Fertility & Family-Building Benefits

Growing Your Family, Your Way

At Western Health Advantage, we believe that every path to parenthood deserves support. Upon your group health plan renewal, we're expanding our fertility and family-building benefits—so you can get the care you need, when you need it. Whether you're just beginning to explore your options or already working with your doctor, we're here to help you take the next step with confidence and care.

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 simulation)
- Oocyte retrieval, sperm collection and storage
- Artificial Insemination (IVI, 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.

western health

call • 916.563.2250 | 888.563.2250 toll-free
711 TDD/TTY

PENDING DMHC APPROVAL