

Conga Fertility Benefits

Conga supports all colleagues who want to have a family. Through Aetna and Kaiser, we offer fertility and family building benefits.

AETNA PLANS

Through the Aetna medical plans, you have access to comprehensive fertility services, including:

- Diagnosis of underlying cause of infertility
- Diagnosis, evaluation, and treatment of involuntary infertility
- Stimulated intrauterine insemination (IUI)
- Sperm washing and isolation (simple and complex)
- Prescription drugs based on type of drug and coverage tier
- Artificial insemination (intra cervical and IUI): up to 6 cycles per lifetime
- Ovulation induction: up to 6 cycles per lifetime

See pages 2 – 3 of this flyer for additional information about Aetna's fertility services.

Questions?

Website: www.aetna.com

Member Services: 877-204-9186 (general questions, finding providers, how fertility services are covered in your state)

Pre-certification: 800-333-4432

Mobile App: Use your Aetna member ID to activate the app

KAISER HMO

Through the Kaiser HMO, you have exclusive access to comprehensive fertility services, including:

- Coverage for fertility diagnosis and treatment and artificial insemination (such as office visits, outpatient procedures, laboratory tests, hospital inpatient care, and certain generic and specialty drugs) at *50% coinsurance*.
- Initial office visit may include a pelvic exam, any routine blood tests, cultures, pap smears as needed, and instruction in taking basal body temperature.
- Second office visit may include review of test results, checking basal body temperature charts, and making referrals as necessary.
- Colorado HB22-1008 – Coverage includes three (3) completed egg retrievals and unlimited embryo transfers in accordance with the guidelines of the American Society for Reproductive Medicine (ASRM).

Assisted Reproductive Technology (ART services) are **not covered** in CA.

For details about covered fertility services, refer to your Explanation of Coverage (EOC) on your online Kaiser member portal.

Questions?

Website: www.kp.org

Member Services: 888-681-7878 (Southern CA)
844-201-5824 (Northern CA)
800-632-9700 (Denver/Boulder)

Mobile App: Use your www.kp.org user ID and password to activate the app

Navigate Fertility Coverage with the Help of TouchCare Advocacy

Whether you need to find the right doctor, get an appointment scheduled, or make the right decisions about costs, TouchCare can help.

Visit www.touchcare.com, call **866-486-8242** or email assist@touchcare.com.

AETNA FERTILITY BENEFITS AT-A-GLANCE

	In-Network	Out-of-Network
Comprehensive infertility services	Your cost sharing is based on the type of service and where it is performed	Your cost sharing is based on the type of service and where it is performed
	<i>\$10,000 lifetime limit per person for covered fertility services (combined in- and out-of-network)</i>	
Any services related to the following procedures (e.g., ultrasounds, monitoring):		
<ul style="list-style-type: none">• In vitro fertilization (IVF)• Zygote intrafallopian transfer (ZIFT)• Gamete intrafallopian plan transfer (GIFT)• Cryopreserved embryo transfers• Intracytoplasmic sperm injection (ICSI)• Ovum microsurgery• Gamete intrafallopian plan transfer (GIFT)	Not covered	Not covered

HOW TO GET STARTED

Once you identify your fertility provider or clinic:

1. Complete the [Aetna Infertility Registration Form](#) and send it back to Aetna. You may also ask your provider to do it on your behalf.
2. Aetna will confirm which fertility services are covered.
3. When your provider finalizes a treatment plan, your provider should submit pre-approval to Aetna with associated insurance codes.

Note: Once a procedure is coded as IVF-related, it will not be covered by the plan, even if it is diagnostic testing and could previously be covered without fertility coverage.

AETNA FERTILITY INSURANCE CODES: EXAMPLES OF COVERED SERVICES

Once you and your provider finalize a treatment plan, your provider should submit pre-approval to Aetna with associated insurance codes. Below is a sample list of insurance codes for covered fertility services. *Remember: Once a procedure is coded as IVF-related, it will not be covered by the plan, even if it is diagnostic testing and treatment that would otherwise be covered without fertility coverage).*

Codes	Code Description
58345	Transcervical introduction of fallopian tube catheter for diagnosis and/or re-establishing patency (any method), with or without hysterosalpingography.
58600	Ligation or transection of fallopian tube(s), abdominal or vaginal approach, unilateral or bilateral
76830	Ultrasound, transvaginal
76856	Ultrasound, pelvic (nonobstetric), real time with image documentation; complete
80438	Thyrotropin releasing hormone (TRH) stimulation panel; one hour
84443	Thyroid stimulating hormone (TSH)
84478	Triglycerides
87810	Infectious agent detection by immunoassay with direct optical observation; Chlamydia trachomatis
89280	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes
81406	Molecular pathology procedure, Level 7 (eg, analysis of 11-25 exons by DNA sequence analysis, mutation scanning or duplication/deletion variants of 26-50 exons, cytogenomic array analysis for neoplasia) [determination of CAG-repeat polymorphisms in the polymerase γ (POLG) gene for evaluation of male infertility]
B4185	Parenteral nutrition solution, per 10 grams lipids

For a complete list of insurance codes, visit http://www.aetna.com/cpb/medical/data/300_399/0327.html to review all codes covered under your Aetna medical plan.