

# INSURANCE AND BENEFITS

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We understand that determining your individual insurance coverage for infertility therapy may seem like an overwhelming process. However, to protect yourself from incurring fees that may not be covered by your plan, **you must obtain written verification of your benefits.**

Insurance companies have specific guidelines in place to help you determine the extent of your fertility benefits. However, this type of information is typically delivered only in response to specific questions asked by the insured party. As a result, important information may be unintentionally omitted.

To help you obtain complete and accurate verification, we have created the following guidelines.

## To Verify Your Benefits:

1. Call the customer service phone number printed on your insurance card. Once you have a representative on the line:
  - o Ask specifically for your benefits relating to infertility
  - o Request written confirmation of these benefits
  - o Obtain the name of the representative assisting you
  - o Document the date, time and a reference # of your call
2. Review your benefits booklet. This is the information provided by your employer if you are part of a group plan. Photocopy the section that pertains to infertility benefits, if applicable.
3. If treatment is covered by your insurance plan, please supply verification of your benefits to the DRM business office. This information should be provided in the form of written confirmation from your insurance provider, or copies from your benefits book.

If treatment is not covered by your insurance plan, payment will be due at time of service. Should you have any questions, our billing department will be happy to assist you at (970) 382-9505.

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Signature

Date