

Disclosure Attachment Form

RMA of New York's participation of insurance carrier includes:

- **Aetna**
- **New York Hotel Trade Council**
- **New York State Empire Plan for Government Employees (RMA of New York recognized as site of excellence)**
- **Oxford (OXF) Freedom**
- **Oxford (OXF) Liberty**
- **United Health Care (UHC)**
- **Blue Cross/Blue Shield(BCBS) for Mount Sinai Hospital Employees Only**
- **GHI**

The extent of coverage, benefits, referral and authorization process vary from policy to policy. It is important that you understand what is covered before you begin treatment, or what the necessary requirements are in order to get the maximum reimbursement. The finance department can provide some general guidelines on most common policies within each plan, but ultimately it is your responsibility to understand your infertility treatment coverage under your plan.

Some plans require referrals or authorizations. We encourage all patients to check the infertility benefits under their specific plan. Our participation with their insurance does not guarantee coverage for our service. To find out more information about your coverage, request to speak to a RMA of NY financial coordinator.

New York's "Emergency Medical Services and Surprise Bills" Law requires a physician to provide each patient or prospective patient with the name, practice name, mailing address and telephone number of any health care professional scheduled to perform anesthesiology, laboratory, pathology, radiology or assistant surgeon services in connection with care to be provided in the physician's office for the patient or coordinated or referred by the physician for the patient at the time of referral to or coordination of services with such health care professional.

Specimen Processing

Your blood may be sent for processing at the following laboratories. Please contact the laboratory directly to find out your coverage. It is your responsibility to understand your infertility treatment coverage under your plan and to direct us on where to send your specimen for processing.

LabCorp

Phone: 800-631-5250

Quest

Phone: 866-697-8378

Mount Sinai Genetic Testing

Phone: 212-241-7518

Bioreference Laboratory

Phone: 800-229-5227

Anesthesia

These providers do not participate with any health care plans. The fee for services provided will be \$750.00 unless it is a male procedure in which case fees may vary. Please contact a member of the RMA of New York Finance Department to find our more information.

Physician Name(s): Jane Recant, MD, Jennifer Zimmerman, MD, Angela Cutrone, MD

Mailing Address: 635 Madison Avenue, 9th Floor New York, NY 10022

Telephone Number: 631-462-3466

Chromosomal Microarray for Pregnancy Loss

Company: **CombiMatrix**

Telephone Number: 800.710.0624

Preimplantation Genetic Diagnosis Testing

Company: **Foundation for the Assessment and Enhancement of Embryonic Competence**

Telephone Number: 908-580-1200

Company: **Reprogenetics**

Telephone Number: 973-436-5017

Company: **Reproductive Genetic Innovations (RGI)**

Telephone Number: 847-400-1515

Company: **Genesis Genetics Institute, Inc**

Telephone Number: 313-579-9650

Company: **Gene Security Network**

Telephone Number: 1-877-GSN-4PGD

RMA of New York Out-of-Network Referral List

Dr. Georgia Witkin

Clinical Psychologist

Session Fee: \$300.00

Dara Godfrey, MS RD

Registered Dietician

Session Fee: \$60.00

Radiology Referrals for Hysterosalpingogram (HSG)- See HSG Referral List Attachment for insurance participation.



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