WINFertility Benefits Program Description NVIDIA

Cigna has partnered with WINFertility to offer a program that provides personalized guidance, education and emotional support every step of the family building journey.

WINFertility has been a pioneer in the field for more than 20 years, delivering personalized guidance for a safer, better family-building experience. WINFertility helps you understand your options so you can choose the right provider and best course of treatment for you – making the most of your health benefits.

Contact WINFertility prior to the initiation of fertility treatment or if you have questions or just thinking about seeking fertility treatment.

The fertility benefit is available to all employees and their spouses and dependents covered by the Cigna medical plan with or without a diagnosis of infertility.

Unlimited benefit for fertility services when seeing an in-network provider (out-ofnetwork benefits are limited to \$50,000 LTM) and unlimited pharmacy benefit include:

- a. Timed intercourse (TI) cycles. Includes natural cycles, and ovulation induction cycles with clomid or letrozole.
- b. Intrauterine Insemination (IUI). Includes natural cycles, and ovulation induction cycles with clomid or letrozole.
- c. The following assisted reproductive treatment (ART) cycles and procedures are covered:
 - i. In-Vitro Fertilization (IVF) including Intracytoplasmic Sperm Injection (ICSI)
 - ii. Gamete Intrafallopian Cycle (GIFT)
 - iii. Zygote Intrafallopian Transfer (ZIFT)
 - iv. Elective oocyte cryopreservation and elective sperm cryopreservation
 - v. Oocyte cryopreservation and sperm cryopreservation that meets guidelines of Cigna medical policy, with unlimited storage.
 - vi. Oocyte Thaw Cycles (OTC)
 - vii. Cryopreservation of blastocysts(s) and embryo(s) from covered IVF or Oocyte Thaw Cycles (OTC) with unlimited storage (storage not covered for embryo banking cycles for elective fertility preservation)
 - viii. Embryo Biopsy for Preimplantation Genetic Testing (PGT) as directed by Cigna medical policy in addition to the following indications:
 - i. Recurrent Pregnancy Loss (three or more unexplained clinical pregnancy losses) or previously diagnosed aneuploid pregnancies or births
 - ii. Recurrent implantation failure (three or more failed embryo transfers)
 - ix. Frozen Embryo Transfer (FET) cycles

- d. Pathology and laboratory services, including but not limited to:
 - i. Hormonal assays
 - ii. Semen analysis, as appropriate
 - iii. Ultrasound exams
 - iv. Fertilization and appropriate embryology services
 - v. Ova identification
 - vi. Embryo transfer
 - e. Medications necessary to the provisions above, including parenteral injection, are included for infertility treatment while the member is a member of this plan.

Benefit Specifics:

Embryo transfer guidelines per the American Society of Reproductive Medicine (ASRM) should be followed for all embryo transfers (fresh and frozen cycles) and elective single embryo transfer should be utilized when clinically appropriate.

EXCLUSIONS / Non-Covered Services:

The following services are excluded from coverage:

- a. Related medical and non-medical donor expenses for donated oocytes or sperm, including, travel expenses, agency, laboratory and donor fees, psychological screening, FDA testing for the donor and partner, genetics screening.
- b. Fallopian tube ligations and vasectomy reversals.
- c. Medical and surgical procedures that are experimental or investigational, unless such denial is overturned by an External Appeal Agent.
- d. Services requested which are not medically appropriate.
- e. Services not specifically listed as covered.
- f. Intrauterine Insemination or Timed Intercourse cycles stimulated with Gonadotropin or menotropin (e.g. FSH/IUI cycles) are excluded unless member has diagnosis of hypogonadotropic anovulatory disorders or hypopituitarism, or after member has not ovulated or conceived after a prior trial of 3 cycles of Clomid or Letrozole.
- g. Egg/sperm/embryo storage following elective cryopreservation.

Refer to NVIDIA's SPD for final benefit coverage.