## THE GENERAL ASSEMBLY OF PENNSYLVANIA

## SENATE BILL No. 602 Session of 2023

INTRODUCED BY CAPPELLETTI, KEARNEY, FONTANA, KANE, HAYWOOD, L. WILLIAMS, SANTARSIERO, BREWSTER, COSTA, MUTH AND COLLETT, APRIL 17, 2023

REFERRED TO BANKING AND INSURANCE, APRIL 17, 2023

## AN ACT

1 2 3 4 5 6 7 8 9 10 11 12	Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An act relating to insurance; amending, revising, and consolidating the law providing for the incorporation of insurance companies, and the regulation, supervision, and protection of home and foreign insurance companies, Lloyds associations, reciprocal and inter-insurance exchanges, and fire insurance rating bureaus, and the regulation and supervision of insurance carried by such companies, associations, and exchanges, including insurance carried by the State Workmen's Insurance Fund; providing penalties; and repealing existing laws," in casualty insurance, providing for infertility care coverage.
13	The General Assembly of the Commonwealth of Pennsylvania
14	hereby enacts as follows:
15	Section 1. The act of May 17, 1921 (P.L.682, No.284), known
16	as The Insurance Company Law of 1921, is amended by adding a
17	section to read:
18	Section 635.9. Infertility Care Coverage(a) A health
19	insurance policy covered under this section shall include
20	coverage for infertility care and shall waive cost-sharing
21	requirements related to infertility care.
22	(b) Infertility care coverage under this section shall be

1	provided to covered individuals, including covered spouses and
2	covered nonspouse dependents. Infertility care coverage under
3	this section shall be provided without discrimination on the
4	basis of age, ancestry, color, disability, domestic partner
5	status, gender, gender expression, gender identity, genetic
6	information, marital status, national origin, race, religion,
7	sex or sexual orientation. Nothing in this subsection shall be
8	construed to interfere with the clinical judgment of a
9	physician.
10	(c) Infertility care coverage under this section shall be
11	for the consultation, diagnosis and treatment of infertility,
12	including the following:
13	(1) Intrauterine insemination.
14	(2) Cryopreservation and thawing of eggs, sperm and embryos.
15	(3) Cryopreservation of ovarian tissue.
16	(4) Cryopreservation of testicular tissue.
17	<u>(5) Embryo biopsy.</u>
18	(6) Diagnostic testing.
19	(7) Fresh and frozen embryo transfers.
20	(8) Egg retrievals with unlimited embryo transfers in
21	accordance with the guidelines of the American Society for
22	Reproductive Medicine, including the use of single embryo
23	transfers when recommended and medically appropriate.
24	(9) In vitro fertilization, including in vitro fertilization
25	through the use of donor eggs, sperm or embryos and in vitro
26	fertilization that involves the transfer of embryos to a
27	gestational carrier or surrogate.
28	(10) Assisted hatching.
29	(11) Intracytoplasmic sperm injection.
30	(12) Infertility medications.

20230SB0602PN0599

- 2 -

1 (13) Ovulation induction.

2	(14) Storage of oocytes, sperm, embryos and tissue.
3	(15) Surgery to address disorders of the female reproductive
4	tract that impair fertility and to address disorders of sperm
5	production or anatomic disorders of the male reproductive tract
6	<u>that impair fertility.</u>
7	(16) Medical and laboratory services that reduce excess
8	embryo creation through egg cryopreservation and thawing.
9	(17) Surrogacy, including the costs associated with the
10	preparation for reception or introduction of embryos, oocytes or
11	<u>donor sperm into a surrogate or gestational carrier.</u>
12	(18) Gamete intrafallopian transfers.
13	(19) Therapeutic devices.
14	(20) Standard fertility preservation services for an
15	individual who has a medical condition and is expected to
16	undergo medication therapy, surgery, radiation, chemotherapy or
17	other medical treatment that is recognized by a medical
18	professional to cause a risk of impairment to fertility.
19	(21) Any nonexperimental procedure for infertility
20	recognized by the American Society for Reproductive Medicine,
21	the American College of Obstetricians and Gynecologists or the
22	Society for Assisted Reproductive Technology or by an
23	infertility expert identified by the Department of Health.
24	(22) Any other services, procedures, medications or devices
25	related to the consultation, diagnosis and treatment of
26	<u>infertility.</u>
27	(d) A health insurance policy covered under this section may
28	<u>not:</u>
29	(1) contain preexisting condition exclusions, preexisting
30	condition waiting periods to access the infertility care
202	- 3 -

1	coverage required under this section;
2	(2) use the prior diagnosis of infertility or prior
3	treatment for infertility as a basis for excluding, limiting or
4	otherwise restricting the availability of infertility care
5	coverage required under this section; or
6	(3) contain limitations on coverage for infertility benefits
7	based solely on arbitrary factors, including the number of
8	infertility care attempts or cost of infertility care.
9	(e) As used in this section, the following words and phrases
10	shall have the meanings given to them in this subsection unless
11	the context clearly indicates otherwise:
12	"Cost-sharing." The share of costs covered by the patient,
13	including a deductible, coinsurance, copayment or similar
14	charge. The term does not include the payment of a health
15	insurance policy premium.
16	"Health insurance policy." As follows:
17	(1) Any individual or group health insurance policy,
18	subscriber contract, certificate or plan that provides medical
19	or health care coverage by a health care facility or licensed
20	health care provider on an expense-incurred service or prepaid
21	basis and that is offered by or is governed under any of the
22	following:
23	(i) This act, including section 630.
24	(ii) The children's health insurance program under Article
25	XXIII-A.
26	(iii) Subdivision (f) of Article IV of the act of June 13,
27	1967 (P.L.31, No.21), known as the "Human Services Code."
28	(iv) The act of December 29, 1972 (P.L.1701, No.364), known
29	as the "Health Maintenance Organization Act."
30	(v) 40 Pa.C.S. Chs. 61 (relating to hospital plan

20230SB0602PN0599

- 4 -

1	corporations) and 63 (relating to professional health services
2	plan corporations).
3	(2) The term does not include any of the following:
4	(i) Accident only.
5	(ii) Credit only.
6	(iii) Long-term care or disability income.
7	(iv) Specified disease.
8	(v) Medicare supplement.
9	(vi) Tricare, including the Civilian Health and Medical
10	Program of the Uniformed Services (CHAMPUS) supplement.
11	(vii) Fixed indemnity.
12	<u>(viii) Dental only.</u>
13	<u>(ix) Vision only.</u>
14	(x) Workers' compensation.
15	(xi) An automobile medical payment under 75 Pa.C.S.
16	<u>(relating to vehicles).</u>
17	"Infertility." A disease historically defined by the failure
18	to achieve a successful pregnancy after six (6) to twelve (12)
19	months or more of regular, unprotected sexual intercourse or due
20	to an individual's status and capacity to reproduce as an
21	individual or with a partner.
22	"Physician." An individual licensed as a medical doctor by
23	the State Board of Medicine to practice in this Commonwealth.
24	Section 2. This act shall take effect in 60 days.

- 5 -