



## New Partnership for Fertility Benefit for Eligible Henry Ford Health Team Members

Henry Ford Health has partnered with Carrot Fertility to offer its eligible team members comprehensive, inclusive fertility healthcare and family-forming benefits. Carrot is not health insurance, but rather a healthcare company that provides resources to support fertility care for all. Team members who participate receive employer-sponsored funds, known as Carrot funds, to pay for eligible care and services.

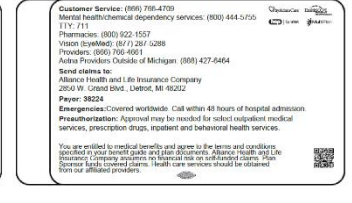
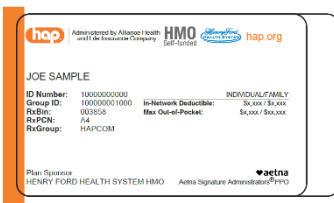
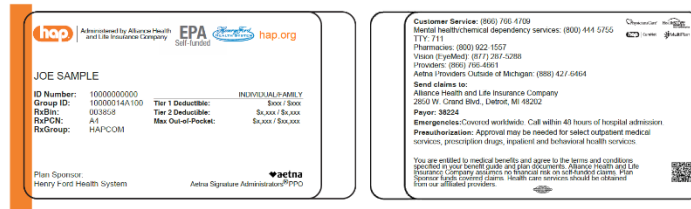
This new benefit is effective April 1. Below are some important details for providers about this benefit.

### Who is eligible for this benefit?

All benefits eligible Henry Ford Health team members and their spouses in HAP ASO plans:

- HFHS Advantage Tiered Access Plan
- CDHP Comprehensive HFHS Preferred HMO
- CDHP Comprehensive Full HAP EPA
- CDHP Basic Full HAP EPA

Below are examples of ID cards for each plan.



You can find more resources when you log in at **hap.org**, and select *Resources; Caring for Patients*, then *Carrot Resources*. We will be providing your office with an educational flyer for you to share with eligible patients.

### How does the benefit work?

1. The member's OB/GYN or internist will determine the member's fertility needs, such as reproductive assistance, adoption, gestational surrogacy, cryopreservation, or other related support.
2. The physician refers the member to an in-network reproductive endocrinologist. Once members create a Carrot Plan, they can search for approved in-network physicians.
3. Members can visit **get-carrot.com/signup** to create their Carrot account on the Carrot platform. Once they meet their plan deductible, they can request a Carrot Card<sup>®</sup>.

## How do members pay for services?

Members have two options to pay for covered services once their plan deductible has been met.

1. Use their pre-paid Carrot Card which has employer-sponsored funds, known as Carrot funds.
2. Pay out of pocket and submit itemized statements for reimbursement.

Below is an example of the Carrot Card that you may see:



## What happens when Carrot funds are exhausted?

Members will pay out of pocket.

## If the member is in the middle of their journey with a reproductive endocrinologist, can they still participate in the benefit when it goes live?

Yes. Once their plan deductible is met, they can use their Carrot Card or pay out of pocket for covered services.

## What is the provider network?

Carrot-eligible providers within the member's HAP plan provider network which include Reproductive Endocrinologists, Reproductive Medicine Specialists, etc.

## Is prior authorization required for any services?

No, there are no fertility services that require prior authorization. However, members will be required to include itemized receipts when submitting expenses for reimbursement, which will be reviewed for approval by Carrot. Prior authorization is required for pharmacy coverage.

## Who do I contact with questions about the benefit?

Please email HAP Provider Services at [providernetwork@hap.org](mailto:providernetwork@hap.org) and put "Carrot benefit" in the subject line.

## Which types of services are covered?

Covered fertility care expenses include procedures and services to help members get pregnant, preserve reproductive material, and assist in coverage of gestational surrogacy or adoption expenses. Carrot covers care for those with and without an infertility diagnosis or other medical necessity. Covered expenses must be recommended and supervised by an eligible provider.

Below is an outline of covered expenses. Note:

- HAP in the coverage column indicates the reproductive endocrinologist will need to submit a claim to HAP.
- "Carrot" in the coverage column indicates members will pay with their Carrot Card or out of pocket.

**Fertility care expenses - include elective procedures and services not associated with an infertility diagnosis.**

<b>Procedure/Services</b>	<b>Diagnostic</b>	<b>Coverage</b>	<b>Fertility</b>	<b>Code</b>	
Fertility consultations	YES	Carrot	Covered	99201-99205 99211-99215	
Semen analysis	YES	HAP	Covered	89300 89320	89321 89310
Fertility preservation for males and females	YES	Carrot	Covered	55899 58970 76830 76948 76856 76857 89254 89257 89259	89264 89310 89320 89321 89337 89343 89346 S4028
Genetic testing related to fertility (e.g., PGT-A, PGT-M)	YES	Carrot	Covered	81228 81229 81479	89201 89290
Intrauterine insemination	YES	Carrot	Covered	58321 58322	58323
In vitro fertilization	YES	Carrot	Covered	55899 58970 58974 58999 76830 76856 76857 76948 89250 89251 89253 89254 89255 89257 89260	89261 89264 89268 89272 89280 89281 S4028 S4011 S4015 S4016 S4017 S4018 S4020 S4021
Storage costs for eggs, sperm, and/or embryos	YES	Carrot	Covered	89258 89259 89337 89342 89343	89346 89352 89353 89356
Fertility medications	YES	HAP	Covered		
Acupuncture (only when recommended by an eligible provider)	YES	Carrot	Covered		
Providers or Ob/Gyns	NO	N/A	Not covered		
Herbal treatments	NO	N/A	Not covered		
Nutritional counseling	NO	N/A	Not covered		
General genetic tests	NO	N/A	Not covered		
Physical therapy or fitness-related expenses	NO	N/A	Not covered		

**Infertility care expenses - include procedures and services to overcome an inability to have children as indicated by a medical diagnosis of infertility, or to address other medical necessity.**

Procedure/Services	Diagnostic	Coverage	Fertility	Code
Fertility consultations	Yes	Carrot	Covered	Same as above- under IVF without medical diagnosis
Semen analysis	YES	Carrot	Covered	
Fertility preservation for males and females	YES	Carrot	Covered	
Genetic testing related to fertility (e.g., PGT-A, PGT-M)	YES	Carrot	Covered	
Intrauterine insemination	YES	Carrot	Covered	
In vitro fertilization	YES	Carrot	Covered	
Transportation of reproductive material with an approved vendor	YES	Carrot	Covered	
Storage costs for eggs, sperm, and/or embryos	YES	Carrot	Covered	
Fertility medications	YES	HAP	Covered	
Acupuncture (only when recommended by an eligible provider)	YES	Carrot	Covered	
Providers or Ob/Gyns	NO	N/A	Not covered	
Herbal treatments	NO	N/A	Not covered	
Nutritional counseling	YES	N/A	Not covered	
General genetic tests	YES	N/A	Not covered	
Physical therapy or fitness-related expenses	NO	N/A	Not covered	

**Gestational carrier expenses**

Procedure/Services	Diagnostic	Coverage	Fertility	Code
Expenses related to donor material, including donor gametes (eggs/sperm) and donor embryos	YES	Carrot	Covered	S4023 S4025 S4026 S4030 S4031
Donation agency or cryobank expenses, where legally allowed, which may include Power of Attorney, notarized documents, and other legal fees	YES	Carrot	Covered	
Costs incurred from matching with donors	YES	Carrot	Covered	
Donor reimbursement/compensation, where legally allowed	YES	Carrot	Covered	
Medications for donors	YES	Carrot	Covered	
Donor diagnostic testing and screening	YES	Carrot	Covered	
Mental health screening of donors	YES	Carrot	Covered	
Any other donor-related fertility care	YES	Carrot	Covered	
Medications and embryo transfer for a GC	YES	Carrot	Covered	
GC diagnostic testing and screening	YES	Carrot	Covered	
Mental health screening of GC	YES	Carrot	Covered	
Any other GC fertility care	YES	Carrot	Covered	
Power of attorney, notarized documents, escrow "set-up", and other legal fees	YES	Carrot	Covered	
GC compensation, living expenses, twin compensation, life insurance, and health insurance	YES	Carrot	Covered	
GC maternity expenses	YES	Carrot	Covered	
Travel costs for GC and intended parents	YES	Carrot	Covered	
Breast milk bank fees, breast pump for GC, and fees to ship breast milk to intended parents	YES	Carrot	Covered	