

Enhanced Infertility Coverage

All Aetna medical plans provide coverage for the diagnosis and treatment of the underlying medical condition causing infertility. Additionally, once you have received an infertility diagnosis, Aetna covers artificial insemination, ovulation induction, and advanced reproductive technologies such as IVF, ZIFT, GIFT and ICSI, if you and your doctor decide that is the best course of action.

Expenses related to your infertility treatment, including prescription medications, are covered based on the same copay, deductible, coinsurance and out-of-pocket maximum provisions applicable to other eligible health expenses in your plan. Please note there are limitations to the number of covered cycles per lifetime.

Infertility is defined as:

- For a female with a male partner, after:
 - 1 year of frequent, unprotected heterosexual sexual intercourse if under the age of 35
 - 6 months of frequent, unprotected heterosexual sexual intercourse if age 35 or older
- For a female without a male partner, after:
 - At least 12 cycles of donor insemination if under the age of 35
 - 6 cycles of donor insemination if age 35 or older
- For a male without a female partner, after:
 - At least 2 abnormal semen analyses obtained at least 2 weeks apart
- For an individual or their partner who has been clinically diagnosed with gender identity disorder

Aetna Concierge Hotline

The Aetna Concierge hotline can help answer questions about your specific situation. The hotline can also provide support in languages other than English. Call at 1-833-359-0121 or log on to www.Aetna.com.