

Fertility Institute of Hawaii, Inc.

Billing FAQs

Q: Does Medicare, Medicaid, or Quest cover any infertility treatment or expenses?

A: No. While most Hawaii-based insurances will cover IVF and a few will cover other infertility services, Medicare, Medicaid and Quest insurances will not cover any infertility treatment services or treatments.

Q: Do I need a referral?

A: This will depend on your insurance. Most insurance plans do not require a referral. Tricare Prime, Kaiser, and HMO plans are the most common plans that will require a referral. Our billing specialists and/or your insurance representative can inform you if a referral is needed. If a referral is not obtained and is needed, the insurance will not cover your visit. If you plan to pay out of pocket for your visit without using your insurance benefit, a referral is not needed.

Q: What is the first step to become a patient?

A: The first step to become a patient with ARMG/FIH is to schedule a new patient consultation with one of our providers. Depending on your insurance you may need a referral from your PCP (primary care physician). Please contact your insurance carrier to inquire if your insurance plan needs a referral for your visits and if your insurance plan has infertility benefits. Again, if you plan to pay out of pocket for your visit without using your insurance benefit, a referral is not needed.

Q: Does my insurance cover an intrauterine insemination (IUI) procedure?

A: Some insurance plans will cover a certain percent of the IUI procedure. You would be responsible for co-payments, co-insurance, and/or deductibles. If the insurance plan does not have the IUI benefit, the cost of the IUI procedure is approximately \$250.00. Prior to starting your treatments, our team will help you decipher what your insurance will cover.

Q: Does insurance cover fertility medication?

A: This will depend on the insurance that you have and the medications that you will need. Some medications may be covered. We do try to assist in every way possible. We also work with different pharmacies to lower the cost if your insurance does not cover the medications.

Q: Will my insurance cover my IVF cycle?

A: Hawaii is one of seven states in the US to have IVF insurance mandated. This means that most but not all Hawaii-based insurances will partially cover an IVF cycle. The mandate requires insurance companies to cover IVF once per lifetime, per insurance plan. There are certain criteria you have to meet in order to obtain insurance coverage for IVF; your provider can discuss these criteria with you in detail.

Q: How much does an out-of-pocket IVF cycle cost?

A: This is always a difficult question to answer because a lot will depend on what procedures and medications are required. A consult is best to determine what type of cycle and medications are best for you individually. In general, the cycle can range from \$8,000 to \$13,000 with medications being an extra cost.

Q: Why is there an additional bill for services when I make a co-payment at each visit?

A: This is because you may have a co-payment, co-insurance, and/or deductible. A co-payment is the amount collected at the time of your physician visit. The co-payment is generally a defined amount that can be known prior to the visit. The co-insurance and deductible (patient's responsibility) is the amount collected after payment is received from insurance. The insurance will inform the clinic of the co-insurance and deductible amounts that must be billed after receiving the visit claim.

Q: Why do I get statements so long after my office visit or treatment?

A: We cannot send an accurate patient bill until after the insurance payment is received. The insurance reimbursement can sometimes take three or more months.

Q: What is a deductible?

A: This is a specified amount that the insured must pay before an insurance company will pay a claim. You can check with your insurance carrier to see if you have a deductible and if it has been met for the year.

Q: Why is my insurance taking so long to authorize services?

A: For most services, we can have the insurance authorization back in two to three weeks. However, there are instances where the insurance may require more information or a more thorough approval process that requires more time. Please feel free to call your insurance carrier and they may assist you more with this concern.

Q: Do you have financing available?

A: We work with several national companies that offer financing for fertility treatments. We have included these companies on our website. Our billing specialists can discuss this more with you during your consultation.

Q: What is Embryo Options?

A: Embryo Options is a company we work with to handle all storage payments for cryopreserved specimens (embryos, sperm, and eggs). Your specimens remain safely stored at our facility, under our care.