Anthem Blue Cross and Blue Shield (“Anthem”) is pleased to announce the establishment of quality criteria for the provision of infertility services. In addition to all current contractual and credentialing requirements, effective as of September 1, 2015, the quality criteria set forth below in the Summary of Quality Criteria for Participating Infertility Providers shall apply to all Anthem participating infertility providers. Anthem shall use publicly available data to monitor compliance with these criteria and shall request information, as needed, from individual providers.

**Summary of Quality Criteria for Participating Infertility Providers**

**Clinical:**

- Participating Infertility Providers shall provide full-service infertility diagnostic and treatment services. “Full-service” diagnostic and treatment services include but are not limited to: i) infertility diagnostic services (both female and male); ii) surgical treatment of clinically correctable causes of infertility; iii) local embryology services (on-site); iv) Assisted Reproductive Technology (“ART”), including in vitro fertilization (“IVF”) and fresh and frozen embryo transfer; v) elective Single Embryo Transfer (“eSET”); vi) donor egg capability; vii) day five embryo transfer; and viii) access to Preimplantation Genetic Diagnosis (“PGD”) that utilizes in-network providers (unless one is not available).

- Participating Infertility Providers shall offer and promote clinically appropriate eSET for clinically eligible patients.

- Participating Infertility Providers must have a live birth rate equal to or greater than the national average and have an average number of embryos transferred equal to or less than the national average for fresh non-donor cycles in the age group less than 35 years or, alternatively, they must have a statistically equivalent live birth rate and have an average number of embryos transferred equal to or less than two (2) for fresh non-donor cycles in the age group less than 35 years.

- Participating Infertility Providers must have a live birth rate equal to or greater than the national average for non-donor cycles in both age groups of 35-37 years and 38-40 years.

**Maternal Age Criteria:**

Participating Infertility Providers shall document date of birth to verify parental age with official documentation such as a Birth Certificate, Driver’s or Marriage License, or Passport and adhere to the American Society for Reproductive Medicine (“ASRM”) guidelines of not performing IVF for women over age 50 years, with comorbidities, or over age 55 years, if healthy.

**Data Source/Management:**

- Anthem Blue Cross and Blue Shield (“Anthem”) shall use the Center for Disease Control’s (the “CDC’s”) ART Success Rate Report to monitor relative data.

- Participating Infertility Providers shall collect, analyze and report relevant data, and shall submit updated information to Anthem Blue Cross and Blue Shield (“Anthem”) annually, upon request from Anthem.

- Participating Infertility Providers shall report IVF data to the CDC annually.

- Participating Infertility Providers must be members of the Society for Assisted Reproductive Technology (“SART”) in good standing and shall disclose and explain non-reporting or any change in SART membership status to the CDC.

**Processes:**
• Participating Infertility Providers shall provide written notice to Anthem of any changes in its ability to deliver services to our members.

• Participating Infertility Providers shall maintain a staffing list and protocol list that can be shared with Anthem upon request.

• Participating Infertility Providers shall allow site visits with appropriate Anthem staff.

• Participating Infertility Providers shall disclose and explain any history of closure or suspension to the satisfaction of Anthem.

• Participating Infertility Providers shall maintain general and professional liability and other insurance, as required under the terms and condition of their participation agreements with Anthem.

• Participating Infertility Providers shall notify Anthem of all Anthem members (both with and without infertility benefit coverage) who seek infertility services, unless Anthem shall not be a payor for the infertility services and the member requests otherwise.

• Participating Infertility Providers agrees to contract for all products.

• Participating Infertility Providers shall use the preferred pharmacy benefits manager (“PBM”) for medications and specialty PBM/vendor for gonadotropin when appropriate.

• Participating Infertility Providers shall use a participating facility for all embryology, laboratory, surgical suite, and imaging services in addition to any genetic testing such as but not limited to Preimplantation Genetic Diagnosis (“PGD”).

Staff:

Reproductive endocrinology/infertility OB/GYN specialists must perform at least 25 oocyte aspirations per calendar year.

Quality Improvement:

Each Participating Infertility Providers shall maintain and foster a culture of quality and have a quality improvement program in place that is satisfactory to Anthem.