

Duplicates/Conflicts with/Companion to/Relates to:
Duplicates/Relates to Appropriation in the General Appropriation Act

SECTION III: NARRATIVE

BILL SUMMARY

Synopsis:

The House Health And Human Services Committee Substitute For House Bill 95

1. Adds definition of "iatrogenic infertility"- "an impairment of fertility caused directly or indirectly by surgery, chemotherapy, radiation or other medical treatment."
2. Narrows the requirement for fertility preservation coverage from "enrollees whose disease or medically necessary disease treatment, as determined by the enrollee's health care provider, may lead to infertility" to "when treatment may directly or indirectly cause iatrogenic infertility as determined by the insured's health care provider."
3. Requires that coverage may not establish separate deductibles or other cost sharing arrangements for fertility-related services but does allow plans to require cost sharing in amounts similar to, and not in excess of, those required by the plan for comparable medical services"

FISCAL IMPLICATIONS

SIGNIFICANT ISSUES

The substitute bill clarifies that it applies only to iatrogenic infertility which resolves some concerns with the earlier version of the bill.

Fertility preservation, the first step in assisted reproduction, is clearly defined in the substitute and intends to be covered under this bill in conjunction with a diagnosis the treatment for which might lead to iatrogenic infertility.

While "fertility preservation" is defined, the group health coverage sections 'C' in each section) refer to "fertility-related services" which are not defined.

The second step in assisted reproduction, presumably after the treatment course concludes and if pursuing assisted reproduction is medically safe, involves using those sperm, oocytes, embryos or gonadal tissue to achieve pregnancy.

These subsequent treatments might include any or all of the following: in-vitro fertilization, intrauterine insemination, intracytoplasmic sperm injection, embryo transfer and the medications and procedures necessary to prepare for those procedures, and/or surrogacy in the case of iatrogenic infertility due to hysterectomy. These treatments are not clearly addressed in the bill and it is not clear if they are meant to be included in "fertility-related services." The bill does not mention of coverage requirements for these additional treatments, only that no separate deductible is allowable. If the intent is coverage of assisted reproduction following iatrogenic infertility (and not only fertility preservation), this would add significant cost to the bill and would require financial re-analysis; suggest setting a limit to the number of cycles or treatments permissible. If the intent is to not require coverage for the second step, then the bill does not truly permit the option of reproduction following iatrogenic infertility.

PERFORMANCE IMPLICATIONS

ADMINISTRATIVE IMPLICATIONS

CONFLICT, DUPLICATION, COMPANIONSHIP, RELATIONSHIP

TECHNICAL ISSUES

OTHER SUBSTANTIVE ISSUES

ALTERNATIVES

WHAT WILL BE THE CONSEQUENCES OF NOT ENACTING THIS BILL

AMENDMENTS