



Manages risk of complications related to the IVF cycle procedure and resulting medical expenses.

Complications that may occur include but are not limited to:

- Ovarian Hyper Stimulation Syndrome (OHSS)
- Ovarian bleeding
- Loss of ovaries
- Allergic reaction to medications

Policy Highlights:

- No medical provider network restrictions
- Quick and easy online application
- No deductible; Coverage limits up to \$1.0M available
- 4-month, 6-month and 18-month cycle coverage options available
 - Unlimited number of cycles within the 18-month term
- Optional coverages available for
 - Accidental Paralysis 'AP'
 - Loss of Reproductive Organs 'LRO' including single organ loss
- Prompt and transparent claims processing
- Egg Donors: Age 18 to 40 inclusive; coverage considered up to age 45
- Recipients: Age 21 to 40 inclusive; coverage considered up to age 45
- Coordination of Benefits, other insurance considered if coverage purchased on a secondary basis
- Preferred rates considered based on proven program performance
- Offering dual U.S. and Non-U.S. complications coverage for egg donors, IVF cycles conducted at approved international clinics; U.S. and Foreign donors

Please contact your insurance broker for additional information and a complete explanation of the applicable coverage terms and conditions. Terms and conditions subject to change.



Egg Donor and Recipient IVF Cycle Medical Expense Complications Insurance Policy – (4) Month Coverage Period

COVERAGE PERIOD

Four (4) months from policy effective date; coverage period begins at start of cycle medications

	EGG DONOR				RECIPIENT				EGG DONOR & RECIPIENT			
Plan Maximum Aggregate Limit	\$100K	\$250K	\$500K	\$1.0M	\$100K	\$250K	\$500K	\$1.0M	\$250K	\$500K	\$1.0M	
Contractual non-performance, Event of Death, Sub-Limit	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	
Premium Primary Standard Rates* (plus taxes & fees)	\$350	\$395	\$590	\$820	\$250	\$300	\$395	\$550	\$490	\$685	\$950	
Premium Secondary (plus taxes & fees)	\$200	\$245	\$350	\$480	\$155	\$205	\$300	\$415	\$300	\$385	\$540	

*Preferred Rates available upon underwriter approval

EDR OPTIONAL COVERAGES

Accidental Paralysis 'AP'	\$50K	\$100K	\$150K	\$200K	\$250K
AP Premium	\$80	\$160	\$240	\$320	\$400
Loss of Reproductive Organs 'LRO', Maximum Benefit	\$3,000 (Partial) \$6,000 (Complete)			\$5,000 (Partial) \$10,000 (Complete)	
LRO Premium	\$120 (Both Partial and Complete Hysterectomy)			\$200 (Both Partial and Complete Hysterectomy)	

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Egg Donor and Recipient IVF Cycle Medical Expense Complications Insurance Policy – (6) Month Coverage Period

COVERAGE PERIOD

Six (6) months from policy effective date; coverage period begins at start of cycle medications

Plan Maximum Aggregate Limit	EGG DONOR				RECIPIENT				EGG DONOR & RECIPIENT		
	\$100K	\$250K	\$500K	\$1.0M	\$100K	\$250K	\$500K	\$1.0M	\$250K	\$500K	\$1.0M
Contractual non-performance, Event of Death, Sub-Limit	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K	\$100K
Premium Primary Standard Rates* (plus taxes & fees)	\$390	\$445	\$690	\$990	\$290	\$350	\$485	\$725	\$530	\$735	\$1100
Premium Secondary (plus taxes & fees)	\$240	\$295	\$450	\$650	\$195	\$250	\$390	\$585	\$340	\$435	\$690

*Preferred Rates available upon underwriter approval

EDR OPTIONAL COVERAGES

Accidental Paralysis 'AP'	\$50K	\$100K	\$150K	\$200K	\$250K
AP Premium	\$90	\$180	\$260	\$340	\$420
Loss of Reproductive Organs 'LRO', Maximum Benefit	\$3,000 (Partial) \$6,000 (Complete)			\$5,000 (Partial) \$10,000 (Complete)	
LRO Premium	\$140 (Both Partial and Complete Hysterectomy)			\$220 (Both Partial and Complete Hysterectomy)	

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Egg Donor and Recipient IVF Cycle Medical Expense Complications Insurance Policy - (18) Month Coverage Period

COVERAGE PERIOD

Eighteen (18) months from policy effective date; coverage period begins at start of cycle medications

	EGG DONOR	RECIPIENT	EGG DONOR & RECIPIENT
Plan Maximum Aggregate Limit	\$250K	\$250K	\$250K
Contractual non-performance, Event of Death, Sub-Limit	\$100K	\$100K	\$100K
Premium Primary (plus taxes & fees)	\$780	\$445	\$940

EDR OPTIONAL COVERAGES

Accidental Paralysis 'AP', Maximum Benefit	\$50K	\$100K	\$150K	\$200K	\$250K
AP Premium	\$100	\$200	\$300	\$400	\$500
Loss of Reproductive Organs 'LRO', Maximum Benefit	\$3,000 (Partial) \$6,000 (Complete)		\$5,000 (Partial) \$10,000 (Complete)		
LRO Premium	\$ 170 (Both Partial and Complete Hysterectomy)			\$250 (Both Partial and Complete Hysterectomy)	

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