

1 AN ACT relating to coverage for medical services.

2 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

3 ➔SECTION 1. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER 304  
4 IS CREATED TO READ AS FOLLOWS:

5 *(1) As used in this section:*

6 *(a) "Iatrogenic infertility" means an impairment of fertility caused by surgery,*  
7 *radiation, chemotherapy, or any other medical treatment affecting*  
8 *reproductive organs or processes;*

9 *(b) "May directly or indirectly cause" means the treatment has a likely side*  
10 *effect of infertility as established by the American Society for Reproductive*  
11 *Medicine, the American Society of Clinical Oncology, or other reputable*  
12 *professional medical organizations;*

13 *(c) "Religious organization" includes but is not limited to a religious group,*  
14 *corporation, association, school or educational institution, ministry, order,*  
15 *society, or similar entity, regardless of whether it is integrated or affiliated*  
16 *with a church or other house of worship; and*

17 *(d) "Standard fertility preservation services" means procedures to preserve*  
18 *fertility that are consistent with established medical practices and*  
19 *professional guidelines published by the American Society for Reproductive*  
20 *Medicine, the American Society of Clinical Oncology, or other reputable*  
21 *professional medical organizations.*

22 *(2) Except as provided in subsection (5) of this section, all health benefit plans shall*  
23 *provide coverage for standard fertility preservation services when a medically*  
24 *necessary medical treatment may directly or indirectly cause iatrogenic infertility*  
25 *to an insured.*

26 *(3) The coverage required by subsection (2) of this section:*

27 *(a) Shall include:*

- 1           1. Evaluation expenses;  
 2           2. Laboratory assessments; and  
 3           3. Medications and treatment associated with oocyte and sperm  
 4           cryopreservation procedures, including obtaining, freezing, and  
 5           storing gametes for up to one (1) year; and

6           (b) May:

- 7           1. Exclude costs associated with storage of oocytes or sperm after one (1)  
 8           year;  
 9           2. Include age restrictions in accordance with the guidelines set forth by  
 10           the American Society for Reproductive Medicine or the American  
 11           Society of Clinical Oncology;  
 12           3. Include a lifetime limit of one (1) oocyte or sperm cryopreservation  
 13           procedure per eligible insured; and  
 14           4. Be limited to nonexperimental procedures, as defined by the American  
 15           Society for Reproductive Medicine or the American Society of Clinical  
 16           Oncology.

17           (4) Procedures covered by this section shall:

- 18           (a) Be performed at a health facility licensed or certified in Kentucky or  
 19           another state; and  
 20           (b) Conform to the guidelines of the American Society for Reproductive  
 21           Medicine or the American Society of Clinical Oncology.

22           (5) This section shall not apply to an employer-sponsored health benefit plan if the  
 23           employer is a religious organization.

24           ➔SECTION 2. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER 304  
 25 IS CREATED TO READ AS FOLLOWS:

- 26           (1) All insurers issuing or renewing a health insurance policy or plan, including but  
 27           not limited to a health benefit plan, that provides medical or surgical benefits

1 with respect to orchiectomy or orchidectomy as treatment for testicular or other  
2 urological cancer shall provide coverage, in a manner determined in consultation  
3 with the attending physician and the covered person and subject to applicable  
4 cost sharing that is consistent with the cost sharing that is established for other  
5 benefits under the coverage, for the following:

6 (a) All stages of surgical reconstruction related to the orchiectomy or  
7 orchidectomy, including testicular or other urological prostheses; and

8 (b) Physical complications of all stages of orchiectomy or orchidectomy,  
9 including any related surgical reconstruction.

10 (2) The policy or plan shall provide written notice to a covered person of the  
11 availability of medical and surgical benefits with respect to an orchiectomy or  
12 orchidectomy upon enrollment and annually thereafter.

13 ➔SECTION 3. A NEW SECTION OF SUBTITLE 17C OF KRS CHAPTER 304  
14 IS CREATED TO READ AS FOLLOWS:

15 Section 2 of this Act shall apply to limited health service benefit plans, including any  
16 limited health service contract, as defined in KRS 304.38A-010.

17 ➔SECTION 4. A NEW SECTION OF SUBTITLE 38A OF KRS CHAPTER 304  
18 IS CREATED TO READ AS FOLLOWS:

19 Limited health service organizations shall comply with Section 2 of this Act.

20 ➔Section 5. This Act applies to policies or plans issued or renewed on or after  
21 January 1, 2023.

22 ➔Section 6. This Act takes effect January 1, 2023.