

Definition of Infertility: Health Alliance™ follows the state of Illinois' definition of infertility:

1. Not getting pregnant or not carrying a pregnancy to live birth after 12 months of regular, unprotected sex if the woman is 35 or younger, or after six months if the woman is over 35. Miscarriages do not reset the 12-month or six-month period.
 2. A person can't have a baby without medical help, either alone or with a partner.
 3. A doctor's findings based on a patient's medical, sexual and reproductive history; age; physical findings; or tests.
1. **How do I find out if I have coverage for infertility services?** Call the Customer Service/Benefit Questions number on your Health Alliance ID card. This information is also in your Health Alliance member booklet. Your doctor can also call Health Alliance for you.
 2. **How do I find out what services are covered under my infertility benefit?** Infertility benefits can vary. Check your Summary Plan Description (SPD) or Insurance Policy Document. Some plans cover only infertility evaluations, others cover treatments like medications and intrauterine insemination (IUI), and some cover assisted reproductive technology (ART) like in vitro fertilization (IVF). Call the Customer Service/Questions number on your ID card for details.
 3. **Does my plan have a maximum lifetime benefit (MLB)?** Most plans do not have an MLB for infertility services, but some employer plans might. Call the Customer Service/Benefits Questions number on your ID card to find out.
 4. **Is prior authorization required for infertility treatment?** Yes, prior authorization is needed. Your doctor can submit a request with medical information and a treatment plan.
 5. **Are infertility medications covered?** Most plans cover infertility medications, but it depends on your benefits. Call the Customer Service/Benefit Questions number on your ID card for more info.
 6. **Is prior authorization required for IUIs (intrauterine insemination)?** If you have authorization for infertility services and your plan includes artificial insemination, no prior authorization is needed for IUIs.
 7. **Is prior authorization required for IVF (in vitro fertilization)?** Most plans with IVF benefits require prior authorization once you're approved for infertility services. Call the Customer Service/Benefit Questions number on your ID card for details.
 8. **How many IUIs (intrauterine insemination) without achieving pregnancy are needed before proceeding to IVF (in vitro fertilization)?** Health Alliance requires three medicated IUIs that did not result in pregnancy before you can move to IVF. If your doctor thinks IUIs are not needed, they should submit that information with the request.
 9. **Does my Health Alliance plan cover donor eggs and/or sperm?** Some plans cover donor eggs and/or sperm and need prior authorization. Your doctor will need to submit information with the request. Call the Customer Service/Benefit Questions number on your ID card to find out.
 10. **Does my Health Alliance plan cover surrogacy?** A gestational surrogate is a woman who carries and gives birth to a child for someone else. To find out if your plan covers surrogacy, call the Customer Service/Benefit Questions number on your ID card.
 11. **How can I find the names of doctors/locations that provide infertility treatment (that are covered by my Health Alliance plan)?** A reproductive endocrinologist is a specialist who treats infertility. Men with infertility issues can see a reproductive urologist. Call the Customer Service/Benefit Questions number on your ID card to find doctors/locations that are covered by your plan.
 12. **Does my Health Alliance plan cover genetic testing?** Fully insured plans cover preimplantation genetic screening and testing (PGS/PGT). Self-funded plans usually do not. Call the Customer Service/Benefit Questions number on your ID card to find out if your plan covers genetic testing.

13. Is cryopreservation (freezing) and storage of eggs, sperm and embryos covered? Most plans do not cover cryopreservation and storage if you're diagnosed with infertility. Call the Customer Service/Benefit Questions number on your ID card to check.

Fertility preservation saves eggs, sperm or reproductive tissue so a person can have a biological child in the future. This is often done before cancer treatment or gender reassignment surgery. Health Alliance requires prior authorization for fertility preservation. If approved, initial cryopreservation and long-term storage are covered. Call the Customer Service/Benefit Questions number on your ID card for more info.