

GREEN SHEET REDIGEST

HB 537

2022 Regular Session

Davis

INSURANCE/HEALTH: Requires health insurance coverage for infertility treatments

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DIGEST

Proposed law requires a health coverage plan in this state that provides hospital, medical, or surgical benefits to cover medically necessary expenses for standard fertility preservation services for a covered individual who undergoes a medical treatment that may directly or indirectly cause iatrogenic infertility.

For coverage eligibility, proposed law requires the individual to have a medical condition that may cause iatrogenic infertility or medication therapy, surgery, radiation, chemotherapy, or other medical treatment that may directly or indirectly cause iatrogenic infertility.

Proposed law exempts an organization that opposes providing coverage on account of religious objections, operates and is organized as a nonprofit entity, and holds itself out as a religious organization.

Proposed law defines "health coverage plan", "iatrogenic infertility", "medical treatment that may directly or indirectly cause iatrogenic infertility", and "standard fertility preservation services".

Proposed law may be known and cited as "The Medically Necessary Fertility Preservation Act".

Effective Jan. 1, 2024.

(Adds R.S. 22:1036.1)

Summary of Amendments Adopted by House

The Committee Amendments Proposed by House Committee on Insurance to the original bill:

1. Add intrauterine insemination, IVF procedures, and standard fertility preservation services for insurance coverage pursuant to proposed law.
2. Define "health coverage plan".
3. Decrease the required history of infertility from 5 years to 1 year.
4. Remove exposure in utero to diethylstilbestrol (DES) as a condition for which a patient may present as a reason for infertility.
5. Add polycystic ovary syndrome and male factor infertility as conditions for which a patient may present as reasons for infertility.
6. Require a patient to have experienced as least 3 unsuccessful intrauterine inseminations prior to coverage eligibility for IVF procedures.
7. Add conditions for patient coverage eligibility for standard fertility preservation services. Require a patient to have a medical condition that may cause infertility or an expectation of undergoing a medical treatment, including but not limited to chemotherapy and radiation, that is recognized by medical professionals to cause a risk of impairment to fertility. Further add that standard fertility preservation services are "standard" as recognized by the American Society of Clinical Oncology or the American Society for Reproductive Medicine.

8. Exempt an organization that opposes providing coverage on account of religious objections, operates and is organized as a nonprofit entity, and holds itself out as a religious organization.

The House Floor Amendments to the engrossed bill:

1. Remove mandatory health coverage benefits and relevant provisions with respect to in vitro fertilization procedures and intrauterine inseminations.
2. Redefine "health coverage plan" and define "iatrogenic infertility", "medical treatment that may directly or indirectly cause iatrogenic infertility", and "standard fertility preservation services".
3. Provide for proposed law to be known and cited as "The Medically Necessary Fertility Preservation Act".
4. Add the effective date of Jan. 1, 2024, and further require a new policy, contract, or health coverage plan in this state to comply with proposed law on and after Jan. 1, 2023.

Summary of Amendments Adopted by Senate

Committee Amendments Proposed by Senate Committee on Insurance to the reengrossed bill

1. Covers medical treatments that may directly or indirectly cause iatrogenic infertility.
2. Defines a health coverage plan.