

2017 -- H 6170 SUBSTITUTE A

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LC002543/SUB A
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STATE OF RHODE ISLAND

IN GENERAL ASSEMBLY

JANUARY SESSION, A.D. 2017

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A N A C T

RELATING TO INSURANCE

Introduced By: Representatives Serpa, Bennett, McNamara, Solomon, and Shekarchi

Date Introduced: April 28, 2017

Referred To: House Corporations

It is enacted by the General Assembly as follows:

1 SECTION 1. Section 27-18-30 of the General Laws in Chapter 27-18 entitled "Accident
2 and Sickness Insurance Policies" is hereby amended to read as follows:

3 **27-18-30. Health insurance contracts -- Infertility.**

4 (a) Any health insurance contract, plan, or policy delivered or issued for delivery or
5 renewed in this state, except contracts providing supplemental coverage to Medicare or other
6 governmental programs, which includes pregnancy related benefits, shall provide coverage for
7 medically necessary expenses of diagnosis and treatment of infertility for women between the
8 ages of twenty-five (25) and forty-two (42) years and for standard fertility preservation services
9 when a medically necessary medical treatment may directly or indirectly cause iatrogenic
10 infertility to a covered person. To the extent that a health insurance contract provides
11 reimbursement for a test or procedure used in the diagnosis or treatment of conditions other than
12 infertility, the tests and procedures shall not be excluded from reimbursement when provided
13 attendant to the diagnosis and treatment of infertility for women between the ages of twenty-five
14 (25) and forty-two (42) years; provided, that a subscriber co-payment not to exceed twenty
15 percent (20%) may be required for those programs and/or procedures the sole purpose of which is
16 the treatment of infertility.

17 (b) For the ~~purpose~~ purposes of this section, "infertility" means the condition of an
18 otherwise presumably healthy ~~married~~ individual who is unable to conceive or sustain a
19 pregnancy during a period of one year.

1 (c) For the purposes of this section, "standard fertility preservation services" means
2 procedures consistent with established medical practices and professional guidelines published by
3 the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or
4 other reputable professional medical organizations.

5 (d) For the purposes of this section, "iatrogenic infertility" means an impairment of
6 fertility by surgery, radiation, chemotherapy or other medical treatment affecting reproductive
7 organs or processes.

8 (e) For the purposes of this section, "may directly or indirectly cause" means treatment
9 with a likely side effect of infertility as established by the American Society for Reproductive
10 Medicine, the American Society of Clinical Oncology, or other reputable professional
11 organizations.

12 ~~(e)~~(f) Notwithstanding the provisions of § 27-18-19 or any other provision to the
13 contrary, this section shall apply to blanket or group policies of insurance.

14 ~~(d)~~(g) The health insurance contract may limit coverage to a lifetime cap of one hundred
15 thousand dollars (\$100,000).

16 SECTION 2. Section 27-19-23 of the General Laws in Chapter 27-19 entitled "Nonprofit
17 Hospital Service Corporations" is hereby amended to read as follows:

18 **27-19-23. Coverage for infertility.**

19 (a) Any nonprofit hospital service contract, plan, or insurance policies delivered, issued
20 for delivery, or renewed in this state, except contracts providing supplemental coverage to
21 Medicare or other governmental programs, which includes pregnancy related benefits shall
22 provide coverage for medically necessary expenses of diagnosis and treatment of infertility for
23 women between the ages of twenty-five (25) and forty-two (42) years and for standard fertility
24 preservation services when a medically necessary medical treatment may directly or indirectly
25 cause iatrogenic infertility to a covered person. To the extent that a nonprofit hospital service
26 corporation provides reimbursement for a test or procedure used in the diagnosis or treatment of
27 conditions other than infertility, those tests and procedures shall not be excluded from
28 reimbursement when provided attendant to the diagnosis and treatment of infertility for women
29 between the ages of twenty-five (25) and forty-two (42) years; provided, that a subscriber
30 copayment, not to exceed twenty percent (20%), may be required for those programs and/or
31 procedures the sole purpose of which is the treatment of infertility.

32 (b) For the purposes of this section, "infertility" means the condition of an otherwise
33 presumably healthy ~~married~~ individual who is unable to conceive or sustain a pregnancy during a
34 period of one year.

1 (c) For the purposes of this section, "standard fertility preservation services" means
2 procedures consistent with established medical practices and professional guidelines published by
3 the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or
4 other reputable professional medical organizations.

5 (d) For the purposes of this section, "iatrogenic infertility" means an impairment of
6 fertility by surgery, radiation, chemotherapy or other medical treatment affecting reproductive
7 organs or processes.

8 (e) For the purposes of this section, "may directly or indirectly cause" means treatment
9 with a likely side effect of infertility as established by the American Society for Reproductive
10 Medicine, the American Society of Clinical Oncology, or other reputable professional
11 organizations.

12 ~~(e)~~(f) The health insurance contract may limit coverage to a lifetime cap of one hundred
13 thousand dollars (\$100,000).

14 SECTION 3. Section 27-20-20 of the General Laws in Chapter 27-20 entitled "Nonprofit
15 Medical Service Corporations" is hereby amended to read as follows:

16 **27-20-20. Coverage for infertility.**

17 (a) Any nonprofit medical service contract, plan, or insurance policies delivered, issued
18 for delivery, or renewed in this state, except contracts providing supplemental coverage to
19 Medicare or other governmental programs, which includes pregnancy related benefits shall
20 provide coverage for the medically necessary expenses of diagnosis and treatment of infertility
21 for women between the ages of twenty-five (25) and forty-two (42) years and for standard
22 fertility preservation services when a medically necessary medical treatment may directly or
23 indirectly cause iatrogenic infertility to a covered person. To the extent that a nonprofit medical
24 service corporation provides reimbursement for a test or procedure used in the diagnosis or
25 treatment of conditions other than infertility, those tests and procedures shall not be excluded
26 from reimbursement when provided attendant to the diagnosis and treatment of infertility for
27 women between the ages of twenty-five (25) and forty-two (42) years. Provided, that subscriber
28 copayment, not to exceed twenty percent (20%), may be required for those programs and/or
29 procedures the sole purpose of which is the treatment of infertility.

30 (b) For the purposes of this section, "infertility" means the condition of an otherwise
31 presumably healthy ~~married~~ individual who is unable to conceive or sustain a pregnancy during a
32 period of one year.

33 (c) For the purposes of this section, "standard fertility preservation services" means
34 procedures consistent with established medical practices and professional guidelines published by

1 [the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or](#)
2 [other reputable professional medical organizations.](#)

3 [\(d\) For the purposes of this section, "iatrogenic infertility" means an impairment of](#)
4 [fertility by surgery, radiation, chemotherapy or other medical treatment affecting reproductive](#)
5 [organs or processes.](#)

6 [\(e\) For the purposes of this section, "may directly or indirectly cause" means treatment](#)
7 [with a likely side effect of infertility as established by the American Society for Reproductive](#)
8 [Medicine, the American Society of Clinical Oncology, or other reputable professional](#)
9 [organizations.](#)

10 ~~(e)~~(f) The health insurance contract may limit coverage to a lifetime cap of one hundred
11 thousand dollars (\$100,000).

12 SECTION 4. Section 27-41-33 of the General Laws in Chapter 27-41 entitled "Health
13 Maintenance Organizations" is hereby amended to read as follows:

14 **27-41-33. Coverage for infertility.**

15 (a) Any health maintenance organization service contract plan or policy delivered, issued
16 for delivery, or renewed in this state, except a contract providing supplemental coverage to
17 Medicare or other governmental programs, which includes pregnancy related benefits, shall
18 provide coverage for medically necessary expenses of diagnosis and treatment of diagnosis and
19 treatment of infertility for women between the ages of twenty-five (25) and forty-two (42) years
20 [and for standard fertility preservation services when a medically necessary medical treatment may](#)
21 [directly or indirectly cause iatrogenic infertility to a covered person.](#) To the extent that a health
22 maintenance organization provides reimbursement for a test or procedure used in the diagnosis or
23 treatment of conditions other than infertility, those tests and procedures shall not be excluded
24 from reimbursement when provided attendant to the diagnosis and treatment of infertility for
25 women between the ages of twenty-five (25) and forty-two (42) years; provided, that subscriber
26 copayment, not to exceed twenty percent (20%), may be required for those programs and/or
27 procedures the sole purpose of which is the treatment of infertility.

28 (b) For the ~~purpose~~ [purposes](#) of this section, "infertility" means the condition of an
29 otherwise healthy ~~married~~ individual who is unable to conceive or sustain a pregnancy during a
30 period of one year.

31 [\(c\) For the purposes of this section, "standard fertility preservation services" means](#)
32 [procedures consistent with established medical practices and professional guidelines published by](#)
33 [the American Society for Reproductive Medicine, the American Society of Clinical Oncology, or](#)
34 [other reputable professional medical organizations.](#)

1 (d) For the purposes of this section, "iatrogenic infertility" means an impairment of
2 fertility by surgery, radiation, chemotherapy or other medical treatment affecting reproductive
3 organs or processes.

4 (e) For the purposes of this section, "may directly or indirectly cause" means treatment
5 with a likely side effect of infertility as established by the American Society for Reproductive
6 Medicine, the American Society of Clinical Oncology, or other reputable professional
7 organizations.

8 ~~(e)~~(f) The health insurance contract may limit coverage to a lifetime cap of one hundred
9 thousand dollars (\$100,000).

10 SECTION 5. This act shall take effect upon passage.

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EXPLANATION
BY THE LEGISLATIVE COUNCIL
OF
A N A C T
RELATING TO INSURANCE

1 This act would mandate insurance coverage for medically necessary expenses for
2 standard fertility preservation services when a medical treatment may directly or indirectly cause
3 iatrogenic infertility. "Iatrogenic infertility" means an impairment of fertility as a result of
4 surgery, radiation, chemotherapy or other medical treatment affecting the reproductive organs or
5 processes.

6 This act would take effect upon passage.

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