## **HOUSE BILL No. 2413**

By Representative Trimmer (By Request)

2-6

AN ACT concerning insurance; providing for coverage for infertility; amending K.S.A. 2006 Supp. 40-2,103 and 40-19c09 and repealing the 12 existing sections.

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Be it enacted by the Legislature of the State of Kansas:

New Section 1. (a) Any individual or group health insurance policy, medical service plan, contract, hospital service corporation contract, hospital and medical service corporation contract, fraternal benefit society or health maintenance organization, municipal group-funded pool and the state employee health care benefits plan which provides coverage for hospital, medical and surgical services, other than medicare supplement or accident-only policies which are delivered, issued for delivery, amended or renewed on or after July 1, 2007, shall include coverage for a diagnosis and treatment of infertility including, but not limited to, in vitro fertilization, uterine embryo lavage, embryo transfer, artificial insemination, gamete intrafallopian tube transfer, zygote intrafallopian tube transfer and low tubal ovum transfer.

- The coverage required under subsection (a) is subject to the following conditions:
- (1) Coverage for procedures for in vitro fertilization, gamete intrafallopian tube transfer or zygote intrafallopian tube transfer shall be required only if:
- (A) The covered individual has been unable to attain or sustain a successful pregnancy through reasonable, less costly medically appropriate infertility treatments for which coverage is available under the policy, plan or contract;
- (B) the covered individual has not undergone four completed oocyte retrievals, except that if a live birth follows a completed oocyte retrieval, then two more completed oocyte retrievals shall be covered; and
- (C) the procedures are performed at medical facilities that conform to the American college of obstetric and gynecology guidelines for in vitro fertilization clinics or to the American fertility society minimal standards for programs of in vitro fertilization.
  - The procedures required to be covered under this section are not

required to be contained in any policy or plan issued to or by a religious institution or organization or to or by an entity sponsored by a religious institution or organization that finds the procedures required to be covered under this section to violate its religious and moral teachings and beliefs.

- (c) For purposes of this section "infertility" means the inability to conceive after one year of unprotected sexual intercourse or the inability to sustain a successful pregnancy.
- (d) Any policy, provision, contract, plan or agreement under this section may apply to such services the same deductibles, coinsurance and other limitations as apply to other covered services.
- (e) The provisions of this section shall not apply to any policy or certificate which provides coverage for any specified disease, specified accident or accident only coverage, credit, dental, disability income, hospital indemnity, long-term care insurance as defined by K.S.A. 40-2227, and amendments thereto, vision care or any other limited supplemental benefit nor to any medicare supplement policy of insurance as defined by the commissioner of insurance by rule and regulation, any coverage issued as a supplement to liability insurance, workers compensation or similar insurance, automobile medical-payment insurance or any insurance under which benefits are payable with or without regard to fault, whether written on a group, blanket or individual basis.
- (f) The provisions of K.S.A. 40-2249a, and amendments thereto, shall not apply to the provisions of this section.
- Sec. 2. K.S.A. 2006 Supp. 40-2,103 is hereby amended to read as follows: 40-2,103. The requirements of K.S.A. 40-2,100, 40-2,101, 40-2,102, 40-2,104, 40-2,105, 40-2,114, 40-2,160, 40-2,165 through 40-2,170, inclusive, 40-2250, K.S.A. 2006 Supp. 40-2,105a and, 40-2,105b and section 1, and amendments thereto, shall apply to all insurance policies, subscriber contracts or certificates of insurance delivered, renewed or issued for delivery within or outside of this state or used within this state by or for an individual who resides or is employed in this state.
- Sec. 3. K.S.A. 2006 Supp. 40-19c09 is hereby amended to read as follows: 40-19c09. (a) Corporations organized under the nonprofit medical and hospital service corporation act shall be subject to the provisions of the Kansas general corporation code, articles 60 to 74, inclusive, of chapter 17 of the Kansas Statutes Annotated, applicable to nonprofit corporations, to the provisions of K.S.A. 40-214, 40-215, 40-216, 40-218, 40-219, 40-222, 40-223, 40-224, 40-225, 40-226, 40-229, 40-230, 40-231, 40-235, 40-236, 40-237, 40-247, 40-248, 40-249, 40-250, 40-251, 40-252, 40-254, 40-2,100, 40-2,101, 40-2,102, 40-2,103, 40-2,104, 40-2,105, 40-2,116, 40-2,117, 40-2,153, 40-2,154, 40-2,160, 40-2,161, 40-2,163 through 40-2,170, inclusive, 40-2a01 et seq., 40-2111 to 40-2116, inclusive, 40-

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2215 to 40-2220, inclusive, 40-2221a, 40-2221b, 40-2229, 40-2230, 40-2 2250, 40-2251, 40-2253, 40-2254, 40-2401 to 40-2421, inclusive, and 40-3 3301 to 40-3313, inclusive, K.S.A. 2006 Supp. 40-2,105a and, 40-2,105b and section 1, and amendments thereto, except as the context otherwise 4 requires, and shall not be subject to any other provisions of the insurance 6 code except as expressly provided in this act.

- (b) No policy, agreement, contract or certificate issued by a corporation to which this section applies shall contain a provision which excludes, limits or otherwise restricts coverage because medicaid benefits as permitted by title XIX of the social security act of 1965 are or may be available for the same accident or illness.
- 12 (c) Violation of subsection (b) shall be subject to the penalties pre-13 scribed by K.S.A. 40-2407 and 40-2411, and amendments thereto.
- 14 Sec. 4. K.S.A. 2006 Supp. 40-2,103 and 40-19c09 are hereby 15 repealed.
- 16 Sec. 5. This act shall take effect and be in force from and after its 17 publication in the statute book.