



Provider Notice

May 15, 2023

This notice serves as an update for the criteria used to consider Fertility Preservation Services per the new CountyCare’s Policy: PA.251.CC Fertility Preservation for Iatrogenic Infertility.

CountyCare Health Plan will cover medically necessary fertility preservation services for participants ages 14 through 45 due to iatrogenic infertility. Services will be limited to office visits, pelvic ultrasounds, sperm and oocyte cryopreservation and storage, medications/injectables and laboratory testing. The new policy, definitions and all the details about services and coverage can be found [here](#).

Prior Authorization Process:

Effective, 7/15/23. the following codes for this policy change will require prior authorization. These codes are not intended to be all inclusive and other codes may apply and be considered during the prior authorization process. However, inclusion and exclusion may not guarantee coverage

Code Type	Code	Description
CPT	58970	Follicle Puncture for oocyte retrieval, any method
CPT	89250	Culture of oocyte(s)/embryo(s), less than 4 days
CPT	89251	Culture of oocyte(s)/embryo(s), less than 4 days; with co-culture of oocyte(s)/embryos
CPT	89253	Assisted embryo hatching, micro techniques (any method)
CPT	89254	Oocyte identification from follicular fluid
CPT	89258	Cryopreservation, embryo(s) (freezing services, not storage)
CPT	89259	Cryopreservation; sperm
CPT	89260	Sperm isolation: simple prep (e.g., sperm wash and swim-up) for insemination or diagnosis with semen analysis
CPT	89261	Sperm isolation; complex prep (e.g., Percoll gradient, albumin gradient) for insemination or diagnosis with semen analysis
CPT	89264	Sperm identification from testis tissue, fresh or cryopreserved
CPT	89268	Insemination of oocytes
CPT	89272	Extended culture of oocytes/embryo(s), 4-7 days
CPT	89280	Assisted oocyte fertilization, microtechnique; less than or equal to 10 oocytes
CPT	89281	Assisted oocyte fertilization, microtechnique; greater than 10 oocytes
CPT	89320	Semen analysis; volume, count motility and differential
CPT	89337	Cryopreservation, mature oocyte(s)
CPT	89342	Storage, (per year); embryo(s)

CPT	89343	Storage, (per year); sperm/semen
CPT	89346	Storage, (per year); oocyte(s)
CPT	99000	Handling and/or conveyance of specimen for transfer from office to a laboratory
CPT	99001	Handling and/or conveyance of specimen for transfer from the patient in other than an office to a laboratory (distance may be indicated)
CPT	99070	Supplies and materials (except spectacles), provided by the physician or other qualified health care professional over and above those usually included with the office visit or other services rendered (list drugs, trays, supplies, or materials provided)
CPT	99078	Physician or other qualified health care professional qualified by education, training, licensure/regulation (when applicable) educational services in a group setting (e.g., prenatal, obesity, or diabetic instructions)
HCPCS	S0122	Injection, menotropins, 75 IU
HCPCS	S0126	Injection, follitropin alfa, 75 IU
HCPCS	S0128	Injection, follitropin beta, 75 IU
HCPCS	S0132	Injection, ganirelix acetate 250 mcg
HCPCS	S4011	In vitro fertilization; including but not limited to identification and incubation of mature oocytes, fertilization with sperm, incubation of embryo(s), and subsequent visualization for determination of development
HCPCS	S4022	Assisted oocyte fertilization, case rate
HCPCS	S4030	Sperm procurement and cryopreservation services; initial visit
HCPCS	S4031	Sperm procurement and cryopreservation services; subsequent visit

To access the CPT Code, Look-up Prior Authorization tool click [here](#).

The following ICD10 Diagnosis code should be used:

ICD-10 Code	Description
Z31.84	Encounter for fertility preservation procedure

This policy is intended to provide guidance for in-network facilities. All out-of-network requests are subject to prior authorization, along with Medical Director's review, and may be redirected to an In-network facility.

Reminder - there are multiple ways to request Prior Authorization:

- In-network providers may submit requests via the [CountyCare Health Plan Portal](#) for a quicker response. Visit CountyCare Provider Portal for details on how to sign up.
- Submit via phone by calling 312-864-8200, option 5, or 1-855-444-1661, option 5.
- Submit via fax by visiting www.countycare.com for fax numbers and detail.

Contact us.

Thank you for working with us to ensure that CountyCare members receive quality care at the right time and in the right setting. If you have any questions or would like additional information please contact your assigned Provider Relations Representative or if you do not know your assigned Representative, please contact CountyCareProviderServices@cookcountyhhs.org.