

## Simple billing, no surprises

### INSURANCE (US ONLY)

Invitae is proud to be in network for more than 270 million patients in the United States and will contact insurance companies directly to coordinate coverage and payment on your behalf.

### PATIENT PAY

You have the option to pay \$450 for prenatal diagnostic genetic testing. This option requires upfront payment before test results are released. In addition, your clinician must place the order online and provide your e-mail address so we can send you a link to pay online using a credit card.

### FINANCIAL ASSISTANCE (US ONLY)

For patients who do not have adequate coverage through insurance, Invitae offers patient-pay pricing. We may also be able to offer testing at limited or no expense to those who qualify for need-based assistance.

For complete billing information, please visit [www.invitae.com/billing-info](http://www.invitae.com/billing-info).

### Questions?

Visit [www.invitae.com/contact-us](http://www.invitae.com/contact-us) for a complete list of contact information.



## About us

Invitae is a genetics company whose mission is to bring comprehensive genetic information into mainstream medicine to improve healthcare for billions of people. Invitae testing provides answers to essential health questions—understanding disease risk, guiding a healthy pregnancy, or finding a diagnosis—at high quality, fast turnaround, and low prices.

We strive to make testing affordable and accessible.

## Prenatal diagnostic testing



# What is prenatal diagnostic testing?

A prenatal diagnostic test is performed during pregnancy to determine if your baby is affected by certain conditions caused by chromosomal changes. Healthcare providers frequently recommend diagnostic testing if a previous screening test revealed an increased risk for chromosomal conditions.

## WHAT IS A CHROMOSOMAL CONDITION?

Chromosomal conditions occur when there is a change in the number, size, or structure of your baby's genetic information (chromosomes). The developing baby is sensitive to such changes and depending on the type of change, it may affect baby's growth, development, or the ability for body systems to function.

## HOW DO CHROMOSOMAL CONDITIONS DEVELOP?

Usually, chromosomal changes are spontaneous and occur when the egg or sperm cells are forming during conception. Some chromosomal conditions occur more frequently with increasing maternal age. Occasionally, a baby may inherit a chromosomal change from one or both parents.

## How Invitae prenatal diagnostic testing works



### 1. Select your tests

Work with your healthcare provider to choose the tests that are right for you.



### 2. Provide a sample

Your healthcare provider will collect a sample and ship it to Invitae's laboratory for analysis.



### 3. Get your results

Your healthcare provider will receive a report that contains important details about your results.



### 4. Make your plan

Discuss your results with your healthcare provider to understand their implications and learn what you need to do next.

## Is prenatal diagnostic testing right for me?

The American College of Obstetricians and Gynecologists (ACOG) recommends that women, regardless of age, be offered screening and/or diagnostic testing for chromosomal conditions during pregnancy. Invitae supports testing for all women who want access to their genetic information. Prenatal diagnosis may be offered to women who have an increased chance of having a baby with a chromosomal condition due to:

- an abnormal blood screening result, such as non-invasive prenatal screening (NIPS)
- one or more fetal structural abnormalities identified by ultrasound
- a history of an affected pregnancy or a previous child with a chromosomal condition

---

## How are samples collected?

Samples for prenatal diagnosis are usually collected using one of two procedures.

**Chorionic villus sampling (CVS)** is a first-trimester procedure performed to collect a small sample of cells from the placenta using a thin needle inserted into your belly or a thin plastic tube through your cervix (an ultrasound is used to guide the needle or tube safely).

**Amniocentesis** is a second-trimester procedure performed to collect amniotic fluid using a thin needle inserted into your belly (an ultrasound is used to guide the needle safely).

While all pregnancies carry risk of miscarriage, there is a small additional risk (less than 1%) associated with CVS and amniocentesis. Your healthcare provider can help you understand the process and risks involved.

## Testing with Invitae

Invitae offers several types of tests that can be used to diagnose medical conditions caused by chromosomal abnormalities. Your healthcare provider may offer various testing options based on your personal history and situation.

### PRENATAL MICROARRAY ANALYSIS

Microarray analysis counts the number of chromosomes that are present and whether there are any extra or missing pieces. This test can also detect small changes (called microdeletions and microduplications) that cannot be identified by karyotyping alone. For this reason, ACOG recommends that anyone who is considering prenatal diagnosis for chromosomal conditions be offered the option of microarray analysis.<sup>1</sup>

### KARYOTYPE ANALYSIS

This test looks at your baby's overall chromosomal structure to see if there are any abnormalities, such as extra or missing chromosomes. Karyotype tests can detect large chromosomal changes, but they are not sensitive enough to uncover small changes that may also lead to a chromosomal disorder.

### RAPID FISH ANALYSIS

Fluorescence in situ hybridization (also known as FISH) is a test that offers a rapid answer to how many copies of several specific chromosomes are present in your baby, including chromosomes 13, 18, 21, X, and Y. This test is generally followed by another more comprehensive chromosomal test, like a karyotype or microarray analysis.

1. ACOG Practice Bulletin No. 163 (replaces practice bulletin No. 77, January 2007): Screening for Fetal Aneuploidy. Practice Bulletin No. 163. American College of Obstetricians and Gynecologists. *Obstet Gynecol.* 2016; 127(5):e123-37.