

Rating for infertility rider:

Diagnosis and treatment of underlying medical cause of Infertility is covered for all plans through the medical benefit – this is an EHB (Essential Health Benefit) requirement. Treatment for infertility is not covered as a standard benefit but is available through an optional rider.

Optional Rider

Treatment of infertility covered at 50% coinsurance (in and out-of-network) up to \$2,000 lifetime maximum for services and \$1,500 lifetime maximum for infertility drugs per member (in and out-of-network combined) for the following medical services:

- Medications administered in a Physician's office
- Reconstructive Surgery, except for sterilization reversal
- Artificial insemination
- Supplies and appliances
- In vitro, GIFT & ZIFT

Separate \$1,500 lifetime maximum for drugs prescribed for treatment of infertility.

If a group chooses the infertility rider, an additional \$90 will be charged per subscriber per month. This applies to all areas and ages.

Example:

**\$90 (per month premium)
X 5 (employees)
= \$450**