1	S.191
2	Introduced by Senators Hardy, Perchlik and Ram Hinsdale
3	Referred to Committee on
4	Date:
5	Subject: Health; health insurance; fertility services
6	Statement of purpose of bill as introduced: This bill proposes to require health
7	insurance plans and Vermont Medicaid to provide coverage for fertility-related
8	services. It would also direct the Agency of Human Services to seek federal
9	approval of an amendment to Vermont's Medicaid state plan to permit the
10	Medicaid coverage.
11 12	An act relating to health insurance and Medicaid coverage for fertility- related services
13	It is hereby enacted by the General Assembly of the State of Vermont:
14	Sec. 1. 8 V.S.A. § 4099e is added to read:
15	<u>§ 4099e. FERTILITY-RELATED SERVICES</u>
16	(a) As used in this section:
17	(1) "Health care provider" has the same meaning as in 18 V.S.A.
18	<u>§ 9402.</u>
19	(2) "Health insurance plan" means any individual or group health
20	insurance policy, any hospital or medical service corporation or health

1	maintenance organization subscriber contract, or any other health benefit plan
2	offered, issued, or renewed for any person in this State by a health insurer.
3	The term shall not include benefit plans providing coverage for specific
4	diseases or other limited benefit coverage.
5	(3) "Health insurer" has the same meaning as in 18 V.S.A. § 9402.
6	(b) A health insurance plan shall provide coverage for the following
7	fertility-related services for male and female insureds, regardless of whether an
8	insured is cisgender or transgender:
9	(1) Fertility diagnostic testing.
10	(2) Intrauterine insemination treatment with donor or partner semen.
11	(3) At least three rounds of in vitro fertilization (IVF) with donor or
12	partner semen or egg, including appropriate medications for ovarian
13	stimulation, retrieval of oocytes under anesthesia, embryo transfer, and IVF-
14	related laboratory procedures, ultrasounds, and hormones. A health insurance
15	plan may, but shall not be required to, provide coverage for preimplantation
16	genetic testing as a component of IVF.
17	(4) Clinically appropriate fertility-related medications as ordered or
18	prescribed by the insured's treating health care providers.
19	(c) A health insurance plan shall not establish any rate, term, or condition
20	that places a greater financial burden on an insured for access to fertility-
21	related services than for access to treatment for any other health condition.

1 Sec. 2. 33 V.S.A. § 1901k is added to read: 2 § 1901k. COVERAGE OF FERTILITY-RELATED SERVICES 3 (a) As used in this section, "health care provider" has the same meaning as 4 in 18 V.S.A. § 9402. 5 (b) The Agency of Human Services shall provide Medicaid coverage for 6 the following fertility-related services for male and female Medicaid 7 beneficiaries, regardless of whether a beneficiary is cisgender or transgender: 8 (1) Fertility diagnostic testing. 9 (2) Intrauterine insemination treatment with donor or partner semen. 10 (3) At least three rounds of in vitro fertilization (IVF) with donor or partner semen or egg, including appropriate medications for ovarian 11 12 stimulation, retrieval of oocytes under anesthesia, embryo transfer, and IVF-13 related laboratory procedures, ultrasounds, and hormones. The Agency may, 14 but shall not be required to, provide Medicaid coverage for preimplantation 15 genetic testing as a component of IVF. 16 (4) Clinically appropriate fertility-related medications as ordered or 17 prescribed by the beneficiary's treating health care providers. 18 Sec. 3. COVERAGE FOR FERTILITY-RELATED SERVICES; MEDICAID 19 STATE PLAN AMENDMENT 20 On or before September 1, 2022, the Agency of Human Services shall 21 request approval from the Centers for Medicare and Medicaid Services to

|--|

- 2 <u>services as set forth in Sec. 2 of this act.</u>
- 3 Sec. 4. EFFECTIVE DATES
- 4 (a) Sec. 1 (8 V.S.A. § 4099e) shall take effect on January 1, 2023 and shall
- 5 <u>apply to all health insurance plans issued on and after January 1, 2023 on such</u>
- 6 date as a health insurer offers, issues, or renews the health insurance plan, but
- 7 <u>in no event later than January 1, 2024.</u>
- 8 (b) Sec. 2 (33 V.S.A. § 1901k) shall take effect upon approval by the
- 9 <u>Centers for Medicare and Medicaid Services of Vermont's request to provide</u>
- 10 <u>coverage of fertility-related services as set forth in that section.</u>
- 11 (c) Sec. 3 (coverage for fertility-related services; Medicaid state plan
- 12 <u>amendment) and this section shall take effect on passage.</u>