

## Medicaid Managed Care: Infertility Benefits Update

Effective October 1, 2019, the Medicaid Managed Care (MMC) benefit package was expanded to include ovulation enhancing drugs and related medical services. Pursuant to Section 4.3 of the Medicaid Managed Care/Family Health Plus/HIV Special Needs Plan/Health and Recovery Plan Model Contract, Modification of the Benefit Package Services, the Department of Health (DOH) must provide Plans at least 60 days' advance notice of modifications to the benefit package.

As of October 1, 2019, MVP Health Care® (MVP) began covering medically necessary ovulation enhancing drugs and medical services related to prescribing and monitoring the use of such drugs for members ages 21 through 44 experiencing infertility.

MVP will cover the following specific ovulation enhancing drugs and this benefit will be limited to 3 cycles of treatment per member's lifetime:

- Bromocriptine
- Clomiphene Citrate
- Letrozole
- Tamoxifen

MVP will cover the following specific medical services related to prescribing and monitoring medically necessary ovulation enhancing drugs:

- Office visits
- Hysterosalpingograms
- Pelvic ultrasounds
- Blood testing

For the purposes of this benefit, "infertility" shall mean a condition characterized by the inability to conceive and defined by the failure to establish a clinical pregnancy after 12 months of regular, unprotected sexual intercourse for individuals 21 through 34 years of age, or after 6 months for individuals 35 through 44 years of age.

MVP will be responsible for providing and coordinating these services and will be required to enhance networks and update policies, procedures and plan benefit materials accordingly.