

SHARP Health Plan

Amendment #2 to your Sharp Health Plan Member Handbook

Effective July 1, 2025, your Combined Evidence of Coverage and Disclosure Form is amended as follows:

1. In the section **What Are Your Covered Benefits?** a new section is added:

Infertility Treatment and Fertility Services

If your benefit plan includes coverage for Infertility Services, Artificial Insemination, and Assisted Reproductive Technologies, the following are covered benefits if you meet the definition of Infertility. If your benefit plan does not include coverage for Infertility Services, Artificial Insemination and Assisted Reproductive Technologies you do not have coverage under this section.

You have direct access to OB/GYNs in your Plan Medical Group for diagnosis and treatment of infertility (your OB/GYN will refer you to an infertility specialist if needed). Fertility services will not be denied based on the Member's participation in fertility services provided by or to a third party. This means Members who meet the definition of infertility provided below will not be denied covered fertility and infertility benefits if they use an oocyte, sperm, or embryo donor, a gestational carrier, or a surrogate that enables the Member to become a parent. Covered Benefits provided to a gestational carrier or surrogate who is not a Member of Sharp Health Plan are limited to covered fertility services for an infertile Sharp Health Plan Member, when recommended and medically appropriate. Covered Benefits for a gestational carrier or surrogate who is not a Member of Sharp Health Plan do not include prenatal, pregnancy, maternity or postnatal services or supplies.

Infertility is defined as a condition or status characterized by the following:

- A licensed physician's findings, based on a patient's medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any combination of those factors. This definition shall not prevent testing and diagnosis of infertility before the 12-month or 6-month period to establish infertility.
- A person's inability to reproduce either as an individual or with their partner without medical intervention.
- The failure to establish a pregnancy or to carry a pregnancy to live birth after regular, unprotected sexual intercourse. For purposes of this section, "regular, unprotected sexual intercourse" means no more than 12 months of unprotected sexual intercourse for a person under 35 years of age or no more than 6 months of unprotected sexual intercourse for a person 35 years of age or older. Pregnancy resulting in miscarriage does not restart the 12-month or 6-month time period to qualify as having infertility.

If you meet the definition of infertility the following are Covered Benefits:

- Artificial Insemination services.
- Maximum of three oocyte retrievals (egg retrievals) and unlimited embryo transfers in accordance with the guidelines of the American Society for Reproductive Medicine (ASRM), using single embryo transfer when recommended and medically appropriate.
- Assisted Reproductive Technologies (ART) procedures include Assisted Hatching, Gamete Intrafallopian Transfer (GIFT), In Vitro Fertilization (IVF), Intracytoplasmic Sperm Injections (ICSI) and Zygote Intrafallopian Transfer (ZIFT).
- Provider administered medications directly associated with the covered Assisted Reproductive Technologies (ART) procedures.

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- Self-administered outpatient prescription medication for treatment of infertility.
- Cryopreservation, when Medically Necessary only as directly pertains to the Authorized Assisted Reproductive Technologies (ART) procedures.

2. In the section **What Is Not Covered?** the following language:

Infertility Services

The following services are not Covered Benefits:

- Infertility services, including treatment of the Member's underlying infertility condition. Infertility is defined as (1) the inability to conceive a pregnancy or to carry a pregnancy to a live birth after a year or more of regular sexual intercourse without contraception, or (2) the presence of a demonstrated condition recognized by a physician as a cause of infertility.
- Assisted Reproductive Technologies (ART) procedures, otherwise known as conception by artificial means, including but not limited to artificial insemination, in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), multi-cell embryo transfer (TET), intracytoplasmic sperm injections (ICSI), blastocyst transfer, assisted hatching and any other procedures that may be employed to bring about conception without sexual intercourse, unless provided as a supplemental benefit. Copayments made for supplemental benefits do not apply toward the annual Out-of-Pocket Maximum.
- Any service, procedure, or process that prepares the Member for non-covered ART procedures.
- Collection, preservation, or purchase of sperm, ova, or embryos. This exclusion does not apply to Medically Necessary Standard Fertility Preservation Services when a covered medical treatment may directly or indirectly cause Iatrogenic Infertility.
- Reversal of voluntary sterilization.
- Testing, services or supplies for conception by a surrogate who is not enrolled in Sharp Health Plan. If the surrogate is enrolled in Sharp Health Plan, medical expenses related to the pregnancy will be covered by the Plan, subject to the lien described in the **What Happens if Enter Into a Surrogacy Arrangement?** section of this Member Handbook.

Is replaced with:

Infertility Treatment and Fertility Services

The following services are not Covered Benefits unless your benefit plan includes coverage for Infertility Services, Artificial Insemination and Assisted Reproductive Technologies:

- Infertility services, including treatment of the Member's underlying infertility condition. Infertility is defined as a condition or status characterized by the following:
 - A licensed physician's findings, based on a patient's medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any combination of those factors.
 - A person's inability to reproduce either as an individual or with their partner without medical intervention.
 - The failure to establish a pregnancy or to carry a pregnancy to live birth after regular, unprotected sexual intercourse. For purposes of this section, "regular, unprotected sexual

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intercourse” means no more than 12 months of unprotected sexual intercourse for a person under 35 years of age or no more than 6 months of unprotected sexual intercourse for a person 35 years of age or older. Pregnancy resulting in miscarriage does not restart the 12-month or 6-month time period to qualify as having infertility.

- Assisted Reproductive Technologies (ART) procedures, otherwise known as conception by artificial means, including but not limited to artificial insemination, in vitro fertilization (IVF), gamete intrafallopian transfer (GIFT), zygote intrafallopian transfer (ZIFT), multi-cell embryo transfer (TET), intracytoplasmic sperm injections (ICSI), blastocyst transfer, assisted hatching and any other procedures that may be employed to bring about conception without sexual intercourse, unless provided as a supplemental benefit.
- Any service, procedure, or process that prepares the Member for non-covered ART procedures.
- Collection, preservation, or purchase of sperm, ova, or embryos. This exclusion does not apply to Medically Necessary Standard Fertility Preservation Services when a covered medical treatment may directly or indirectly cause Iatrogenic Infertility.
- Any services relating to cryopreservation including, but not limited to, collection, storage, thawing, or procedures employing sperm, ova, or embryos that have been cryopreserved when not associated with the covered Assisted Reproductive Technologies (ART) procedures.
- Services, procedures or processes provided to or performed on someone other than the Member.
- Services or supplies for the purpose of surrogate parenting or any other form of third-party reproduction Assisted Reproductive Technologies (ART) procedures other than Assisted Hatching, GIFT, IVF, ICSI, and ZIFT.
- Reversal of voluntary sterilization.
- Testing, services or supplies for conception by a surrogate who is not enrolled in Sharp Health Plan. If the surrogate is enrolled in Sharp Health Plan, medical expenses related to the pregnancy will be covered by the Plan, subject to the lien described in the **What Happens if Enter Into a Surrogacy Arrangement?** section of this Member Handbook.

3. In the **Glossary** the following definitions are added:

Artificial Insemination means the depositing of sperm by syringe into the vagina near the cervix or directly into the uterus. This technique is used to overcome sexual performance problems, to circumvent sperm-mucus interaction problems, to maximize the potential for poor semen, and for using donor sperm.

Assisted Reproductive Technologies or ART means a set of several procedures that may be employed to bring about conception without sexual intercourse.

Cryopreservation means the process of freezing tissue, embryos, ova, or sperm for future use.

Gamete Intrafallopian Transfer or GIFT means a procedure whereby unfertilized ovum are removed from the female and inserted along with sperm into the fallopian tube for the purpose of enhancing the chance of conception.

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In Vitro Fertilization or **IVF** means a procedure whereby unfertilized ovum are removed from the female, fertilized with a donor's sperm outside the body, and implanted directly into the uterus in an attempt to achieve pregnancy.

Intracytoplasmic Sperm Injection or **ICSI** means a procedure whereby a single active sperm is injected into the egg outside the body and inserted into the fallopian tube for the purpose of enhancing the chance of conception.

Zygote Intrafallopian Transfer or **ZIFT** means a procedure whereby unfertilized ovum are removed from the female and fertilized with a donor's sperm outside the body. The pronuclear stage embryo is then inserted into the fallopian tube in an attempt to achieve pregnancy.