HLS 22RS-648 **REENGROSSED**

2022 Regular Session

HOUSE BILL NO. 537

BY REPRESENTATIVES DAVIS, ADAMS, BAGLEY, BOURRIAQUE, BOYD, BRASS, BROWN, BRYANT, BUTLER, CARPENTER, CARRIER, DUBUISSON, DUPLESSIS, FISHER, FREEMAN, FREIBERG, GADBERRY, GOUDEAU, GREEN, HARRIS, HILFERTY, HORTON, HUGHES, ILLG, IVEY, JEFFERSON, JENKINS, TRAVIS JOHNSON, JORDAN, KERNER, LACOMBE, LAFLEUR, LANDRY, LARVADAIN, MAGEE, MARCELLE, MARINO, MCKNIGHT, MCMAHEN, DUSTIN MILLER, NEWELL, CHARLES OWEN, ROBERT OWEN, PRESSLY, SCHEXNAYDER, SCHLEGEL, SELDERS, STAGNI, VILLIO, WILLARD, AND ZERINGUE

INSURANCE/HEALTH: Requires health insurance coverage for infertility treatments

1	AN ACT
2	To enact R.S. 22:1036.1, relative to health insurance issuers; to require health coverage
3	plans to cover services and benefits relative to standard fertility preservation
4	services; to require patients to meet certain conditions; to provide for exemptions;
5	to provide for definitions; to provide for effectiveness; and to provide for related
6	matters.
7	Be it enacted by the Legislature of Louisiana:
8	Section 1. R.S. 22:1036.1 is hereby enacted to read as follows:
9	§1036.1. Required coverage for standard fertility preservation services; conditions
10	applicable to coverage; exemptions; definitions
11	A.(1) A health insurance issuer offering health coverage plans in this state
12	that provide hospital, medical, or surgical benefits for individuals covered under a
13	respective plan shall provide coverage for medically necessary expenses for standard
14	fertility preservation services for an individual who undergoes a medical treatment
15	that may directly or indirectly cause iatrogenic infertility.
16	(2) A patient is entitled to coverage benefits if either of the following
17	conditions is met:

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CODING: Words in struck through type are deletions from existing law; words underscored are additions.

1	(a) The patient has a medical condition that may cause infertility.
2	(b) The patient is expected to undergo medication therapy, surgery, radiation,
3	chemotherapy, or other medical treatment that may directly or indirectly cause
4	iatrogenic infertility.
5	B. Notwithstanding any provision of this Section, the coverage requirements
6	of this Section do not apply to any health coverage plan offered by an entity that does
7	all of the following:
8	(1) Opposes providing coverage for some or all of the services described in
9	this Section on account of religious objections.
10	(2) Operates and is organized as a nonprofit entity pursuant to state law.
11	(3) Holds itself out as a religious organization.
12	C. For purposes of this Section, the following terms apply:
13	(1) "Health coverage plan" means any hospital, health, or medical expense
14	insurance policy, hospital or medical service contract, employee welfare benefit plan,
15	contract or agreement with a health maintenance organization or a preferred provider
16	organization, health and accident insurance policy, or any other insurance contract
17	of this type. "Health coverage plan" does not include a plan providing coverage for
18	excepted benefits as defined in R.S. 22:1061, limited benefit health insurance plans,
19	short-term policies that have a term of less than twelve months, nor any plan offered
20	through the office of group benefits.
21	(2) "Iatrogenic infertility" means an impairment of fertility caused directly
22	or indirectly by surgery, radiation, chemotherapy, or other medical treatment.
23	(3) "Medical treatment that may directly or indirectly cause iatrogenic
24	infertility" means medical treatment with a potential side effect of impaired fertility
25	as established by the American Society of Clinical Oncology or the American
26	Society for Reproductive Medicine.
27	(4) "Standard fertility preservation services" means procedures to preserve
28	fertility that are consistent with established medical practices or professional
29	guidelines published by the American Society of Clinical Oncology or the American

- 1 Society for Reproductive Medicine. "Standard fertility preservation services" does
- 2 not include the creation or freezing of embryos nor the fertilization of eggs.
- 3 Section 2. This Act shall be known and may be cited as "The Medically Necessary
- 4 Fertility Preservation Act".
- 5 Section 3.(A) This Act shall become effective on January 1, 2024.
- 6 (B) This Act shall apply to any new policy, contract, or health coverage plan issued,
- delivered, amended, or renewed in this state on or after January 1, 2023.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 537 Reengrossed

2022 Regular Session

Davis

Abstract: Requires health coverage benefits for standard fertility preservation services under certain conditions.

<u>Proposed law</u> 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, <u>proposed law</u> requires the individual to have a medical condition that may cause infertility or medication therapy, surgery, radiation, chemotherapy, or other medical treatment that may directly or indirectly cause iatrogenic infertility.

<u>Proposed law</u> 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.

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

<u>Proposed law</u> 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 <u>House Committee on Insurance</u> to the <u>original</u> bill:

1. Add intrauterine insemination, IVF procedures, and standard fertility preservation services for insurance coverage pursuant to proposed law.

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- 2. Define "health coverage plan".
- 3. Decrease the required history of infertility <u>from</u> 5 years <u>to</u> 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 <u>proposed law</u> 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 <u>proposed law</u> on and after Jan. 1, 2023.