

If you have additional questions, please call the Citi Health Concierge at **1 (800) 545-5862** (Aetna) or **1 (855) 593-8123** (Anthem). Please see the Citigroup Health Benefit Plan (the "Plan") in Citi Benefits Handbook for a full description of Citi Family Planning Benefits.

Fertility Treatment	
 Which health plan (Aetna/Anthem) is most advantageous for fertility/family planning as Citi members choose their health plans? 	 The fertility plan design and coverage is the same for both plans If you enroll with Anthem, you will receive access to WINFertility which provides ongoing education and guidance throughout the fertility process If you enroll with Aetna, you will have access to Aetna's Infertility Unit as a resource for questions that come up throughout this process
2. What is the lifetime fertility maximum?	 \$24,000 for medical services \$7,500 for prescription drug costs
3. What does and does not count towards the lifetime fertility maximum?	 Expenses for elective cryopreservation, comprehensive fertility services, and advanced reproductive technology. Please see Q&A 6 for more information on specific covered services Prescription drug expenses associated with infertility treatment and elective cryopreservation are covered up to the prescription drug lifetime maximum Expenses for diagnosis and treatment of any underlying medical conditions do not count toward the medical or prescription drug lifetime maximum
 If I anticipate needing fertility treatment, what is my first step? 	Call your Citi Health Concierge and indicate that you need to pre- certify for fertility treatment
5. Are there any requirements needed to be eligible for fertility treatment?	 To be eligible for fertility benefits you must be a covered employee under a Citi medical plan or be covered as a spouse/ partner/dependent under the Plan Citi does not require you to provide documentation of an infertility diagnosis to receive treatment
6. Which services are covered under the fertility benefit?	 Basic infertility expenses: Covered expenses include charges made by a physician to diagnose and to surgically treat the underlying medical cause of infertility These expenses do not count toward the medical lifetime fertility maximum Comprehensive infertility services benefits: Ovulation induction Intrauterine insemination Advanced reproductive technology (ART) benefits:

Page	2
------	---

0	In vitro fertilization (IVF) cycles, including freeze-all cycle
	(fertilization and culture of embryo)
0	Reciprocal IVF cycles
0	Intrauterine embryo lavage
0	Embryo transfer
0	Elective single embryo transfer
0	Artificial insemination
0	Gamete intrafallopian tube transfer (GIFT)
0	Zygote intrafallopian tube transfer (ZIFT)
0	Low tubal ovum transfer
0	Assisted hatching
0	Pre-implantation genetic diagnosis (PGD) and screening
	(PGS), when it is medically necessary (subject to medical
	criteria)
0	Evaluation by a reproductive endocrinologist or infertility
	specialist, drug therapy, and intracytoplasmic sperm
	injection (ICSI)
0	Cryopreserved embryo transfers
0	Oocyte (Egg) thaw cycles
0	ART services for procedures that are covered expenses
	including charges associated with storage and
	procurement of partner's sperm for ART and Testis
	Biopsy, when the partner is also covered under the Plan
0	Sperm sourcing includes specialized sperm retrieval
	techniques (including vasal sperm aspiration,
	microsurgical epididymal sperm aspiration (MESA),
	percutaneous epididymal sperm aspiration (PESA),
	electroejaculation, testicular sperm aspiration (TESA),
	microsurgical testicular sperm extraction (TESE), seminal
	vesicle sperm aspiration and sperm recovery from
	bladder or urine for retrograde ejaculation are
	considered medically necessary to overcome
	anejaculation or azoospermia
Cryopre	eservation
	Medically Necessary: Cryopreservation of sperm, oocytes
0	or embryos is considered medically necessary for
	members undergoing infertility due to chemotherapy,
	pelvic radiotherapy or other gonadotoxic therapies, with
	no storage time limitation when approved and covered
	under the Plan. Gonadotoxic treatments include
	chemotherapy, radiation, conditions, and surgical
	resection (for treatment of disease or gender affirmation
	treatment.

	 For IVF: All cryopreservation services are provided for members undergoing IVF. Elective: Cryopreservation of oocytes (commonly referred to as egg freezing) when being done electively and not for medical reasons is covered (see question 9 for storage limitations)
 Are pre-implementation genetic screening (PGS) and pre-implementation genetic diagnosis (PGD) covered? 	 Yes, but they are subject to medical criteria. Please contact your Citi Health Concierge for details on if your situation qualifies.
8. Does the Plan cover charges for storing cryopreserved embryos or eggs?	 The Plan covers charges for the storage of cryopreserved embryos or eggs for the first year. Storage of cryopreserved embryos or eggs after the first year is not covered unless medically necessary Storage of sperm is not covered unless medically necessary
 Does the Plan cover the cost for a Citi member to donate eggs or sperm? 	• No
10. Does the Plan cover the cost associated with a Citi member who intends to be a surrogate for a non-covered person?	• No
11. Does the Plan cover the purchase and storage of a donor sperm or egg?	• No
12. If I am a male in a same- gender relationship, and my spouse/partner and I are starting a family via surrogacy, what services are covered under the Plan?	 The fertilization and culture of an embryo using a covered person's sperm is covered As noted above, the purchase of a donor egg and surrogacy costs are not covered
13. If I am a female in a same- gender relationship, and my spouse/partner and I are starting a family via fertility benefits, what services are covered under the Plan?	 Cryopreservation, comprehensive fertility services and advanced reproductive technology (ART) benefits are covered As noted in Q&A 11, the purchase and storage of donor sperm are not covered
14. If I am a gender non-binary person in a relationship with another gender non-binary	 The fertilization and culture of an embryo using a covered person's sperm is covered The purchase of a donor egg and surrogacy costs are not covered

person, and we are starting a family via surrogacy or through fertility treatments, what is covered under the medical plan?	 Cryopreservation, comprehensive fertility services, and advance reproductive technology (ART) benefits are covered The purchase and storage of donor sperm are not covered
---	---

Adoption/Surrogacy

 15. Does Citi provide an adoption/surrogacy benefit? Citi currently offers an Adoption and Surrogacy Assistance Program. This program provides a benefit of up to a maximum of \$10,000 per child per family (or in the case of adoption of multiple children, up to \$10,000 per child for separate, eligible expenses related to adoption of each child) Eligible expenses include: Adoption-related travel (including lodging) Legal and court fees associated with the adoption process Medical expenses not otherwise covered by any motion of surrogacy Other expenses that are: Directly related to, and the principal purpose of which is for, the legal adoption of an Eligible employee, or surrogacy; and Not reimbursed by another source (e.g., grants, another employer) Ineligible expenses include: Medical expenses include: Not reimbursed by another source (e.g., grants, another employer) 	Adoption/Surrogacy	
	15. Does Citi provide an adoption/surrogacy benefit?	 Assistance Program. This program provides a benefit of up to a maximum of \$10,000 per child per family (or in the case of adoption of multiple children, up to \$10,000 per child for separate, eligible expenses related to adoption of each child) Eligible expenses include: Adoption agency and placement fees Adoption-related travel (including lodging) Legal and court fees associated with the adoption or surrogacy Temporary foster care expenses during the adoption process Medical expenses not otherwise covered by any medical plan associated with the adoption surrogacy Other expenses that are: Directly related to, and the principal purpose of which is for, the legal adoption of an Eligible Child by an eligible employee, or surrogacy; and Not incurred in violation of federal, state, local or provincial law; and Not reimbursed by another source (e.g., grants, another employer) Ineligible expenses include: Medical examination fees for the adoptive parents Cost of personal items such as clothing and food for either parents or child Expenses incurred prior to eligibility under

Page 4

 Any expenses for which reimbursement or payment would violate federal, state, local or provincial law Costs paid using funds received from any federal, state, local or provincial program; Expenses already paid or reimbursed by
 another employer or party Donations, legal guardianship expenses, or expenses related to the adoption of a stepchild
 Please refer to the Adoption and Surrogacy Assistance Program policy on Citi for You for additional information

Page 5