## FIRST REGULAR SESSION

## SENATE BILL NO. 92

## 100TH GENERAL ASSEMBLY

INTRODUCED BY SENATOR NASHEED.

Pre-filed December 1, 2018, and ordered printed.

0075S.01I

ADRIANE D. CROUSE, Secretary.

## AN ACT

To amend chapter 376, RSMo, by adding thereto one new section relating to insurance coverage for fertility treatments.

Be it enacted by the General Assembly of the State of Missouri, as follows:

Section A. Chapter 376, RSMo, is amended by adding thereto one new 2 section, to be known as section 376.1211, to read as follows:

376.1211. 1. As used in this section, the following terms shall mean:

- 3 (1) "Health benefit plan", the same meaning as defined in section 4 376.1350;
- 5 (2) "Infertility", the inability to conceive after one year of unprotected sexual intercourse or the inability to sustain a successful 7 pregnancy.
- 8 2. No health benefit plan providing coverage for more than
- 9 twenty-five employees that provides pregnancy related benefits shall
- 10 be issued, amended, delivered, or renewed in this state after August 28,
- 11 2019, unless the plan contains coverage for the diagnosis and treatment
- 12 of infertility, including but not limited to in vitro fertilization, uterine
- 13 embryo lavage, embryo transfer, artificial insemination, gamete
- 14 intrafallopian tube transfer, or zygote intrafallopian tube transfer, and
- 15 low tubal ovum transfer.

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- 3. The coverage required under subsection 2 of this section for in vitro fertilization, gamete intrafallopian tube transfer, or zygote
- 18 intrafallopian tube transfer shall be required only if:
- 19 (1) The covered individual has been unable to attain or sustain
- 21 appropriate infertility treatments for which coverage is available under

a successful pregnancy through reasonable, less costly medically

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22 the health benefit plan;

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- (2) The covered individual has not undergone four completed oocyte retrievals, except that if a live birth follows a completed oocyte retrieval, then two more completed oocyte retrievals shall be covered; and
- 27 (3) The procedures are performed at medical facilities that 28 conform to the American College of Obstetric and Gynecology 29 guidelines for in vitro fertilization clinics or to the American Fertility Society minimal standards for programs of in vitro fertilization. 30
- 4. The procedures required to be covered under this section are not required to be contained in any health benefit plan issued to or by 33 a religious institution or organization, or to or by an entity sponsored 34 by a religious institution or organization, that finds the procedures 35 required to be covered under this section to violate its religious and 36 moral teachings and beliefs.