

# COVERAGE FOR surrogate fertility expenses



## Expand your diversity, equity and inclusion (DE&I) initiatives

The Fertility Services benefit is already an important support for many of your plan members. But not everyone looking to grow their family can conceive in this way. In some cases, they need a surrogate to carry the baby.

Surrogacy is an arrangement in which a female person agrees to carry a baby for another person or people. These arrangements are growing in popularity in Canada, and there are many situations that may require a surrogate. These include:

- people missing their fertility window
- same-sex couples
- single parents by choice
- health conditions or difficult past pregnancies
- people choosing surrogacy as their preferred method to grow their family



### Introducing the Surrogacy benefit

Our Surrogacy benefit reimburses the plan member for eligible surrogate expenses incurred by a surrogate on their behalf.

It can provide valuable support for employees by reducing financial stress. It can also help your organization expand its DE&I initiatives and attract and retain a more diverse employee base.

In Canada, you're not allowed by law to pay surrogates a fee for their services. But individuals or couples can reimburse surrogates for reasonable out-of-pocket expenses. These include medical expenses, such as fertility testing, procedures and drugs.

The Surrogacy benefit has its own policy number – and interested plan members must first enroll. Once the plan member has enrolled, eligible fertility medical expenses related to the surrogacy arrangement are covered. We repay the covered expenses incurred by the surrogate directly to the plan member. The amounts we pay to plan members under this benefit will generally be a taxable benefit.

This program is an Administrative Services Only agreement. We will bill you monthly for claims we've paid in the previous month, plus administration fees and applicable taxes.

*Many employers are looking to expand their DE&I initiatives. The Surrogacy benefit is an excellent way to do this. It levels the playing field so that all your employees can take advantage of fertility support.*



## Expenses eligible for coverage

The maximums, limitations and exclusions that apply to the Fertility Services benefit also apply to this benefit.

### Physician and lab services

- Physician block fees and monitoring fees
- Medical imaging (including ultrasound/nuchal translucency ultrasound, Spindleview, embryo-scope, Matris test, non-invasive analysis of embryo culture media, Sonohysterogram)
- Diagnostic lab tests and screening of the gestational carrier (including prenatal screening, Endometrial Receptivity Analysis, FSH, AMH)

### Expenses related to the egg, embryo and sperm

- Screening tests
- Cryopreservation
- Transfer fees
- Storage fees
- Thawing
- Egg retrieval
- Sperm retrieval (including PESA, MESA, TESE, Micro TESE)
- Sperm function test,
- Sperm selection, wash, and preparation

### Genetic testing

- Includes PGT-A, PGT-SR, PGT-M, products of conception analysis (POC), sperm chromatin assay (SCSA)

### Insemination and fertilization

- In-vitro maturation
- Assisted hatching
- Intra-cytoplasmic sperm injection (ICSI)
- In-vitro fertilization (IVF) (including standard, natural, stimulated, antagonist, and reciprocal)
- Intrauterine insemination (IUI)
- Artificial insemination (AI)

### Fertility drugs

- If fertility drugs are covered under EHC then they are also eligible if incurred by the surrogate and reimbursed through the Surrogacy benefit.



## Learn more

For more information about our Surrogacy benefit, please contact your Sun Life Group Benefits representative.



Life's brighter under the sun