

Fertility & Family-Building Benefits

Supporting Your Path to Parenthood

Western Health Advantage (WHA) is expanding support for members seeking to grow their families. Beginning July 1, 2025, fertility and family-building benefits will be included in all large group plans and offered as a plan option for small groups. Current group contracts will continue with current Infertility (INF) and Family & Diversity Support (FAMDIV) riders until their renewal on or after July 1, 2025.

Who is Eligible?

Eligibility is based on definitions set forth by California law. A member may qualify for fertility treatment coverage based on:

- ★ A physician's findings from medical history, diagnostic testing, and evaluation.
- ★ Inability to conceive or carry a pregnancy without medical assistance.
- ★ Failure to conceive after 12 months (or 6 months if age 35+) of unprotected intercourse. Miscarriage does not reset this time.

What's Covered?

Medically appropriate, authorized care and medications, such as:

- ★ Fertility-related consultations with a WHA provider
- ★ Basic lab work and imaging tests
- ★ Genetic testing for prenatal diagnosis of a rare/serious condition
- ★ Prescribed oral or self-injectable medications (as per WHA's Preferred Drug List)
- ★ Office-administered medications (hormonal therapies, ovarian stimulation)
- ★ Oocyte retrieval, sperm collection and storage
- ★ Artificial Insemination (IUI, ICI, IUI)
- ★ Assisted Reproductive Technology (IVF, ICSI, ZIFT, GIFT, FET)
- ★ Pre- and post-natal care and delivery for WHA member acting as a surrogate

Cost Sharing

Copayments, deductibles, and out-of-pocket maximums align with your medical and prescription drug benefits. Refer to the Copayment Summary and Evidence of Coverage & Disclosure Form (EOC/DF) for cost, details, exclusions, and limitations. An eligible member must be referred by their doctor for these services; prior authorization is required.



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PENDING DMHC APPROVAL