HOUSE BILL 385

C3, J1

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By: Delegates Kaiser, Bates, Bronrott, Carr, Frick, Gutierrez, Holmes, Reznik, Taylor, V. Turner, and Waldstreicher

Introduced and read first time: February 2, 2009 Assigned to: Health and Government Operations

A BILL ENTITLED

1 AN ACT concerning

Insurance - In Vitro Fertilization Benefit - Definition of Successful Pregnancy

FOR the purpose of defining a "successful pregnancy" as a pregnancy that results in a live birth for the purposes of determining the in vitro fertilization insurance benefit; and generally relating to the in vitro fertilization insurance benefit.

- 7 BY repealing and reenacting, with amendments,
- 8 Article Insurance
- 9 Section 15–810
- 10 Annotated Code of Maryland
- 11 (2006 Replacement Volume and 2008 Supplement)

12 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF 13 MARYLAND, That the Laws of Maryland read as follows:

- 14 Article Insurance
- 15 15-810.

16(A) IN THIS SECTION, "SUCCESSFUL PREGNANCY" MEANS A PREGNANCY17THAT RESULTS IN A LIVE BIRTH.

18 [(a)] (B) This section applies to:

19 (1) insurers and nonprofit health service plans that provide hospital, 20 medical, or surgical benefits to individuals or groups on an expense-incurred basis 21 under health insurance policies that are issued or delivered in the State; and



HOUSE BILL 385

1 (2) health maintenance organizations that provide hospital, medical, 2 or surgical benefits to individuals or groups under contracts that are issued or 3 delivered in the State.

4 [(b)] (C) (1)An entity subject to this section provides that pregnancy-related benefits may not exclude benefits for all outpatient expenses 5 arising from in vitro fertilization procedures performed on the policyholder or 6 7 subscriber or dependent spouse of the policyholder or subscriber.

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(2) The benefits under this subsection shall be provided:

9 (i) for insurers and nonprofit health service plans, to the same 10 extent as the benefits provided for other pregnancy-related procedures; and

(ii) for health maintenance organizations, to the same extent as
the benefits provided for other infertility services.

13 [(c)] (D) Subsection (b) of this section applies if:

14 (1) the patient is the policyholder or subscriber or a covered dependent
 15 of the policyholder or subscriber;

16 (2) the patient's oocytes are fertilized with the patient's spouse's 17 sperm;

18 (3) (i) the patient and the patient's spouse have a history of
 19 infertility of at least 2 years' duration; or

20(ii)the infertility is associated with any of the following medical21conditions:

22 1. endometriosis;

232.exposure in utero to diethylstilbestrol, commonly24known as DES;

25 3. blockage of, or surgical removal of, one or both
26 fallopian tubes (lateral or bilateral salpingectomy); or

274.abnormal male factors, including oligospermia,28contributing to the infertility;

(4) the patient has been unable to attain a successful pregnancy
through a less costly infertility treatment for which coverage is available under the
policy or contract; and

1 (5) the in vitro fertilization procedures are performed at medical 2 facilities that conform to the American College of Obstetricians and Gynecologists 3 guidelines for in vitro fertilization clinics or to the American Fertility Society minimal 4 standards for programs of in vitro fertilization.

5 [(d)] (E) An entity subject to this section may limit coverage of the benefits 6 required under this section to three in vitro fertilization attempts per live birth, not to 7 exceed a maximum lifetime benefit of \$100,000.

8 [(e)] (F) Notwithstanding any other provision of this section, if the coverage 9 required under this section conflicts with the bona fide religious beliefs and practices 10 of a religious organization, on request of the religious organization, an entity subject to 11 this section shall exclude the coverage otherwise required under this section in a 12 policy or contract with the religious organization.

13 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
 14 October 1, 2009.