

# SENATE BILL 33

C3  
SB 96/17 – FIN

(PRE-FILED)

8lr0943  
CF HB 249

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By: ~~Senator Reilly~~ Senators Reilly, Benson, Feldman, Hershey, Jennings, Klausmeier, Mathias, Middleton, Oaks, and Rosapepe

Requested: October 24, 2017

Introduced and read first time: January 10, 2018

Assigned to: Finance

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Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: February 6, 2018

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## CHAPTER \_\_\_\_\_

1 AN ACT concerning

2 **Health Insurance – Coverage for Fertility Awareness–Based Methods**

3 FOR the purpose of requiring certain insurers, nonprofit health service plans, and health  
4 maintenance organizations to provide certain coverage for certain instruction on  
5 certain fertility awareness–based methods; prohibiting certain insurers, nonprofit  
6 health service plans, and health maintenance organizations from applying a  
7 copayment, coinsurance requirement, or deductible to coverage for certain  
8 instruction on certain fertility awareness–based methods, except with respect to a  
9 certain health benefit plan; defining a certain term; providing for the application of  
10 this Act; providing for a delayed effective date; and generally relating to coverage for  
11 services relating to fertility awareness–based methods under health insurance.

12 BY adding to

13 Article – Insurance

14 Section 15–826.3

15 Annotated Code of Maryland

16 (2017 Replacement Volume)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

18 That the Laws of Maryland read as follows:

19 **Article – Insurance**

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EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 **15-826.3.**

2 (A) IN THIS SECTION, "FERTILITY AWARENESS-BASED METHODS" MEANS  
3 METHODS OF IDENTIFYING TIMES OF FERTILITY AND INFERTILITY BY AN  
4 INDIVIDUAL TO AVOID ~~OR ACHIEVE~~ PREGNANCY, INCLUDING:

5 (1) CERVICAL MUCUS METHODS;

6 (2) SYMPTO-THERMAL OR SYMPTO-HORMONAL METHODS;

7 (3) THE STANDARD DAYS METHOD; AND

8 (4) THE LACTATIONAL AMENORRHEA METHOD.

9 (B) THIS SECTION APPLIES TO:

10 (1) INSURERS AND NONPROFIT HEALTH SERVICE PLANS THAT  
11 PROVIDE HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS  
12 ON AN EXPENSE-INCURRED BASIS UNDER HEALTH INSURANCE POLICIES OR  
13 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE; AND

14 (2) HEALTH MAINTENANCE ORGANIZATIONS THAT PROVIDE  
15 HOSPITAL, MEDICAL, OR SURGICAL BENEFITS TO INDIVIDUALS OR GROUPS UNDER  
16 CONTRACTS THAT ARE ISSUED OR DELIVERED IN THE STATE.

17 (C) AN ENTITY SUBJECT TO THIS SECTION SHALL PROVIDE COVERAGE FOR  
18 INSTRUCTION BY A LICENSED HEALTH CARE PROVIDER ON FERTILITY  
19 AWARENESS-BASED METHODS.

20 (D) EXCEPT WITH RESPECT TO A HEALTH BENEFIT PLAN THAT IS A  
21 GRANDFATHERED HEALTH PLAN, AS DEFINED IN § 1251 OF THE AFFORDABLE CARE  
22 ACT, AN ENTITY SUBJECT TO THIS SECTION MAY NOT APPLY A COPAYMENT,  
23 COINSURANCE REQUIREMENT, OR DEDUCTIBLE TO THE COVERAGE REQUIRED  
24 UNDER THIS SECTION.

25 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall apply to all  
26 policies, contracts, and health benefit plans subject to this Act that are issued, delivered,  
27 or renewed in the State on or after January 1, 2019.

28 SECTION 3. AND BE IT FURTHER ENACTED, That this Act shall take effect  
29 January 1, 2019.