

## **GatorCare Infertility Benefits FAQs**

- Q: I am the Subscriber (employee) and have been on a GatorCare plan continuously for two years. I just added my spouse two months ago to the plan. Is my spouse eligible for this benefit immediately?
- A: No. The patient receiving treatment must be enrolled in a GatorCare plan continuously for at least two years before the benefit will apply.
- Q: I was previously employed at UF Health and recently rehired. Do I need to meet the two-year wait period before I can access the Infertility Treatment benefit?
- A: Yes, you will need to meet the two-year continuous employment period to become eligible for Infertility Treatment benefits. Prior service is not counted.
- Q: I have been working at UF for the last three years as a Post Doc, and recently became employed at UF Health Shands. Am I required to wait two years before I am eligible for the Infertility Treatment benefit?
- A: As long as you have been continuously employed by a participating Employer Group for at least two years you would still be eligible for this benefit.
- Q: I recently became employed at UF Health Shands and was previously covered under GatorCare through my spouse's plan for a year. Do I have to wait two years to be eligible for Infertility Treatment benefits based on my date of hire at UF Health Shands or does the fact that I have been a GatorCare member for a year count toward my eligibility?
- A: As long as you have been continuously enrolled in a GatorCare plan or continuously employed by a participating Employer Group for at least two years you do not need to wait two more years. Since you were enrolled in a GatorCare plan for one year, and are now employed at UF Health Shands you will have one more year until you are eligible.
- Q: I've been employed at UF Health Shands in a PRN position for five years. Last month, I changed my employment status to a benefits-eligible position and enrolled in GatorCare Prime Plus. Am I immediately eligible for Infertility Treatment since I've been employed for more than two years?
- A: Yes, you would be eligible if you meet the definition of infertility.
- Q: I used this benefit while I was a COM resident. I was hired after my residency, and I am now a faculty member with the COM. Am I still eligible for this benefit?
- A: You will have access to the balance that remains of the Lifetime Maximum limit of \$30,000.
- Q: If I am in a same-sex relationship, are my partner and I eligible for this benefit?
- A: Yes, ARS benefits are provided for a Subscriber, Spouse, or Domestic Partner for a biological female up to the date on which you turn 42 years who has been enrolled in a GatorCare plan OR continuously employed by a participating Employer Group for two years, AND has a current diagnosis of Infertility, that is characterized by the failure to achieve a clinical pregnancy after 12 months or more of regular unprotected sexual intercourse OR due to a person's inability to reproduce as an individual or with their partner\*, with the intention of resulting in conception in that Subscriber, spouse or Domestic Partner.

<sup>\*</sup>A two female couple trying to conceive are considered infertile by the following criteria and must meet one or all of the below to be eligible for the GatorCare Infertility Benefit:

- 1. A known fertility condition including documented blocked fallopian tubes
- 2. Anovulation
- 3. Failure to conceive with 6 prior cycles of donor sperm insemination in natural cycles or failure to conceive after 4 cycles of superovulation and donor insemination

**Please note**: If the patient receiving treatment is not the subscriber (employee) then that patient must be enrolled in a GatorCare plan continuously for at least two years before the benefit will apply.

- Q: Some Infertility benefits reference specific ages. Is it age as of birthdate, birth month, or birth year?
- A: It is age as of birthdate. For example, after the 42<sup>nd</sup> birthdate use of Infertility benefits for ARS would no longer be offered to biological females. Prior authorization is required for all services.
- Q: Based on my current clinical history and evaluation, I am not considered a current candidate for IVF according to UF Reproductive Medicine specialists at the Springhill Reproductive Endocrinology Institute. Am I able to seek immediate care from another Provider and receive IVF coverage?
- A: No, infertility benefits are not covered for services received from any provider not affiliated with the Springhill Reproductive Endocrinology Institute. Fertility interventions will be determined by the treating UF Health provider based on the member's medical, sexual and reproductive history, age, physical findings, and diagnostic testing using evidence-based guidelines from the Society of Assisted Reproductive Technology (SART).
- Q: My husband and I have not been able to get pregnant. He was recently seen by a UF Health Urologist who recommends that he be evaluated. Would that evaluation and any treatment he needs be covered under this benefit?
- A: Yes, depending upon the cause of infertility. If a hormonal imbalance or production problem is causing the lack or decreased sperm production, medication may be able to restore or increase sperm production.

If the cause is an obstruction (as in the case of scarring or inflammation from infection, ejaculatory cysts, or epididymal cysts) surgical treatment to restore patency of the vas deferens or bypass the obstruction are options. Additionally, sperm retrieval with assisted stimulation or retrieval from the testicle may be performed directly for many of these cases. Infertility resulting from a previous vasectomy would not be covered.

Prior authorization is required for all infertility treatment services.

- Q: My first child has cystic fibrosis. My husband and I want to have a second child with IVF and preimplantation genetic testing. Would this be covered under this benefit?
- A: No, since you do not have a diagnosis of infertility.
- Q: I'm 45 years old and froze eggs seven years ago when I was diagnosed with cancer. I'm now cancer free. Would I be eligible for this benefit?
- A: Yes, because your eggs were frozen before you turned 42 years old, you are eligible for this benefit. With cryopreservation, the age at which your eggs/embryos were retrieved and frozen would determine the success rate of IVF.

- Q: My fallopian tubes are blocked and filled with fluid. My doctor told me that I might be able to conceive naturally if he can do surgery to check the tubes and try to open them. Is that covered under this benefit?
- A: Yes, surgical procedures to evaluate and re-open the fallopian tubes are covered, except in cases where the tubes are blocked from a tubal ligation or a failed reversal of tubal ligation.
- Q: I had my tubal ligation reversed, but I am still not able to get pregnant. Would I be eligible for services under this benefit?
- A: No, services to treat infertility resulting from voluntary sterilization or a failed reversal of voluntary sterilization, either tubal ligation or vasectomy, are not covered under this benefit.
- Q: I read storage of cryopreserved sperm and mature oocytes/embryos may be up to three (3) months after retrieval but is limited. Does that mean I must self-pay for this service after the limited time stored at UF Health Reproductive Medicine? Can I use a flexible spending account (FSA) to cover these expenses following the transfer to another facility?
- A: Fertility preservation and cryopreservation services are covered for a condition that the treating physician anticipates will cause infertility in the future. Yes, the member must self-pay for cryopreservation of sperm or mature oocytes/embryos after they have been transferred to another facility by UF Health Reproductive Medicine. Yes, this is an eligible FSA expense, for up to one year. Beyond one-year, cryopreservation is not an FSA-eligible expense.
- Q: I want to go to an infertility doctor who is not part of Springhill Reproductive Endocrinology Institute. Will I still be able to get infertility medications through my GatorCare plan?
- A: Medications for infertility treatment must be prescribed by a UF Health Reproductive Medicine physician at Springhill Reproductive Endocrinology Institute or a UF Health Urologist specializing in male fertility, and dispensed from the UF Health Outpatient Pharmacies at Medical Plaza, Springhill, or the UF Health Ambulatory Pharmacy in Jacksonville to be covered through your GatorCare plan. The medications are subject to a \$125 Rx deductible and applicable Tier coinsurance, age, and eligibility requirements are subject to an annual \$5,000 Maximum Out of Pocket for this benefit, and a \$30,000 Lifetime Maximum for combined Medical and Rx benefits.

For more information please contact one of our GatorCare Dedicated Florida Blue Representatives

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In the event that any ambiguity arises between these FAQs and the Certificate of Insurance or the Plan Documents, the terms of the Certificate and Plan Documents will prevail.