

Using Insurance for Fertility Preservation: A Patient Guide

Prepared by:

University of California San Diego and Alliance for Fertility Preservation

UC San Diego Health



We would love your help to improve this patient guide.

Please provide feedback at the link below:



https://redcap.link/ucsd_fertility_toolkit

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YOUTUBE VIDEOS

Welcome to our course for those who are facing treatments that can harm future fertility. This course will help you figure out if you have health insurance coverage for fertility preservation treatments and where you can go to receive fertility preservation treatments. While completing this guide, please review the following videos:

Playlist – <https://www.youtube.com/playlist?list=PLhh1QY7-JL2PECoGp3iUjfMM-bxuCVLO3>

Chapter 1 – Overview: <https://youtu.be/GSAc7LuBKGy>

Chapter 2 – Health Insurance Basics: <https://youtu.be/XxLtDkpl0BY>

Chapter 3 – Benefit Verification: <https://youtu.be/8vrgThO3jSA>

Chapter 4 – In-network Doctors and Clinics: <https://youtu.be/kgEJa6THpMs>

Chapter 5 – Appeals: <https://youtu.be/y4KQitkBR2I>

HEALTH INSURANCE BASICS: GLOSSARY OF COMMONLY USED TERMS

Examples of how these terms apply to fertility treatments can be found at:

<https://www.fertilityiq.com/fertilityiq/fertility-on-a-budget/insurance-101>

- Benefit Verification: Check/verify what medical services are covered by your health insurance plan.
- Claims Processing: How insurance processes the amount to pay for a medical service after it is completed.
- Claims: Requests for payments from your insurance company for medical costs after the medical service is completed.
- Clinic: A type of facility where you receive medical assessments, advice, and care for monitoring, such as bloodwork or ultrasounds.
- Co-insurance: Percentage of medical costs you share with your insurance company after your deductible.
- Co-pay: A fixed amount of money you pay for a medical service.
- CPT code: A unique code for a medical service.
- Deductible: The amount of money you must pay for approved services before your insurance starts to pay for any medical services.
- Facilities: Places you go for medical services, including clinics, surgery centers, hospitals, laboratories, assisted reproductive technology laboratories, sperm banks.
- Fertility Specialist: A doctor who focuses on helping people have children now or in the future.

- Financial Counselor: Someone who works at a clinic and provides advice on the costs of medical care. Financial counselors may help with benefit verification, prior authorization, claims processing, and appeals.
- Fully-insured plans: When an employer purchases insurance from an insurance company to cover employee health benefits. This is sometimes called “fully funded.”
- Grievance: Complaint or dispute expressing dissatisfaction.
- Human Resources: The department in a company that deals with employee-related matters, including benefits. There may be different types of human resources within your company that provide different services.
- Iatrogenic: Illness or condition caused by medical treatment (a side effect).
- ICD-10 Code: The International Classification of Diseases and Related Health Problems is a health care classification system, in which health conditions are assigned a specific code.
- IMR: Independent medical review. This is a state process that provides consumers with an independent external review of coverage denials by their insurance company.
- In-network: Healthcare providers and facilities that have agreed to work with your insurer, costing less for you.
- Insurance: A service that helps cover the cost of medical care.
- Medically Indicated Fertility Preservation: Fertility preservation services done to decrease the chance of infertility after medical treatments such as chemotherapy, radiation, removal of reproductive organs, or transplant.
- NPI (National Provider Identifier): A unique number assigned to a healthcare provider.
- Out-of-network: Healthcare providers and facilities that have not agreed to work with your insurance plan, which often costs more for you.

- Pharmacy: A place you can go to get medicine.
- Predetermination: Approval from your insurer that a medical service will be covered.
- Prior Authorization: Approval from insurance company before a medical service.
- Public Plan: A government-sponsored health insurance program, like Medicare, Medicaid, and military health insurance plans.
- Reimbursement: Repayment for money that you spent.
- Self-insured plans: When an employer provides employee health benefits directly to the employees. Here, an insurance company only administers the plan.
- Tax ID: A unique identification number used by healthcare facilities for tax purposes.
- Treatments: Medical acts or interventions to improve health, like medicine or surgery

HEALTH INSURANCE BENEFIT VERIFICATION PHONE SCRIPT

Instructions: Follow this telephone script to learn if you have fertility preservation coverage. **Instructions for you are in bold.** *What you should say to the health insurance plan is italicized.* **Note, some insurance companies have a nurse navigator who can help you verify your benefits.**

Patient Information

Please fill out this portion before you call your health insurance.

Name: _____ Date of birth: _____

For health insurance, are you the:

Subscriber/policyholder Dependent or Spouse

If you get your insurance through a spouse or parent/guardian, please write:

Spouse/Parent/Guardian Name: _____ Date of birth: _____

Medical condition for why you need fertility preservation (example: breast cancer)

Name of condition: _____

ICD-10 Code of condition (your doctor’s office can provide this code): _____

Insurance plan: _____

Policy ID: _____

Group/Account: _____

Insurance Plan Type: PPO POS HMO Other: _____

Insurance Phone #: _____

Insurance Type

Call member services (the number is on the back of your health insurance ID card) and follow the phone prompts to benefits and eligibility to talk to a benefit agent. Write down the date and whom you talked with:

May I have your name and a reference number for today’s call?

Date of calling health insurance plan: _____

Insurance benefit agent name: _____

Insurance call reference number: _____

I have been diagnosed with _____ (add medical condition for why you need fertility preservation), and my planned treatment can harm my fertility. I am calling to verify if my

benefit allows coverage for fertility preservation because my medical treatment might cause infertility.

The benefit agent will verify your identity by asking for your name, policy ID, and date of birth (DOB).

Verify if your plan is required by the state you live in to have fertility preservation benefits through state fertility preservation benefit laws:

Is my plan publicly funded by Medicare, Tricare, or Veterans Affairs?

- Yes [**Currently not required to have fertility preservation benefit, proceed to No Coverage section**]
- No [**Proceed to next question**]

Is my plan publicly funded by Medicaid?

- Yes [**If based in a state with a mandate, the plan may be eligible to have fertility preservation benefits, proceed to the next section: Out-of-pocket Costs**]
- No [**Proceed to next question**]

Is my plan a federal employee plan?

- Yes [**Required to have fertility preservation benefit, proceed to the next section: Out-of-pocket Costs section**]
- No [**Proceed to next question**]

Is my plan fully-insured (also called fully funded) or self-insured (also called self-funded)?

- Fully Funded/Fully Insured [**If based in a state with a mandate, the plan is required to have fertility preservation benefit, proceed to next question**]
- Self-funded/Self-insured [**Currently not required to have fertility preservation benefit, but employers may choose to provide benefit anyway, proceed to next question**]

Out-of-pocket Costs

Write down the share of costs that you pay out of your pocket.

I have a list of questions about the policy:

What is my individual deductible amount?

Have I met the individual deductible for this year?

Yes No Notes:

(If relevant because you have multiple family members on this insurance policy) *What is the family deductible amount?*

(If relevant because you have multiple family members on this insurance policy) *Has the family deductible been met for this year?*

Yes No Notes:

What is the copay for office visits with a specialist?

What is the co-insurance percentage for specialist services?

Are deductibles, copays, or co-insurance from specialist services applied to the maximum out-of-pocket costs?

Yes No Notes:

What are the out-of-pocket maximum costs?

Individual: \$

(If relevant because you have multiple family members on this insurance policy)

Family: \$

Fertility Preservation Coverage

Verify which fertility preservation insurance codes are covered by your plan.

You will give them “CPT codes” to check for coverage for specific services. They are unique codes for every fertility preservation procedure. The benefit agent will check each code against the plan policy for determination.

I have a list of CPT codes that will be needed during my fertility preservation treatment. They are NOT being used for the treatment of standard infertility. They are for preventative services before I undergo treatments for (cancer or medical conditions) which can make me infertile. Can you tell me if they are billable codes for my plan?

Procedure (CPT Code) - Female	Billable code?	Co-Pay %
Egg Retrieval (58970)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Oocyte identification (89254)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Culture (89250)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sperm preparation (89261)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Insemination (89268)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
ICSI (89280/89281)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cumulus co-culture (89251)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Assisted hatching (89253)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Blastocyst (89272)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Oocyte cryopreservation (89337)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Embryo cryopreservation (89258)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Embryo biopsy (89290, 89291)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Preimplantation genetic testing - aneuploidy (88299)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Preimplantation genetic testing – PGT-M or PGT-SR (81228, 81479, 81229)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Oocyte storage (89346) Length allowable	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Embryo storage (89342) Length allowable	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Ovarian tissue cryopreservation (89398)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Oophorectomy (58940)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Procedure (CPT Code) - Male	Billable code?	Co-Pay %
Sperm preparation (89261)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sperm cryopreservation (89259)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Sperm storage (89343) Length allowable	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Biopsy of testis (54500, 54505)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Biopsy of epididymis (54800)	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Is there a lifetime maximum for fertility preservation services?

If so, lifetime maximum for fertility preservation:

Number of cycles

Maximum \$

Do both medications and treatments accumulate toward the lifetime maximum?

Lifetime maximum includes medications and treatments: Yes No

Is there any coverage exclusion if I have previously been sterilized?

Previous Sterilization: Yes No

Is there any limit based on my age? What is the age limit for treatment coverage?

Maternal Age Limit: Yes No (age?)

Are there any other limits or exclusions that I should be aware of?

Pharmacy Benefits

Check for pharmacy benefits but they may be through a different company.

Do I have pharmacy benefits for fertility drugs?

Common Drugs for Females	Billable?	Co-Pay %
Gonal-F	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Follistim	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Menopur	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Ganirelix Acetate	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cetrotide	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Clomiphene citrate	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Letrozole	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Pregnyl	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Ovidrel	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Novarel	<input type="checkbox"/> Yes <input type="checkbox"/> No	

What is the lifetime maximum for fertility drugs? \$

If your pharmacy benefits are through a different company, ask for the below information:

What is my prescription plan number?

What is the phone number where I can check my pharmacy benefits?

Out-of-network Coverage

Is there out-of-network coverage?

- Yes **[Proceed to next question]**
- No **[Skip to “Finding an In-network Clinic”]**

I have a list of questions about out-of-network coverage:

Are there out-of-network surgery benefits?

- Yes No

Are there out-of-network physician benefits?

- Yes No

What is the individual deductible amount? \$

Has the individual deductible been met for this year?

- Yes No, amount met to date: \$

What is the family deductible amount? \$

Has the family deductible been met for this year?

- Yes No, amount met to date: \$

What is the copay for specialist office visits? \$

What is the co-insurance percentage for specialist services? %

Are deductibles, copays, and co-insurance from specialist services applied to the maximum out-of-pocket costs?

Yes No

What are the out-of-pocket maximum costs?

Individual: \$

Family: \$

How do I submit out-of-network claims for reimbursement?

No Coverage

If the agent states there is NO coverage for iatrogenic treatment/fertility preservation:
How do I appeal the decision that there is no coverage for fertility preservation services?

Finding an In-Network Clinic

Now let's look for an in-network provider using the CPT codes from page 9:
Can you help me find an in-network provider using the CPT codes that we just ran through?

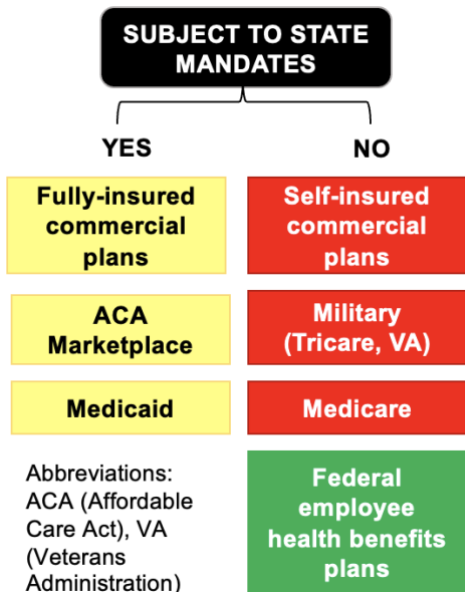
Write down the clinic names and phone numbers in the space below:

You may also request a PDF list of local in-network clinics to be emailed to you.

To contact a clinic, call their phone number and tell them you are a new cancer patient and would like a fertility preservation consultation.

IS YOUR HEALTH INSURANCE REQUIRED BY LAW TO HAVE FERTILITY PRESERVATION BENEFITS?

Even if you are told that you do not have fertility preservation coverage, the state your health insurance is through may have a benefit mandate that requires your insurance plan to have one. Here is how to find out:



Green: Required to include fertility preservation benefits
Yellow: Inclusion of fertility preservation benefits varies by state
Red: Not required to include fertility preservation benefits

First, please use this link to view the Alliance for Fertility Preservation’s map of [State Laws and Legislation by State](#) and see if your state has a fertility preservation benefit mandate.

If yes, the type of health insurance you have can determine if your insurance plan is required to have fertility preservation coverage. Here is how each type of health insurance is affected:

- **Federal employee health benefit plans** are required to have fertility preservation benefits. If you do not see one in your insurance plan, you can appeal.
- **Medicare and military** health insurance plans are not subject to state mandates, so they are not required to have fertility preservation benefits. As of March 2024, they do not cover fertility preservation
- **Self-insured (also called self-funded)** health insurance plans are not subject to state mandates, so they are not required to have fertility preservation benefits. Employers can choose to include fertility preservation benefits. If you do not see fertility preservation benefits, you are unlikely to win an appeal for coverage.

- **Medicaid and CHIP** health insurance plans are subject to state mandates. They may or may not provide fertility preservation benefits depending on your state. If you are in a state with a benefit mandate, you can appeal.
- **ACA Marketplace** health insurance plans are subject to state mandates. They may or may not provide fertility preservation benefits depending on your state. If you are in a state with a benefit mandate, you can appeal.
- **Fully insured (also called fully funded)** health insurance plans are subject to state mandates. They may or may not provide fertility preservation benefits depending on your state. If you are in a state with a benefit mandate, you can appeal.

APPEALS

You may have problems getting access to fertility preservation benefits. For instance, even though some states say health insurance must cover fertility preservation, the rules for who qualifies can change depending on where you live. In addition, you may experience challenges verifying your benefits, getting them pre-authorized, or dealing with insurance claims. Many steps in this process can be appealed. While the length of the appeal process may vary, it is typically 30 to 60 days for most cases, and four days for urgent cases. On the next page is an example of an appeal template letter that a physician can submit on your behalf.

APPEAL TEMPLATE LETTER FOR CALIFORNIA

Appeal letter language in red can be removed or substituted for state-specific laws.

Date:

Patient Name:

Patient DOB:

FOR URGENT REVIEW

_____ is a young woman with _____, for which she PLANNED TREATMENT. As the treatments have potential to cause iatrogenic infertility, and may cause the patient to be unable to have biological children after completion of her cancer treatment, it was therefore medically necessary for _____ to undergo egg/embryo cryopreservation to protect and store her gametes prior to initiation of her chemotherapy. I am writing that it is medically necessary for her undergo fertility preservation procedures.

Egg, sperm and embryo cryopreservation are considered standard medical procedures for the purpose of fertility preservation [1, 2]. The use of fertility preservation for those at risk of iatrogenic infertility is supported by guidelines from the American Society of Clinical Oncology (ASCO) [1] and the American Society for Reproductive Medicine (ASRM) [3, 4]. In addition, the American Medical Association has adopted a policy supporting coverage by all insurance providers of fertility preservation therapies for patients requiring cancer treatments that may result in infertility [5].

The California Department of Managed Healthcare (DMHC) recognizes fertility preservation for cancer patients at risk for iatrogenic infertility as a covered benefit under the Knox-Keene Health Care Service Plan Act of 1975, and this was detailed with the passage of California Senate Bill 600 in 2019. Because this is a covered benefit, the only inquiry that remains is whether or not these services are medically necessary for _____. We urge a review of her case on this basis.

Further, three Independent Medical Reviews (IMRs) addressing this coverage were recently decided and published. [7] All found similarly-situated patients should have been granted coverage for egg or embryo cryopreservation.

Please reconsider your previous denial of coverage for the following:

- o SERVICES

If you have any questions or need further information, please do not hesitate to contact me.

Provider Name

Job title

Facility

Address

City, State, Zip code

Phone number

Fax number

Sincerely,

Clinician name

Clinic contact information

References:

American Society of Clinical Oncology (ASCO). (2019). Fertility Concerns and Preservation for Women. Cancer.Net. <https://www.cancer.net/navigating-cancer-care/dating-sex-and-reproduction/fertility-concerns-and-preservation-women>

American Society of Reproductive Medicine (ASRM). (2019). Fertility preservation in patients undergoing gonadotoxic therapy or gonadectomy: a committee opinion. <https://pubmed.ncbi.nlm.nih.gov/31843073/>

PHILANTHROPIC RESOURCES

Entity and/or Grant Title	Description	Tips and Important Considerations	Link and More Information
Fertility Preservation Resources			
Allyson Whitney Foundation	Provides grants for young adults diagnosed with rare cancers.	Eligibility: US citizen; age 16-36; "rare" cancer diagnosis; "active treatment" (see website for definitions) Coverage: egg retrieval, sperm banking Applications must be requested by a facility (oncology social worker, doctor's office, patient navigator, etc.)	https://allysonwhitney.org/grants/
Chick Mission	Provides grants for cancer patients seeking to preserve their fertility ahead of treatment.	Need to submit screening information before contacting you with grant application. Available only in CA, CO, IL, NJ, NY, TX.	https://www.thechickmission.org/hope-grants/
Expect Miracles Foundation SAMFund	Provides financial assistance to young cancer survivors.	Eligibility: US resident; age 21-39; and more Notification within 10 to 11 weeks after application deadline	https://expectmiraclesfoundation.org/get-help/
Fertility Within Reach	Provides educational resources for access to fertility treatment and fertility preservation.	Patients and clinic should complete application together	https://fertilitywithinreach.org/fertility-preservation
Livestrong Fertility	Provides reproductive information, resources and financial support to survivors whose cancer and its treatment present risks to their fertility.	Eligibility: Present in the US; diagnosis of cancer; oncologist determined cancer treatment poses risk to fertility; oncologist or reproductive endocrinologist have determined treatment is appropriate.	https://livestrong.org/how-we-help/livestrong-fertility/
NMDP (formerly	Provides fertility preservation grants	Eligibility: diagnosis of sickle cell disease; pre-transplant; and more Coverage: egg retrieval and cryopreservation; embryo culture,	https://www.sicklecellconnect.com/

known as Be The Match)	to patients with sickle cell disease.	fertilization, cryopreservation; ovarian tissue freezing; sperm banking; TESI, storage fees, medication	
ReUnite Oncofertility	Offers discounted medications to oncology patients undergoing fertility preservation.	Eligible medications: follistim AQ cartridge; ganirelix acetate injection; pregnyl	https://reuniterx.com/discount-programs/
Entity and/or Grant Title	Description	Tips and Important Considerations	Link and More Information
Team Maggie's Dream	Supports, educates and provides financial assistance to teens and young adults with cancer seeking fertility preservation.	Eligibility: US citizen; age 15-37; and more	https://www.teammaggiesdream.org/grants
Verna's Purse	Provide discounted long-term storage for clients with eggs/semen/ovarian tissue/testicular tissue.	Requires blood testing for infectious disease	https://reprotech.com/vernas-purse/
Walgreens Specialty Pharmacy	Provide female patients going through fertility preservation treatment with select fertility products donated by Ferring Pharmaceuticals.	Eligibility: new diagnosis of cancer; female; and more Coverage: 2 fertility preservation cycles	https://www.walgreens.com/topic/pharmacy/specialty-pharmacy/fertility-preservation.jsp
General Infertility Resources			
AGC Scholarships	Provides advocacy and scholarships for people struggling	Eligibility: US citizen; age 18 plus; diagnosis of infertility Notification within two to three weeks after application deadline	https://agcscholarships.org/application/

	with infertility for any reason.		
BabyQuest Foundation	Provides grant financial assistance to those who cannot afford infertility treatments such as IVF, egg and sperm donation, egg freezing, and gestational surrogacy.	Eligibility: US permanent resident; ASRM definition of infertility; fertility treatment has not yet begun; and more Coverage: egg and sperm donation, egg freezing, IVF, IVF with PGD, embryo donation, surrogacy Notification within four to six weeks after application deadline	https://babyquestfoundation.org/applying-for-a-grant-2/
Bob Woodruff Foundation	Provides resources and financial support to veterans struggling with infertility due to service-related issues and who are ineligible for IVF through the VA.	Eligibility: service-connected condition causing infertility; use a SART clinic that can provide a W-9 form	https://bobwoodrufffoundation.org/VIVA/