

THE GENERAL ASSEMBLY OF PENNSYLVANIA

HOUSE BILL

No. 1430 Session of
2007

INTRODUCED BY SHIMKUS, BELFANTI, BRENNAN, CONKLIN, GEORGE, KULA,
McGEEHAN, M. O'BRIEN, READSHAW, SIPTROTH, K. SMITH, SURRA,
YOUNGBLOOD AND MURT, SEPTEMBER 24, 2007

REFERRED TO COMMITTEE ON INSURANCE, SEPTEMBER 24, 2007

AN ACT

1 Amending the act of May 17, 1921 (P.L.682, No.284), entitled "An
2 act relating to insurance; amending, revising, and
3 consolidating the law providing for the incorporation of
4 insurance companies, and the regulation, supervision, and
5 protection of home and foreign insurance companies, Lloyds
6 associations, reciprocal and inter-insurance exchanges, and
7 fire insurance rating bureaus, and the regulation and
8 supervision of insurance carried by such companies,
9 associations, and exchanges, including insurance carried by
10 the State Workmen's Insurance Fund; providing penalties; and
11 repealing existing laws," providing for insurance coverage
12 for infertility treatment services.

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 633.1. Coverage for Infertility Treatment.--(a)
19 Except as set forth in subsection (d) of this section, every
20 health insurance policy that provides pregnancy-related benefits
21 and is delivered, issued, executed or renewed in this
22 Commonwealth on or after the effective date of this section

1 shall provide coverage for the expenses of diagnosis and
2 treatment of infertility, including in vitro fertilization,
3 embryo transfer, artificial insemination, gamete intrafallopian
4 tube transfer, zygote intrafallopian tube transfer and low tubal
5 ovum transfer.

6 (b) The coverage required under subsection (a) of this
7 section may impose the following restrictions:

8 (1) Exclude reversal of elective sterilization or use of
9 assisted reproductive techniques if infertility is the result of
10 elective sterilization.

11 (2) Impose restrictions or waiting periods before assisted
12 reproductive techniques may be employed. Restrictions or waiting
13 periods imposed must be within the recommended treatment
14 guidelines issued by the American Society for Reproductive
15 Medicine or the American College of Obstetricians and
16 Gynecologists.

17 (3) Exclude coverage for women beyond childbearing years.

18 (4) Restrict coverage for assisted reproductive techniques
19 to the policyholder and dependent spouse. Treatments to remedy
20 conditions which could impair fertility must be covered for
21 policyholder and all dependents, including minor children.

22 (5) Require that in vitro fertilization, gamete
23 intrafallopian tube transfer or zygote intrafallopian tube
24 transfer be performed at medical facilities that conform to the
25 American College of Obstetricians and Gynecologists guidelines
26 for in vitro fertilization clinics or to the American Society
27 for Reproductive Medicine minimal standards for programs of in
28 vitro fertilization.

29 (6) Impose a limitation of three assisted reproductive
30 technology procedures that a covered individual may attempt.

1 (7) Require copayment or deductibles for assisted
2 reproductive technology treatments. A copayment or deduction may
3 not exceed those applied to pregnancy-related benefits under the
4 same policy, contract or plan.

5 (c) This section shall not apply to a health insurance
6 policy for hospital indemnity, accident, specified disease,
7 disability income, Civilian Health and Medical Program for the
8 Uniformed Services supplement, Medicare supplement, long-term
9 care or limited benefits.

10 (d) (1) The term "health insurance policy" when used in
11 this section means individual or group health insurance policy,
12 contract or plan which provides medical or health care coverage
13 by any health care facility or licensed health care provider on
14 an expense-incurred service or prepaid basis and which is
15 offered by or is governed under any of the following:

16 (i) This act.

17 (ii) Subdivision (f) of Article IV of the act of June 13,
18 1967 (P.L.31, No.21), known as the "Public Welfare Code."

19 (iii) The act of December 29, 1972 (P.L.1701, No.364), known
20 as the "Health Maintenance Organization Act."

21 (iv) The act of May 18, 1976 (P.L.123, No.54), known as the
22 "Individual Accident and Sickness Insurance Minimum Standards
23 Act."

24 (v) A nonprofit corporation subject to 40 Pa.C.S. Ch. 61
25 (relating to hospital plan corporations) or 63 (relating to
26 professional health services plan corporations).

27 (2) The term "infertility" when used in this section means
28 the inability to conceive after one year of unprotected sexual
29 intercourse or the inability to sustain a successful pregnancy.

30 Section 2. This act shall take effect in 60 days.