## Insurance Information



It is your responsibility to verify your insurance coverage. Your insurance may make a distinction between coverage for testing and treatment.

- <u>Testing</u> includes bloodwork, ultrasounds and imaging (HSG, SIS, MRI, etc.) to determine the cause of infertility or pregnancy loss. The documents in this packet that address testing are:
  - Preconception Screening
    - Done before treatment/pregnancy to ensure baseline health.
    - Please note: You will not receive a bill from ACRM for this bloodwork panel as it is not processed by our lab. It is sent out to either Quest Diagnostics or LabCorp depending on your insurance coverage. Once the bloodwork is processed, you will receive a bill from one of these entities.
  - Financial Guidelines for Testing Phase
    - Tests of eggs, sperm, cervix, uterus, fallopian tubes to determine a cause for the infertility and/or to prepare for specific treatment.
  - We use a 3<sup>rd</sup> party vendor (Myriad) for Recessive Gene screening
    - This test may be covered by your insurance. If it is not, you can elect the self-pay price of \$349/person. The company (Myriad) that does the test will email you with a cost estimate prior to running the test you must email them back to cancel the test.
- <u>Treatment</u>: Once a diagnosis is established (even "unexplained infertility") and a treatment plan begins, all future tests (including bloodwork, ultrasounds and imaging) will be considered <u>treatment</u>. The documents in this packet that address treatment are:
  - Financial guideline for Timed Intercourse Cycle
    - May be used with Clomid or Letrozole medications
  - Financial guideline for Intrauterine Insemination (IUI) cycle
    - May be used with Clomid or Letrozole medications
    - Does not include the cost of donor sperm, if applicable (donor sperm will be ordered from outside sperm bank)
  - o In Vitro Fertilization (IVF)
    - You will have a dedicated financial consult prior to IVF because the cost will depend on your individual treatment plan, as well as your insurance coverage for medications, procedures and bloodwork.
    - Cost ranges:
      - IVF cycle fee: \$11-13K + meds (\$3-5K) + optional embryo genetic testing (CCS): \$3-4K
      - Embryo Transfer cycle: \$4400 + meds (

## Important information about the CCRM Atlanta Lab

CCRM Atlanta is the in-house laboratory for ACRM. CCRM Atlanta will file claims to your insurance company for blood tests run in-house, provided that you have coverage for the diagnosis code, and that CCRM Atlanta is in-network with your insurance plan. CCRM Atlanta is contracted with all networks contracted with ACRM with the exception of BCBS and Humana - blood tests run in-house for patients covered by BCBS and Humana are self-pay at the billed amount.

- Bloodwork during the testing phase may be run in-house ("CCRM Atlanta" lab) or sent out.
- Bloodwork during the treatment phase must be run in-house ("CCRM Atlanta" lab) in order to have same-day results.
  - If your insurance plan is out-of-network with CCRM Atlanta or if you do not have coverage for the diagnosis code, you will be self pay for all services rendered by CCRM Atlanta and payment is due at the time of service.
    - We can provide documentation for you to file out-of-network benefits.