

2023 Regular Session

HOUSE BILL NO. 186

BY REPRESENTATIVES DAVIS, BOYD, BROWN, GLOVER, AND WILLARD

Prefiled pursuant to Article III, Section 2(A)(4)(b)(i) of the Constitution of Louisiana.

INSURANCE/HEALTH: Provides relative to health insurance coverage for standard fertility preservation services

1 AN ACT

2 To enact R.S. 22:1036.1, relative to health insurance issuers; to require health coverage
3 plans to cover services and benefits relative to standard fertility preservation
4 services; to require patients to meet certain conditions; to provide for exemptions;
5 to provide for definitions; to provide for effectiveness; to provide for applicability;
6 and to provide for related matters.

7 Be it enacted by the Legislature of Louisiana:

8 Section 1. R.S. 22:1036.1 is hereby enacted to read as follows:

9 §1036.1. Required coverage for standard fertility preservation services; conditions
10 applicable to coverage; storage limitations; exemptions; definitions

11 A.(1) A health insurance issuer offering health coverage plans in this state
12 that provide hospital, medical, or surgical benefits for individuals covered under a
13 respective plan shall provide coverage for medically necessary expenses for standard
14 fertility preservation services when a medically necessary treatment may directly or
15 indirectly cause iatrogenic infertility.

16 (2)(a) A health coverage plan shall provide coverage for standard fertility
17 preservation services for a covered individual who has been diagnosed with cancer
18 for which necessary cancer treatment may directly or indirectly cause iatrogenic
19 infertility.

1 (b) Coverage for standard fertility preservation services as defined in this
2 Section includes the costs associated with storage of oocytes and sperm, but a health
3 coverage plan may exclude the costs of storage after three years.

4 (c) A health coverage plan shall not require preauthorization for coverage of
5 standard fertility preservation services; however, a health coverage plan may contain
6 provisions for maximum benefits and may apply a deductible, copayment,
7 coinsurance, and reasonable limitations and exclusions to the extent that these
8 applications are not inconsistent with the requirements of this Section.

9 B. A religious employer may submit a written request for exemption to a
10 health insurance issuer and such issuer shall grant the exemption if the coverage
11 required by this Section conflicts with the religious employer's bona fide religious
12 beliefs and practices. A religious employer that obtains an exemption pursuant to
13 this Subsection shall provide prospective enrollees of its health coverage plan with
14 written notice of the exemption.

15 C. For purposes of this Section, the following terms apply:

16 (1) "Health coverage plan" means any hospital, health, or medical expense
17 insurance policy, hospital or medical service contract, employee welfare benefit plan,
18 contract or agreement with a health maintenance organization or a preferred provider
19 organization, health and accident insurance policy, or any other insurance contract
20 of this type. "Health coverage plan" does not include a plan providing coverage for
21 excepted benefits as defined in R.S. 22:1061, limited benefit health insurance plans,
22 nor short-term policies that have a term of less than twelve months.

23 (2) "Iatrogenic infertility" means an impairment of fertility caused directly
24 or indirectly by surgery, chemotherapy, radiation, or other medical treatment.

25 (3) "Medical treatment that may directly or indirectly cause iatrogenic
26 infertility" means medical treatment with a potential side effect of impaired fertility
27 as established by the American Society of Clinical Oncology or the American
28 Society for Reproductive Medicine.

1 (4) "Religious employer" means an employer that is a church, convention,
2 or association of churches, or an elementary or secondary school that is controlled,
3 operated, or principally supported by a church, convention, or association of
4 churches as defined in Section 3121(w)(3)(A) of the Internal Revenue Code and that
5 qualifies as a tax-exempt organization under Section 501(c)(3) of the Internal
6 Revenue Code.

7 (5) "Standard fertility preservation services" means oocyte and sperm
8 preservation procedures that are consistent with established medical practices or
9 professional guidelines published by the American Society of Clinical Oncology or
10 the American Society for Reproductive Medicine.

11 Section 2. This Act shall be known and may be cited as "The Medically Necessary
12 Fertility Preservation Act."

13 Section 3.(A) This Act shall become effective on January 1, 2024.

14 (B) The provisions of this Act shall not be applicable to plans offered through the
15 office of group benefits until the provisions of this Act have been studied and a specific
16 appropriation by the legislature is provided.

DIGEST

The digest printed below was prepared by House Legislative Services. It constitutes no part of the legislative instrument. The keyword, one-liner, abstract, and digest do not constitute part of the law or proof or indicia of legislative intent. [R.S. 1:13(B) and 24:177(E)]

HB 186 Engrossed

2023 Regular Session

Davis

Abstract: Requires health coverage benefits for standard fertility preservation services under certain conditions.

Proposed law requires a health coverage plan (plan) that provides hospital, medical, or surgical benefits to cover medically necessary expenses for standard fertility preservation services for a covered individual who undergoes a medical treatment for cancer that may directly or indirectly cause iatrogenic infertility. Requires a plan to cover the costs associated with storage of oocytes and sperm for a minimum of 3 years, but authorizes a plan to exclude such storage costs thereafter.

Proposed law prohibits a plan from requiring preauthorization for coverage, but authorizes a plan to contain provisions for maximum benefits and applications of deductibles, copayments, coinsurances, and reasonable limitations and exclusions to the extent that these applications are not inconsistent with proposed law.

Proposed law authorizes a religious employer to submit to an issuer a written request for exemption when the employer's beliefs and practices conflict with the requirements of

proposed law. Requires a religious employer exempt from proposed law to provide written notice of its exemption to prospective enrollees of its plan.

Proposed law defines "health coverage plan", "iatrogenic infertility", "medical treatment that may directly or indirectly cause iatrogenic infertility", "religious employer", and "standard fertility preservation services".

Proposed law may be known and cited as "The Medically Necessary Fertility Preservation Act".

Proposed law does not apply to plans offered through the office of group benefits until proposed law has been studied and the legislature specifies an appropriation.

Effective Jan. 1, 2024.

(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 that proposed law does not apply to plans offered through the office of group benefits until proposed law has been studied and the legislature specifies an appropriation.
2. Make technical changes.