



General Assembly

February Session, 2022

Raised Bill No. 5446

LCO No. 3110



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by:
(INS)

AN ACT CONCERNING EQUAL COVERAGE FOR MEDICALLY NECESSARY INFERTILITY TREATMENTS.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 38a-509 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective January 1, 2023*):

3 (a) Subject to the limitations set forth in subsection (b) of this section
4 and except as provided in subsection (c) of this section, each individual
5 health insurance policy providing coverage of the type specified in
6 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 delivered,
7 issued for delivery, amended, renewed or continued in this state on or
8 after January 1, [2018] 2023, shall provide coverage for the medically
9 necessary expenses of the diagnosis and treatment of infertility,
10 including, but not limited to, ovulation induction, intrauterine
11 insemination, in-vitro fertilization, uterine embryo lavage, embryo
12 transfer, gamete intra-fallopian transfer, zygote intra-fallopian transfer
13 and low tubal ovum transfer. For purposes of this section, "infertility"
14 means [the] a disease, condition [of an individual who is unable to
15 conceive or produce conception or sustain a successful pregnancy

16 during a one-year period or such treatment is medically necessary.] or
17 status characterized by:

18 (1) A failure to conceive or produce conception or sustain a successful
19 pregnancy during a one-year period or such treatment is medically
20 necessary;

21 (2) An individual's inability to reproduce either as a single individual
22 or with a partner without medical intervention; or

23 (3) A licensed physician's findings based on a patient's medical,
24 sexual and reproductive history, age, physical findings or diagnostic
25 testing.

26 (b) Such policy may:

27 (1) Limit such coverage to an individual who fails to conceive or
28 produce conception or sustain a successful pregnancy during a one-year
29 period until the date of such individual's fortieth birthday;

30 (2) Limit such coverage for ovulation induction to a lifetime
31 maximum benefit of four cycles;

32 (3) Limit such coverage for intrauterine insemination to a lifetime
33 maximum benefit of three cycles;

34 (4) Limit lifetime benefits to a maximum of two cycles, with not more
35 than two embryo implantations per cycle, for in-vitro fertilization,
36 gamete intra-fallopian transfer, zygote intra-fallopian transfer or low
37 tubal ovum transfer, provided each such fertilization or transfer shall be
38 credited toward such maximum as one cycle;

39 (5) Limit coverage for in-vitro fertilization, gamete intra-fallopian
40 transfer, zygote intra-fallopian transfer and low tubal ovum transfer to
41 those individuals who have been unable to conceive or produce
42 conception or sustain a successful pregnancy through less expensive
43 and medically viable infertility treatment or procedures covered under
44 such policy. Nothing in this subdivision shall be construed to deny the

45 coverage required by this section to any individual who foregoes a
46 particular infertility treatment or procedure if the individual's physician
47 determines that such treatment or procedure is likely to be unsuccessful;

48 (6) Require that covered infertility treatment or procedures be
49 performed at facilities that conform to the standards and guidelines
50 developed by the American Society of Reproductive Medicine or the
51 Society of Reproductive Endocrinology and Infertility;

52 (7) Limit coverage to individuals who have maintained coverage
53 under such policy for at least twelve months; and

54 (8) Require disclosure by the individual seeking such coverage to
55 such individual's existing health insurance carrier of any previous
56 infertility treatment or procedures for which such individual received
57 coverage under a different health insurance policy. Such disclosure shall
58 be made on a form and in the manner prescribed by the Insurance
59 Commissioner.

60 (c) (1) Any insurance company, hospital service corporation, medical
61 service corporation or health care center may issue to a religious
62 employer an individual health insurance policy that excludes coverage
63 for methods of diagnosis and treatment of infertility that are contrary to
64 the religious employer's bona fide religious tenets.

65 (2) Upon the written request of an individual who states in writing
66 that methods of diagnosis and treatment of infertility are contrary to
67 such individual's religious or moral beliefs, any insurance company,
68 hospital service corporation, medical service corporation or health care
69 center may issue to or on behalf of the individual a policy or rider
70 thereto that excludes coverage for such methods.

71 (d) Any health insurance policy issued pursuant to subsection (c) of
72 this section shall provide written notice to each insured or prospective
73 insured that methods of diagnosis and treatment of infertility are
74 excluded from coverage pursuant to said subsection. Such notice shall
75 appear, in not less than ten-point type, in the policy, application and

76 sales brochure for such policy.

77 (e) As used in this section, "religious employer" means an employer
78 that is a "qualified church-controlled organization", as defined in 26 USC
79 3121 or a church-affiliated organization.

80 (f) No individual health insurance policy providing coverage of the
81 type specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469
82 delivered, issued for delivery, amended, renewed or continued in this
83 state on or after January 1, 2023, shall discriminate based on an insured's
84 expected length of life, present or predicted disability, degree of medical
85 dependency, perceived quality of life, or other health conditions, or
86 personal characteristics, including age, race, color, religious creed,
87 national origin, sex, sexual orientation, marital status or gender identity.

88 Sec. 2. Section 38a-536 of the general statutes is repealed and the
89 following is substituted in lieu thereof (*Effective January 1, 2023*):

90 (a) Subject to the limitations set forth in subsection (b) of this section
91 and except as provided in subsection (c) of this section, each group
92 health insurance policy providing coverage of the type specified in
93 subdivisions (1), (2), (4), (11) and (12) of section 38a-469 delivered,
94 issued for delivery, amended, renewed or continued in this state on or
95 after January 1, [2018] 2023, shall provide coverage for the medically
96 necessary expenses of the diagnosis and treatment of infertility,
97 including, but not limited to, ovulation induction, intrauterine
98 insemination, in-vitro fertilization, uterine embryo lavage, embryo
99 transfer, gamete intra-fallopian transfer, zygote intra-fallopian transfer
100 and low tubal ovum transfer. For purposes of this section, "infertility"
101 means [the] a disease condition [of an individual who is unable to
102 conceive or produce conception or sustain a successful pregnancy
103 during a one-year period or such treatment is medically necessary.] or
104 status characterized by:

105 (1) A failure to conceive or produce conception or sustain a successful
106 pregnancy during a one-year period or such treatment is medically
107 necessary;

108 (2) An individual's inability to reproduce either as a single individual
109 or with a partner without medical intervention; or

110 (3) A licensed physician's findings based on a patient's medical,
111 sexual and reproductive history, age, physical findings or diagnostic
112 testing.

113 (b) Such policy may:

114 (1) Limit such coverage to an individual who fails to conceive or
115 produce conception or sustain a successful pregnancy during a one-year
116 period until the date of such individual's fortieth birthday;

117 (2) Limit such coverage for ovulation induction to a lifetime
118 maximum benefit of four cycles;

119 (3) Limit such coverage for intrauterine insemination to a lifetime
120 maximum benefit of three cycles;

121 (4) Limit lifetime benefits to a maximum of two cycles, with not more
122 than two embryo implantations per cycle, for in-vitro fertilization,
123 gamete intra-fallopian transfer, zygote intra-fallopian transfer or low
124 tubal ovum transfer, provided each such fertilization or transfer shall be
125 credited toward such maximum as one cycle;

126 (5) Limit coverage for in-vitro fertilization, gamete intra-fallopian
127 transfer, zygote intra-fallopian transfer and low tubal ovum transfer to
128 those individuals who have been unable to conceive or produce
129 conception or sustain a successful pregnancy through less expensive
130 and medically viable infertility treatment or procedures covered under
131 such policy. Nothing in this subdivision shall be construed to deny the
132 coverage required by this section to any individual who foregoes a
133 particular infertility treatment or procedure if the individual's physician
134 determines that such treatment or procedure is likely to be unsuccessful;

135 (6) Require that covered infertility treatment or procedures be
136 performed at facilities that conform to the standards and guidelines
137 developed by the American Society of Reproductive Medicine or the

138 Society of Reproductive Endocrinology and Infertility;

139 (7) Limit coverage to individuals who have maintained coverage
140 under such policy for at least twelve months; and

141 (8) Require disclosure by the individual seeking such coverage to
142 such individual's existing health insurance carrier of any previous
143 infertility treatment or procedures for which such individual received
144 coverage under a different health insurance policy. Such disclosure shall
145 be made on a form and in the manner prescribed by the Insurance
146 Commissioner.

147 (c) (1) Any insurance company, hospital service corporation, medical
148 service corporation or health care center may issue to a religious
149 employer a group health insurance policy that excludes coverage for
150 methods of diagnosis and treatment of infertility that are contrary to the
151 religious employer's bona fide religious tenets.

152 (2) Upon the written request of an individual who states in writing
153 that methods of diagnosis and treatment of infertility are contrary to
154 such individual's religious or moral beliefs, any insurance company,
155 hospital service corporation, medical service corporation or health care
156 center may issue to or on behalf of the individual a policy or rider
157 thereto that excludes coverage for such methods.

158 (d) Any health insurance policy issued pursuant to subsection (c) of
159 this section shall provide written notice to each insured or prospective
160 insured that methods of diagnosis and treatment of infertility are
161 excluded from coverage pursuant to said subsection. Such notice shall
162 appear, in not less than ten-point type, in the policy, application and
163 sales brochure for such policy.

164 (e) As used in this section, "religious employer" means an employer
165 that is a "qualified church-controlled organization", as defined in 26 USC
166 3121 or a church-affiliated organization.

167 (f) No group health insurance policy providing coverage of the type

168 specified in subdivisions (1), (2), (4), (11) and (12) of section 38a-469
169 delivered, issued for delivery, amended, renewed or continued in this
170 state on or after January 1, 2023, shall discriminate based on an insured's
171 expected length of life, present or predicted disability, degree of medical
172 dependency, perceived quality of life, or other health conditions, or on
173 personal characteristics, including age, race, color, religious creed,
174 national origin, sex, sexual orientation, marital status or gender identity.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2023</i>	38a-509
Sec. 2	<i>January 1, 2023</i>	38a-536

Statement of Purpose:

To provide equal coverage for medically necessary infertility treatments.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]