



QUICK POINTS

Reproduction treatment

Effective on or after January 1, 2009 Employer Provider Network, Inc. (EPNI) will introduce a new Reproduction Treatment benefit. All EPNI **Service Cooperative** plans, based on the group renewal date, will be replacing the current six-cycle infertility treatment benefit with reproduction treatment. The intent of this Quick Point is to inform providers of the administrative guidelines for reproduction treatment.

Medical policy

For medical policy information, including medical codes defining treatment, refer to the reproduction treatment medical policy, II-02, available on www.ccstpa.com. Click on “providers” then “medical policies.”

Reproduction treatment services

- artificial insemination (AI): The introduction of semen from a donor into a woman’s vagina, cervical canal or uterus by means other than sexual intercourse.
- intrauterine insemination (IUI): A specific method of artificial insemination in which semen is introduced directly into the uterus.
- non-investigative assisted reproductive technologies (ART): Fertility treatments in which both eggs and sperm are handled. ART procedures involve surgically removing eggs from a woman’s ovaries, combining them with sperm in the laboratory and returning them to the woman’s body or donating them to another woman.
- Non-investigative drugs used to treat anovulation, ovarian dysfunction or unexplained infertility in women. Reproduction Treatment drugs include, but are not limited to:
 - Ovulatory stimulants, including follitropins and monotropins
 - Chorionic gonadotropin (HCG)
 - Gonadotropin-releasing hormones

Ineligible services include, but are not limited to:

- cryopreservation of reproductive tissue, embryos, or sperm
- thawing of cryopreserved reproductive tissue, embryos, or sperm
- management and/or storage of reproductive tissue, embryos, or sperm
- donor services relating to reproductive tissue, embryos, or sperm

Please route this information to other interested staff.

Page 1 of 3

Benefit information

Services defined by EPNI as reproduction treatment are subject to a combined lifetime dollar maximum per person for all eligible medical and prescription drug services. Charges related to reproduction treatment will be combined for all networks. Services related to infertility testing will continue to process under “physician services” and will not be subject to the lifetime dollar maximum for reproduction treatment.

The dollar maximum is a combination of the following services:

- artificial insemination (AI)
- intrauterine insemination (IUI)
- non-investigative assisted reproductive technologies (ART)
- associated lab and diagnostic imaging services
- prescription drugs, which include injections either self-administered or administered by a health care professional and oral prescription drugs

Coverage of medications is subject to a product-specific formulary, specialty drug program or other requirements as outlined within a member’s specific contract benefits.

Prior authorization is *only* required for benefit plans **without** dollar maximum limitations.

Definitions

- infertility testing: Services associated with establishing the underlying medical condition or cause of infertility. This may include the evaluation of female factors (e.g., ovulatory, tubal or uterine function), male factors (e.g., semen analysis or urological testing) or a combination of both. Infertility testing involves a physical examination, laboratory studies and diagnostic testing performed solely to rule out causes of infertility or establish an infertility diagnosis.
- reproduction treatment: Treatment to enhance the reproductive ability among members experiencing infertility after a confirmed diagnosis of infertility has been established due to either female, male factors or unknown causes. Treatment may involve oral and/or injectable medication, surgery, artificial insemination, intrauterine insemination, assisted reproductive technologies or a combination of these.
- six-cycle: (NOTE: Some self-insured plans may still elect this benefit instead of a dollar maximum.) A cycle is defined as one partial or complete fertilization attempt extending through the implantation phase only. A treatment cycle can involve both drugs and insemination and can be timed with the completed menses. Once a pregnancy is confirmed, the cycles can begin again. Any cycle billed to the claims administrator using artificial insemination (AI), intrauterine insemination (IUI) and/or prescription drugs will be applied to the six-cycle maximum. If the patient abandons a treatment regimen before the cycle is complete, the partial cycle may be counted as one of the six (6) eligible cycles or the patient may assume all charges for that cycle in order to preserve benefits for six (6) complete cycles.

Disclaimer

The defined reproduction treatment services and related coding applies to all EPNI **Service Cooperative** plans. Some Subscriber Contracts may **exclude benefits for reproduction or infertility treatment**. Benefits for self-insured plans may vary. Coverage decisions are subject to all terms and conditions of the applicable benefit plan, including specific exclusions and limitations, and to applicable state and/or federal law.

Questions?

If you have additional questions, please contact provider service at **(651) 662-5200** or **1-800-262-0820**.