

UC Health Benefits for Infertility Treatment

The University of California’s comprehensive medical benefits encompass the broad needs of our diverse workforce to keep our employees, retirees and their family members healthy. Nearly all of UC’s medical plans offer benefits for infertility treatment.

Generally, infertility is an involuntary medical condition recognized by a doctor that causes the inability to conceive a baby or the inability to carry a pregnancy to a live birth.

WHAT UC MEDICAL BENEFITS COVER

The chart below provides an overview of UC’s health benefits coverage for infertility treatment. Check your medical plan’s Evidence of Coverage booklet, available on At Your Service (atyourservice.ucop.edu/) for additional details, including the co-pays and deductibles that apply.

PLANS ¹	WHAT’S COVERED	WHAT’S NOT COVERED
Kaiser Permanente – CA ²	<ul style="list-style-type: none"> • Diagnosis and treatment of involuntary infertility • Artificial Insemination • Prescription drugs obtained at a Kaiser facility 	<ul style="list-style-type: none"> • Services related to conception by artificial means ³ • Services related to procurement and storage of semen/eggs • Services to reverse voluntary, surgically induced infertility
Health Net Health Net Blue & Gold	<ul style="list-style-type: none"> • Diagnosis, evaluation and treatment of infertility • Artificial insemination • Prescription drugs 	<ul style="list-style-type: none"> • Services related to conception by artificial means ³ • Harvesting, transplanting or manipulating human ovum • Collection, storage or purchase of sperm or eggs • Services to reverse voluntary, surgically induced infertility
Western Health Advantage	<ul style="list-style-type: none"> • Diagnosis and treatment of involuntary infertility • Artificial Insemination (up to 3 cycles per lifetime) • Prescription drugs 	<ul style="list-style-type: none"> • Services and supplies related to conception by artificial means ³ • Services related to procurement and storage of semen/eggs • Collection, storage or purchase of sperm or eggs • Services and supplies to reverse voluntary, surgically induced infertility
Anthem Lumenos PPO with HRA Anthem Blue Cross PPO Core	<ul style="list-style-type: none"> • Studies and tests for infertility 	<ul style="list-style-type: none"> • Treatment for infertility • Prescription drugs • Artificial insemination • Services related to conception by artificial means ³

PLANS ¹	WHAT'S COVERED	WHAT'S NOT COVERED
Anthem Blue Cross PLUS	<ul style="list-style-type: none"> • Treatment studies and tests • Artificial insemination • Surgery • Prescription drugs administered at physician's office • All services must be provided by a non-network (Tier 2) PPO provider 	<ul style="list-style-type: none"> • In-network (Tier 1) benefits • Services related to conception by artificial means ³ • Services provided by non-PPO (Tier 3) providers • Services to reverse voluntary, surgically induced infertility

¹ Infertility benefits are not included in the High Option plan.
² Kaiser: Some services may require member payment before services are provided.
³ Non-covered services related to conception by artificial means include (but may not be limited to) the following:

- GIFT: Gamete intrafallopian fertilization transfer
- ZIFT: Zygote intrafallopian transfer
- IVF: In vitro fertilization

MORE ABOUT INFERTILITY HEALTH BENEFITS

Medical plan copayments and coinsurance payments for infertility health procedures are eligible for reimbursement from the UC Health Flexible Spending Account if a physician verifies that they are medically necessary.

For additional help with UC's infertility health benefits, consult with a UC Health Care Facilitator and/or call the member services number on your medical plan identification card.

The information presented here does not guarantee coverage. Check the medical plan's booklet for details regarding eligibility for infertility health benefits and covered/excluded care. Services may require preauthorization and/or require members to follow plan guidelines in obtaining services to ensure services are covered.

By authority of the Regents, University of California Human Resources, located in Oakland, administers all benefit plans in accordance with applicable plan documents and regulations, custodial agreements, University of California Group Insurance Regulations for Faculty and Staff, group insurance contracts, and state and federal laws. No person is authorized to provide benefits information not contained in these source documents, and information not contained in these source documents cannot be relied upon as having been authorized by the Regents. Source documents are available for inspection upon request (800-888-8267). What is written here does not constitute a guarantee of plan coverage or benefits — particular rules and eligibility requirements must be met before benefits can be received. The University of California intends to continue the benefits described here indefinitely; however, the benefits of all employees, retirees and plan beneficiaries are subject to change or termination at the time of contract renewal or at any other time by the University or other governing authorities. The University also reserves the right to determine new premiums, employer contributions and monthly costs at any time. Health and welfare benefits are not accrued or vested benefit entitlements. UC's contribution toward the monthly cost of the coverage is determined by UC and may change or stop altogether, and may be affected by the state of California's annual budget appropriation. If you belong to an exclusively represented bargaining unit, some of your benefits may differ from the ones described here. For more information, employees should contact their Human Resources Office and retirees should call the UC Customer Service Center (800-888-8267).

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