



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

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IVF Insurance and Financial Information

We hope that you find this information to be a helpful tool 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?

Talking with one of our business office representatives will allow you to get detailed information about how your specific insurance coverage will apply, as well as help you determine which company will bill for your services. We encourage you to call us anytime there are changes in insurance carriers or treatment plans, as the way the services are billed and reimbursed will change.

The Midwest Center for Reproductive Health (MCRH) bills for IVF related services and is considered an out-of-network provider for most major insurance companies. However, we do participate as an in-network provider for Health Partners and Cigna.

Great Planes Reproductive Center (GPRC) bills for consultative services received at our satellite clinics, and is a participating provider for Blue Cross Blue Shield of ND, Health Partners, Cigna, and Tri-Care when the patient is seen by Dr. Corfman in ND. When services such as IVF are provided at MCRH, these procedures are billed through MCRH.

Most insurance plans will allow you to see out-of-network providers. Deductibles and coverage levels vary and we encourage you to contact your insurance carrier for more information on the specifics of your out-of-network benefits.

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), but once the deductible has been satisfied they may cover 60-80% of the allowed amount.

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. It is the patient's responsibility to contact their insurance carrier for this information. In an effort to assist you, we have added a sample pre-determination of benefits letter to our website 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?

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 when payment will be required. In most cases, nothing is due on the day of your new patient appointment.

If MCRH is an in-network providers you will be responsible for non-covered or non-eligible services (i.e. telephone calls, deductibles, co-insurances and co-pays).

If your care at MCRH is out-of network, 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.

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 or Great Planes Reproductive Center. They will send in the necessary paperwork to the insurance company who, in turn, will send copies of the referral to you and our office.

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

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 our office in Maple Grove. In this case, one statement will be from GPRC, and the other from MCRH.

How much does a cycle of IVF cost?

One fresh cycle of in vitro fertilization will cost \$17,000 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.

When can I go through IVF?

We are currently scheduling 5 series of IVF procedures per year. To begin the process and get set up for an upcoming 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 accept check, cash, Visa, MasterCard, American Express 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.