



**THE MIDWEST CENTER FOR
REPRODUCTIVE HEALTH, P.A.**

Arbor Lakes Medical Building, Suite 350
12000 Elm Creek Blvd North
Maple Grove, MN 55369

Phone 763.494.7700
Toll Free 800.508.9763
Fax 763.494.7706
Web Site www.mcrh.com

Insurance and Financial Information

We realize that, when dealing with infertility treatment, finances are often a primary concern for our patients. As business office representatives, we are always here to answer any financial questions as they arise. In addition, we have put together this packet as a helpful tool. We hope that you find this information to be helpful as you proceed with your treatment. If you have any questions or would like more information, please do not hesitate to contact our office between 8:00am and 4:00pm by calling (763) 494-7736.

Since we are unable to give you exact, concise information regarding your specific insurance coverage, this packet will help to give you clear ideas on how and what to do to get the necessary information directly from your insurance carrier. We have enclosed a list of commonly asked questions for the business office and a series of questions for you to ask your insurance company.

Please review the information in this packet, as we believe it will serve as a basic foundation for understanding your finances with regards to your fertility treatment options. We also hope that this will help you formulate any specific questions you may have. Again, please don't hesitate to call us if we can be of further assistance.

Thank you.

Commonly Asked Questions for the Business Office

Do you accept my insurance?

The Midwest Center for Reproductive Health is considered an out-of-network provider for most major insurance companies. Additionally, we do participate as an in-network provider for Health Partners and Blue Cross of North Dakota. When services such as IVF are provided at MCRH, these are processed as out-of-network services for Blue Cross of North Dakota patients, most often resulting in substantial payment for the services.

Most insurance plans will allow you to see out-of-network providers. Deductibles and coverage levels vary, but often there is little difference in coverage between in-network and out-of-network providers, resulting in significant patient reimbursement.

Talking with one of our business office representatives will allow you to get detailed information of how your specific insurance coverage will apply.

What does it mean if MCRH is an out-of-network provider?

An “out-of-network provider” means that MCRH is not directly contracted with your insurance carrier. However, because your insurance carrier values your right to choose your own care provider, your plan may include out-of-network benefits. Just because we are an out-of-network provider does not mean you will not receive reimbursement for care received at MCRH. Most carriers require a deductible be satisfied (the deductible amount is determined by your policy). Once the deductible has been satisfied they may cover 60-80%, or even more, of our billed services.

This means that while you may have more responsibility up front, your additional coverage may be quite comparable to in-network providers. This is not always the case, however, so we encourage you to check your benefits directly with your carrier. Also make sure to find out if you have coverage for infertility, because if you do not have infertility benefits, your coverage will not vary whether you go to an in-network or out-of-network provider.

What will my insurance cover?

Due to the number of different types of policies, we are unable to tell you exactly what your insurance will and will not cover. We would encourage you to contact your insurance carrier for this information. In an effort to assist you, we have enclosed a sample pre-determination of benefits letter that would be sent to your insurance company. If you would like a complete IVF pre-determination of benefits packet, listing all procedure codes and costs, please call our business office at (763)494-7736.

What are my financial responsibilities?

Regardless if MCRH is an in-network or out-of network provider, you will be responsible for all services, paid or not paid by your insurance. This includes all “Usual and Customary” reductions, non-covered or non-eligible services, deductibles, co-insurances and co-pays. Simply, you are responsible for all services incurred. All charges are due in full within 28 days of billing. You will receive a statement indicating any insurance payments and your amount due.

Following your new patient appointment, you will meet with a specialist from the Business Office. During this meeting, the representative will be able to give you more detailed information about your insurance coverage, the costs associated with your treatment options, and how/when any payment will be required. They will also be available to answer any questions you may have. In most cases, nothing is due on the day of your new patient appointment.

My insurance company says I need a referral? Why and how do I get one?

Many health plans require patients to have referrals to receive care from medical specialists and specialty clinics. Others may require a referral for care received outside of their network. While your plan may have “out-of-network benefits”, you will often receive better reimbursement if a referral is obtained. The only way to find out if you will need a referral is to contact your insurance company directly.

To get a referral, you should contact your primary care physician’s office and let them know you will be receiving care at The Midwest Center for Reproductive Health. They will send in the necessary paperwork to the insurance company who, in turn, will send copies of the referral to you and to MCRH.

Because we are a specialty clinic, The Midwest Center does not have the capability to give referrals to other physicians.

Will I have to submit a claim to my insurance company?

Usually MCRH will be happy to submit claims, on your behalf, to the insurance company. Sometimes patients may choose to submit their own claims. In this case, MCRH will help facilitate this process by supplying you with all the information you will need to submit the claims yourself.

Why am I getting this bill? / Why am I getting two bills?

You will receive a monthly statement from our office. If both partners have received care (e.g. lab tests) you will receive two statements each month. You may also receive two statements if you have received services at one of our satellite offices and at The Midwest Center for Reproductive Health in Maple Grove. In this case, one statement will be from Great Planes Reproductive Center, and the other from The Midwest Center for Reproductive Health, P.A.

How much does a cycle of IUI/IVF cost?

One cycle of SuperOvulation with IUI will cost approximately \$3,000 to \$3,500 per cycle. Please note these estimates include medications.

One fresh cycle of in vitro fertilization will cost \$16,000 to \$19,000. If a third party (egg donor, gestational carrier) is involved, the costs will range from \$22,000 to \$25,000. These estimates include medications. For more specific information, please call our Business Office at (763) 494-7736.

Please be careful when comparing prices with other centers. Make sure you are aware of what is and is not included in the package price that is quoted.

Can I go through IVF next month?

We are currently scheduling 5 cycles of IVF procedures per year. To begin the process and get scheduled for a cycle, please call our IVF coordinator at (763) 494-7702.

When will I have to pay for IVF if I choose to go that route?

We require pre-payment on IVF procedures. A month prior to the start of the cycle, we will send out a letter requesting the pre-payment amount. The payment is due three weeks prior to the cycle start date. For more specific information regarding your pre-payment amount, please contact our Business Office at (763)494-7736.

How will payment be accepted?

For your convenience, we also accept Visa, MasterCard and Discover.

Will you submit charges to my insurance company but not mention IVF?

Accuracy is important to our practice and for your care. This applies to billing as well. We assure you that we bill for the exact services we provide, using accurate diagnosis codes. In so doing, we can avoid any semblance of fraud with insurance companies.

If Dr. Corfman is performing my surgery, what do I need to do?

Dr. Corfman is capable of performing a wide variety of surgical procedures and is willing to do so when indicated. Many surgeries are covered by your insurance plan, but in cases where a procedure is not covered or instances in which Dr. Corfman is not a "participating" physician, you will be responsible for charges. In those cases, MCRH will require a pre-payment. Please contact our Business Office to make sure you have a clear understanding of your financial responsibilities.

What Questions Should I Ask My Insurance Provider?

- Does my plan have benefits for infertility treatment?
 - What is included?
 - What is excluded?
- If I have benefits for infertility, is MCRH and/or Dr. Randle Corfman an in-network or out-of-network provider?
 - If out-of-network, will I have to meet a deductible?
- What level of coverage will be applied to covered treatments? (70%,80%, 90%?)
 - Will I have to meet a deductible first?
 - How much is my deductible?
 - After my deductible, are coverage levels the same for participating and non-participating providers?
- Will my level of coverage be based on the allowable amount or the billed amount?
- Will my plan require a referral?
 - Will I have to contact my primary care provider or my OB/GYN?
- Will diagnostic physician office visits be covered?
- Will laboratory treatments (blood draws, ultrasounds, etc.) be covered?
- Will patient education sessions (injection classes, medication outlines, etc.) be covered?
- What types of treatments will be covered?
 - Intrauterine inseminations? (IUI)
 - In vitro fertilization? (IVF)
- Will infertility medications be covered?
 - Which medications are covered?
 - Do I have to use a certain pharmacy?
 - Will I need a prior authorization?
- How many treatment cycles will be covered?
 - How many cycles of IUI can I try?
 - How many cycles of IVF can I try?
 - How many cycles of medications can I try?
- Do I have a maximum calendar year and/or lifetime maximum benefit?

*NOTE: If applicable, be sure to check insurance benefits for you and your spouse/partner.

Sample Letter for Insurance Pre-Determination

Date

Insurance Company XYZ

Address

Address

Pre-determination of benefits for (patient's name)

Group or Group Number

ID Number (also known as member or subscriber number)

Dear Insurance Company XYZ:

My spouse/partner and I are considering In Vitro Fertilization (IVF). This procedure is needed to attempt pregnancy due to (explain your situation, i.e. blocked fallopian tubes, male factor, previous sterilization, unexplained infertility, etc). An IVF fee schedule, with explanations of specific procedure codes, is attached for your review.

Please provide me with a written response to each question below:

1. Will IVF be a payable procedure under my current coverage?
2. If yes, is there a limit of any kind (dollars or number or attempts)? If number of attempts, define an attempt.
3. In no, are any portions of the charges payable (pre-retrieval charges such as prescription drugs, laboratory test and/or ultrasounds)?

I would appreciate a response as soon as possible. Thank you.

Sincerely,

Your name