to know your infertility insurance coverage.\*\***

You will need to speak with your insurance company to get the following information:

1. Do you have infertility coverage?
  - a. If yes, what does it cover?
    - i. **Intrauterine Insemination (IUI)?** If yes:
      1. What is the maximum number of IUI cycles your plan will cover?
      2. Is there a certain number of cycles that must be completed before you are able to move onto IVF cycles?
    - ii. **In-Vitro Fertilization (IVF)?** If yes:
      1. Does your plan have an **annual or lifetime maximum**?
      2. Do you have coverage for *Boston IVF* or *UMass Memorial IVF Center*? If not, where?
    - iii. **Infertility Medications?** If yes:
      1. What Specialty Pharmacy do you need to use?
    - iv. Does your policy require **prior authorization for the above services, including medications**?
      1. If **yes**, what are the requirements for getting this approval?
        - a. A certain number of semen analyses in a certain time frame?
        - b. Day 3 and/or day 10 bloodwork?
        - c. BMI requirements? Nutrition consult?
        - d. Smoker testing?
        - e. Thyroid testing?
        - f. Urology consult?
        - g. Varicella/Rubella immunity?
        - h. Other infectious disease testing?
        - i. Genetic testing?
        - j. Any other requirements?
      2. If **no** authorization is required by your insurance plan, please note that NERMAS has the same requirements to proceed with a cycle, so you will need to know if you have coverage for them.
    - v. Do you have any **copays, deductible or coinsurance** that apply to these services?
      1. If so, what do they apply to? What percentage of coinsurance do you have? What is your deductible?
    - vi. What are the **exclusions**?
  - b. If no, you will be self-pay for these services.
    - i. **Important Note:** If your insurance does not cover infertility treatment, payment is due in full prior to receiving treatment. Please contact our Fertility Coordinator at (508) 917-6720, option 4, for information about the treatment costs.

Some of the most common CPT codes we use are:	
Insemination	58322
Sperm wash	58323
Sperm count	89260
Specimen thaw	89853

Some of the most common medications we use are:	
Gonal F	Follistim
Clomid	Ovidrel
Menopur	Crinone
Vivelle patch	Lupron

**\*\*Be aware that the request for infertility cycle coverage will not be submitted to your insurance company until you and your partner are up to date on all requirements. Approval can take weeks to get from insurance.**

**What dictates your ability to start a covered cycle is an approval from insurance, *not your cycle*.** \*\*

ALL HMOs REQUIRE A REFERRAL FROM THE PCP IF YOU HAVE COVERAGE FOR FERTILITY SERVICES

**By signing below, I acknowledge receipt of this document and will acquire the information from my insurance company prior to my infertility discussion and starting any treatment.**

\_\_\_\_\_  
Printed Name of Patient

\_\_\_\_\_  
Signer's Relationship to Patient, if other than Self

\_\_\_\_\_  
Signature of Patient / Guardian

\_\_\_\_\_  
Date