

**Aetna Institutes of Excellence™ Infertility Clinics**  
**Summary of Criteria**  
**Requirements for Consideration**

**Request for information (RFI):** Clinic must submit a completed, current year, standardized response to the RFI.

**Access:** Aetna must determine that it has a need for clinic's in vitro fertilization (IVF) services in its Institutes of Excellence network.

**Contractual status:** There must be an executed, participating agreement covering infertility services, physicians, and all other IVF related costs. All physicians, surgical suites, embryology laboratories, anesthesiology services, and radiology services providing infertility care must be fully contracted with Aetna including all benefits plans available in the geographic area.

**Designation process:**

Aetna's Institutes of Excellence Oversight Committee (IOEOC) has sole discretion in making final determinations on clinical eligibility.

**Program criteria:**

Clinical

- Clinic must provide full-service infertility diagnostic and treatment services. "Full-service" care is defined as all of the following: infertility diagnosis services; surgical treatment of correctable causes of infertility; local embryology services (on-site or off-site); ART (assisted reproductive technology), including IVF and frozen embryo transfer; eSET (elective single-embryo transfer); donor egg capability; day five embryo transfer; and access to pre-implantation genetic diagnosis (PGD).
- Clinic must have at least 20 intended retrievals in Age Group 1 per calendar year (40 in two calendar years).
- All Patients, Quality and Safety Outcomes Measures
  - Live Births, Age Group 1: For all patients in Age Group 1, the percentage of intended retrievals resulting in live births **AND** the percentage of transfers resulting in live births cannot be statistically worse than the national average.
  - Live Births, Age Groups 2 and 3: For all patients in **both** Age Groups 2 and 3, the percentage of intended retrievals resulting in live births **AND** the percentage of transfers resulting in live births cannot be statistically worse than the national average.
  - Live Birth Multiples: For all patients in Age Groups 1, 2, and 3, the percentage of transfers resulting in live birth multiples can only be statistically worse than the national average in one of these three age groups. That one age group cannot represent a majority (50%) of the patient experience.
- New Patients, Efficiency Measure: The percentage of new patients in Age Group 1 with a live birth after all intended retrievals must be within one standard deviation of the mean in the most recent year's reported data.

Data source: The CDC's ART Fertility Clinic Success Rate Report using a combination of the most recent publicly available yearly data plus the previous year's publicly available data.

### Data management

- Clinic must have the ability to collect, analyze, and report data, and must submit updated information to Aetna annually as requested.
- Clinic must report IVF data to the CDC annually.
- Clinic must disclose and explain non-reporting to CDC or a change in Society for Assisted Reproductive Technology (SART) membership.
- Clinic must be a SART member in good standing.

### Program processes

- Clinic must agree to provide timely written notice to Aetna of any changes in its ability to deliver services to its members.
- Clinic must be willing to allow site visits with appropriate Aetna staff upon request.
- Clinic must disclose and explain any history of closure or suspension to the satisfaction of the Institutes of Excellence Oversight Committee (IOEOC).
- Clinic must use a fully contracted facility/provider for all embryology laboratory, surgical suite, anesthesiology, and radiology services.
- Clinic must provide a physician staffing list with Aetna upon request.
- Clinic is expected to meet with Aetna contracting and language requirements.
- Clinic is expected to maintain a protocol list that can be shared with Aetna upon request.
- Clinic is expected to notify Aetna of all Aetna members (with and without infertility benefits) seeking IVF care.
- Clinic is expected to use the Aetna Pharmacy formulary and use Aetna Specialty Pharmacy® for gonadotropin.
- Clinic is expected to extend discounted rates to members without IVF benefits.

### Staff

- Each clinic physician who performs oocyte aspirations must perform at least 20 per calendar year.
- All physicians must be properly credentialed by Aetna. Only those physicians credentialed as board certified in Reproductive Endocrinology are eligible for IOE designation.

### Quality improvement

- A quality improvement program must be in place to the satisfaction of the IOEOC.

Aetna retains the sole discretion to determine designation as an Institutes of Excellence clinic after taking into consideration all the program criteria, including cost, accessibility, and business needs. Satisfaction of the program criteria is not a guarantee of designation.