Harvard Pilgrim Health Care | TUFTS Health Plan

Point32Health companies

Payment Policy:

Assisted Reproductive Technology (ART)

Applies to:

Commercial Products

☒ Harvard Pilgrim Health Care Commercial products
☒ Tufts Health Plan Commercial products

Public Plans Products

☒ Tufts Health Direct – A Massachusetts Qualified Health Plan (QHP) (a commercial product)
☐ Tufts Health Together – MassHealth MCO Plan and Accountable Care Partnership Plans
☐ Tufts Health RITogether – A Rhode Island Medicaid Plan
☐ Tufts Health One Care – A dual-eligible product

Senior Products

☐ Tufts Health Plan Senior Care Options (SCO) (a dual-eligible product)
☐ Tufts Medicare Preferred HMO/PPO (Medicare Advantage products)

Policy

Point32Health reimburses contracted providers for the diagnosis and medically necessary treatment of infertility for members who meet applicable medical necessity criteria when such treatment is reasonably likely to result in viable offspring. Refer to the applicable medical necessity guidelines in the Additional Resources section below for state-specific criteria.

A cycle is considered complete at the point of successful egg retrieval. However, for billing purposes, all medical services provided up to the point of a positive or negative blood pregnancy test result are considered part of the cycle and are covered by the global payment. Any initiated ART cycle, whether completed or cancelled, is counted as a cycle against the total number of approved ART cycles. The total number of approved ART cycles is calculated per lifetime of member and is independent of the insurance coverage. ART services are covered based on the member's schedule of benefits.

Prerequisites

Applicable Point32Health referral, notification, and authorization policies may apply. Refer to the appropriate sections within the Provider Manuals for more information.

Note: For Tufts Health Plan Commercial members, providers must request coverage of a cancelled cycle within 30 days of the cancelled procedure(s) by submitting the Infertility Services Prior Authorization Request form with the appropriate HCPCS code(s) located in the Forms section of the Provider Resource Center.

General Benefit Information

Benefits may vary greatly by products and employer groups. Services and subsequent payment are pursuant to the member's benefit plan document. Member eligibility and benefit specifics should be verified prior to initiating services by logging on to the secure Provider portal or by contacting Provider Services.

Point32Health Reimburses

- Artificial insemination (AI) and intrauterine insemination (IUI), including non-self-administered drugs administered in a provider's office.
- Assisted oocyte fertilization, also known as intra-cytoplasmic sperm injection.
- Assisted reproductive technology procedures (ART)
- Cryopreservation
- Diagnostic testing.*
- Donor sperm.

- Initial evaluation.*
- Laboratory tests.*
- Micro Epididymal Sperm Aspiration (MESA).
- One cycle of ART for members scheduled to undergo chemotherapy and/or radiation treatment that will result in infertility when the purpose of the ART treatment is to produce embryos for cryopreservation. Additionally, Point32Health will reimburse for the freezing and 24-months storage of the embryos produced as a result of this ART cycle.
- Pregnancy test to assess the state of pregnancy.
- Preimplantation genetic testing (PGT) procedures when provided by a contracted provider for members with coverage for infertility services, which meet medical review criteria and were authorized by Point32Health.
- Radiological procedures.*
- Self-administered infertility prescription drugs obtained from a designated pharmacy, only when the member has a drug rider separate from the global allowance.
- Sperm washing in conjunction with an IUI cycle for the treatment of female or male-factor infertility when the infertile partner is a Point32Health member.
- Testicular sperm extraction.

**Certain services are reimbursed separately if not performed in conjunction with an infertility procedure that is paid at an all-inclusive global rate, as outlined in the global rate section below.*

At a Global Rate

ART procedures that are part of an all-inclusive global rate include, but are not limited to:

- Assisted embryo hatching
- Donor oocyte procedure
- In-vitro fertilization
- Gamete intra-fallopian transfer
- Zygote intra-fallopian transfer

Related services that are part of the global rate include, but are not limited to:

- AI and IUI services only when submitted as part of canceled IVF cycle
- Anesthesia services and preparatory testing
- Diagnostic testing
- Embryo preparation/catheter loading
- Evaluation and management services
- Facility charges, including all ambulatory surgery, operating room and recovery room charges and supplies
- Laboratory tests (including semen analysis and sperm antibody tests)
- Non–self-administered drugs related to the ART service
- Nursing
- Ovulation induction monitoring
- Pre- and post-surgical services
- Radiological procedures
- Semen analysis and sperm antibody tests during an active ART cycle
- Surgical procedures (i.e., retrieval and transfer) and management, including technical and professional components of all services
- Teaching
- Ultrasound for follicular maturation

Providers who perform ART-related services (e.g., laboratories and anesthesiology offices) should not submit separate bills to Point32Health for reimbursement. These services are reimbursable by the ART provider. Payment for these services is included in the ART provider's global reimbursement rate. It is the responsibility of the ART provider to educate other providers of this billing requirement. Services submitted by other providers, inclusive of the global reimbursement, are subject to post-payment audit and retraction.

Reimbursed Separately

- Initial evaluation for ART services.
- Laparoscopy and hysteroscopy procedures.
- Micro Epididymal Sperm Aspiration (MESA).
- A confirmatory E&M office visit after the completion of an infertility service once the member is pregnant should be billed using diagnosis code Z32.01 (encounter for pregnancy test, result positive). Failure to use this diagnosis code may cause a denial.

Point32Health Does *Not* Reimburse

- Luteinizing hormone (LH) ovulation kits.
- Donor egg obtained from non-contracted providers.
- Donor sperm and/or insemination procedures used to substitute for lack of a male partner when there is no medical diagnosis of infertility or when the male partner has been voluntarily sterilized.
- Infertility services for members who do not have a diagnosis of medical infertility.
- Microsurgery and/or reversal of voluntary sterilization.
- Ovulation prediction kits.
- Any form of surrogacy or services for a gestational carrier other than covered maternity services.
- Sperm identification when not medically necessary (e.g., gender identification).
- Self-administered prescription drugs when the member does not have infertility as a covered benefit, does not have the prescription drug rider or the member is not in an active and authorized infertility treatment or cycle.
- Non-ART providers who perform ART-related services, e.g., laboratories and anesthesiology offices. (These services are reimbursed by the ART provider.)
- Non-medical services related to donor egg procurement including, but not limited to, finders' fees, broker fees, and legal fees.
- Specimen collection or venipuncture charges made in conjunction with laboratory services or evaluation and management services.
- Shipping and handling charges.

Provider Billing Guidelines and Documentation

Providers are reimbursed according to the applicable contracted rates and fee schedules.

- Submit claims using the National Provider Identification (NPI) number assigned for ART services as both the provider and payee. If any NPI number other than the ART-specific provider number is used, the claim will deny.
- Submit claims for an incomplete cycle **only** if a cycle is cancelled/terminated. Canceled cycle billing may occur during endocrine monitoring and after attempted or completed egg retrieval.
- Submit claims for a cycle only when the cycle is complete. Depending on a cycle completion point, only one global fee can be billed, regardless of the number of services involved in the member's course of treatment, except for HCPCS code S4025 (egg donor services for IVF).

Professional and/or technical services provided by a practitioner or hospital outside of the services defined in the ART contract (e.g., laboratories, anesthesia, gynecological/infertility services), should be billed to the ART provider directly for reimbursement, rather than Point32Health. The ART facility submits one claim for the complete cycle to Point32Health and all services rendered are reimbursed as a global payment in accordance with the applicable financial exhibits of their provider contracts.

It is the ART provider's responsibility to educate other providers who perform ART-related services for members (e.g., laboratories or anesthesiology groups) that they should not submit separate claims to Point32Health. Payment for their services is included in the global compensation for the ART procedure codes listed.

Coding
The following codes are not an all-inclusive list.

Code	Description	Comments
36415	Venipuncture	Not separately reimbursed when billed with blood or related laboratory tests or with E&M services
36416	Collection of capillary blood specimen	Not separately reimbursed
89253	Assisted embryo hatching, micro techniques (any method)	Not separately reimbursed
89258	Cryopreservation, embryo(s)	Typically, reimbursement includes up to 24 months of storage
89259	Cryopreservation, sperm	Typically, reimbursement includes up to 24 months of storage
89337	Cryopreservation, mature oocyte(s)	Typically, reimbursement includes up to 24 months of storage
Q0091	Specimen collection	Not separately reimbursed when billed with laboratory tests or with E&M services or when billed by a facility

Code	Description	Comments
S4011	In vitro fertilization; including but not limited to identification and incubation of mature oocytes, fertilization with sperm, incubation of embryo(s), and subsequent visualization for determination of development	Any incomplete donor cycle should be billed with appropriate incomplete codes S4017, S4020 or S4021
S4026	Procurement of donor sperm from sperm bank—per vial	Attach sperm bank invoice

Related Policies and Resources

Payment Policies

- Imaging Services
- Obstetrics/Gynecology

Clinical Policies

- Assisted Reproductive Technology Services – Maine Products
- Assisted Reproductive Technology Services – Massachusetts Products
- Assisted Reproductive Technology Services – New Hampshire Products
- Assisted Reproductive Technology Services – Rhode Island Products
- Preimplantation Genetic Testing (PGT)

Publication History

12/01/2025: Policy moved to new template; includes all lines of business

Background and Disclaimer Information

This policy applies to the products of Harvard Pilgrim Health Care and Tufts Health Plan and their affiliates, as identified in the check boxes on the first page for services performed by contracted providers.

Payment is based on member benefits and eligibility on the date of service, medical necessity review, where applicable, and the provider's network participation agreement with the Plan. As every claim is unique, this policy is neither a guarantee of payment, nor a final indication of how specific claim(s) will be adjudicated. Claims payment is subject to member eligibility and benefits on the date of service, coordination of benefits, referral/authorization, and utilization management requirements (when applicable), adherence to Plan policies and procedures, and claims editing logic. An authorization is not a guarantee of payment.

Point32Health reserves the right to amend a payment policy at its discretion. CPT and HCPCS codes are updated as applicable; please adhere to the most recent CPT and HCPCS coding guidelines.

We reserve the right to conduct audits on any provider and/or facility to ensure accuracy and compliance with the guidelines stated in this payment policy. If such an audit determines that a provider/facility did not comply with this payment policy, Harvard Pilgrim Health Care and Tufts Health Plan will expect the provider/facility to refund all payments related to noncompliance.