

All Infertility Services

Effective July 1, 2010, members receiving any infertility service, included but not limited to In-Vitro Fertilization (IVF) and Artificial Insemination, will be required to pay a 25% coinsurance for health care and 25% coinsurance for prescription services associated with all infertility services. There is a \$10,000 lifetime maximum for health care services for infertility and a \$15,000 lifetime maximum for all prescriptions for infertility. Members approved for IVF prior to July 1, 2010 and who have received IVF services through their health care provider at any time since January 1, 2009, are not responsible for the 25% coinsurance on health care and 25% coinsurance for prescription services and will be grandfathered to retain a lifetime maximum of \$30,000.

The health care provider is responsible for tracking the member's expenditures and notifying the member when the lifetime maximum of \$10,000 has been reached for health care services. The prescription provider, Express Scripts, will track medications to determine when the lifetime maximum of \$15,000 has been reached. Those members "grandfathered" to receive a lifetime maximum of \$30,000, as referenced above will be tracked by the health care provider for health care services and prescriptions. Members moving from one health care plan to another (from BCBSD's PPO Plan to BCBSD's Blue Care/HMO Plan) or from one health care provider to another (from BCBSD to Aetna) will have their expenditures tracked to ensure the lifetime maximum is not exceeded.

IVF services must be pre-approved by the health care provider, Blue Cross Blue Shield of Delaware (BCBSD) or Aetna.

Members of either health care plan are responsible for paying 25% coinsurance for all prescriptions at time of pick up or mail order (25% of the cost of the prescription). Members must always present their Medco ID Card when having prescriptions filled.

BCBSD's First State Basic Plan Members:

- If an in-network provider is used, 65% of the fees are subject to the deductible. After the member receives services, the provider will bill BCBSD first and then bill the member the applicable 35%.
- If an out-of-network provider is used, 45% of the fees are subject to the deductible. An out-of-network provider may require the member to pay the member's portion before services are provided or may bill the member directly.

BCBSD's Comprehensive PPO Plan Members:

- No specialist copay applies to All Infertility Services.
- If an in-network provider is used, 75% of the fees are covered. After the member receives services, the provider will bill BCBSD first and then bill the member the applicable 25%.
- If an out-of-network provider is used, 55% of the fees are subject to the deductible. An out-of-network provider may require the member to pay the member's portion before services are provided or may bill the member directly.

BCBSD's Blue Care (also known as IPA or HMO) Plan Members:

- No specialist copay applies to All Infertility Services.
- If an in-network provider is used, 75% of the fees are covered.
- If an out-of-network provider is used, 0% of the fees are covered. The member is responsible for the entire fee as there are no out-of-network benefits in the Blue Care plan.

Additional information on All Infertility Services is provided in the BCBSD's Summary Plan Description for each health care plan located at <http://ben.omb.delaware.gov/medical/bcbs/index.shtml>

Aetna's HMO Plan Members:

The 25% coinsurance is determined based on the negotiated or allowed amount.

Aetna members pursuing All Infertility Services are assigned to an Aetna nurse who is responsible for confirming that all criteria are met. The nurse will advise the member of the applicable benefit. When claims are paid, the EOB will provide the co-insurance amount that the claims paid at and the amount the member is responsible for paying the provider directly.

Additional information on All Infertility Services is provided in the in Aetna's Summary Plan Description located at <http://ben.omb.delaware.gov/medical/aetna/index.shtml>

For further assistance contact:

Statewide Benefits Office at 1-800-489-8933 or 739-8331

BCBSD's Customer Services at 1-800-633-2563 or 429-0260

Aetna's Customer Services at 1-877-542-3862