
DIGEST

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HB 537 Engrossed

2022 Regular Session

Davis

Abstract: Requires health coverage plans to provide benefits for intrauterine insemination, in vitro fertilization (IVF) procedures, and standard fertility preservation services under certain conditions.

Proposed law requires a health coverage plan in this state that provides pregnancy-related benefits for covered individuals to offer and make available coverage for services and benefits on a cost incurred, service, or prepaid basis for expenses related to intrauterine insemination, IVF procedures, and standard fertility preservation services. Requires coverage benefits to be provided to the same extent as benefits provided for other pregnancy-related procedures under the plan. Further requires a health coverage plan to provide coverage if the patient is an individual entitled to benefits under the plan.

Proposed law defines "health coverage plan" and makes certain exclusions.

Proposed law requires the patient to meet certain conditions for coverage eligibility for IVF procedures. Requires the patient and the patient's spouse to have a history of infertility of at least 1 year or infertility associated with at least 1 of the following:

- (1) Endometriosis.
- (2) Blockage of or surgical removal of one or both fallopian tubes.
- (3) Oligospermia.
- (4) Polycystic ovary syndrome.
- (5) Male factor infertility.

Proposed law requires the patient to have been unable to attain a successful pregnancy through any less costly infertility treatments, including but not limited to intrauterine insemination. Further requires the patient to have experienced as least 3 unsuccessful intrauterine inseminations prior to coverage eligibility for IVF procedures.

Proposed law requires IVF procedures to be performed at a medical facility that conforms to the minimal standards for programs of IVF adopted by the American Society for Reproductive Medicine.

Proposed law requires the patient to meet certain conditions for coverage eligibility for standard fertility preservation services. Requires the 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 provides that standard fertility preservation services are "standard" as recognized by the American Society of Clinical Oncology or the American Society for Reproductive Medicine.

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.

(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.

