THE SENATE THIRTY-SECOND LEGISLATURE, 2023 STATE OF HAWAII

S.B. NO. 993

JAN 2 0 2023

A BILL FOR AN ACT

RELATING TO IN VITRO FERTILIZATION INSURANCE COVERAGE.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1 SECTION 1. The legislature finds that reproductive 2 technologies, such as in vitro fertilization, are extremely 3 important to many who desire to have children. The State's 4 mandate that insurance plans provide a one-time benefit for 5 costs associated with in vitro fertilization procedures, though 6 admirable, excludes same-sex couples, unmarried women, and 7 opposite-sex couples for whom male infertility is the relevant 8 factor. While some insurers independently offer policies that 9 cover female couples or women without male partners, these 10 policies are not guaranteed by law and not all cover single 11 Finally, opposite-sex couples for whom male infertility women. 12 is the relevant factor are excluded from coverage through the existing statutory requirement that covered treatment involves 13 14 sperm from the male spouse.

15 The legislature further finds that the current unequal 16 treatment of individuals seeking medical fertility assistance 17 constitutes discrimination on the basis of sex, sexual

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1 orientation, and marital status. In vitro fertilization 2 procedures are expensive, costing \$12,000 to \$15,000 per cycle, 3 approximately half the average annual household disposable 4 income in the United States. Same-sex couples, unmarried women, 5 and opposite-sex couples affected by male infertility must 6 unreasonably bear the full cost of the procedures while married 7 opposite-sex couples for whom female infertility is the relevant 8 factor do not bear the same burden. 9 The purpose of this Act is to ensure equal access to in 10 vitro fertilization for all couples, including same-sex couples, 11 and for women regardless of marital status. 12 SECTION 2. Section 431:10A-116.5, Hawaii Revised Statutes, 13 is amended by amending subsection (a) to read as follows: 14 "(a) All individual and group accident and health or 15 sickness insurance policies [which] that provide pregnancy-16 related benefits shall include, in addition to any other 17 benefits for treating infertility, a one-time only benefit for 18 all outpatient expenses arising from in vitro fertilization 19 procedures performed on the insured or the insured's dependent 20 spouse; provided that:

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1	(1)	Benefits under this section shall be gender neutral,
2		meaning any benefit available to married opposite-sex
3		couples shall also be available for same-sex couples,
4		and for women regardless of marital status;
5	[(1)]	(2) Benefits under this section shall be provided to
6		the same extent as the benefits provided for other
7		pregnancy-related benefits;
8	[(2)	The patient is the insured or covered dependent of the
9		insured;]
10	(3)	The [patient's] oocytes [are fertilized with the
11		patient's spouse's sperm;] or sperm of the insured or
12		of the insured's dependent spouse are used in the in
13		vitro fertilization procedures;
14	(4)	The:
15		(A) [Patient and the patient's spouse have] <u>Insured</u>
16		or the insured's dependent spouse has a history
17		of infertility of at least [five years' duration;
18		or] <u>two years;</u>
19		(B) Infertility is associated with one or more of the
20		following medical conditions:
21		(i) Endometriosis;

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1		(ii) Exposure in utero to diethylstilbestrol,
2		commonly known as DES;
3		(iii) Blockage of, or surgical removal of, one or
4		both fallopian tubes (lateral or bilateral
5		<pre>salpingectomy); or</pre>
6		(iv) Abnormal male factors contributing to [the]
7		infertility; <u>or</u>
8		(C) Insured and insured's dependent spouse are of the
9		same sex;
10	(5)	The [patient] insured or the insured's dependent
11		spouse has been unable to attain a successful
12		pregnancy through other applicable infertility
13		treatments [for which coverage is available] <u>covered</u>
14		under the insurance contract; and
15	(6)	The in vitro fertilization procedures are performed at
16		medical facilities that conform to the American
17		College of Obstetricians and [Gynecologists]
18		Gynecologists' guidelines for in vitro fertilization
19		clinics or $[to]$ the American Society for Reproductive
20		[Medicine minimal] Medicine's minimum standards for
21		[programs of] in vitro fertilization[-] programs.



1	The benefits available under this subsection shall be covered		
2	expenses directly related to in vitro fertilization services and		
3	shall not include other pregnancy-related or other post-in vitro		
4	fertilization outpatient services."		
5	SECTION 3. Section 432:1-604, Hawaii Revised Statutes, is		
6	amended by amending subsection (a) to read as follows:		
7	"(a) All individual and group hospital or medical service		
8	plan contracts [which] that provide pregnancy-related benefits		
9	shall include, in addition to any other benefits for treating		
10	infertility, a one-time only benefit for all outpatient expenses		
11	arising from in vitro fertilization procedures performed on the		
12	subscriber or member or the subscriber's or member's dependent		
13	spouse; provided that:		
14	(1) Benefits under this section shall be gender neutral,		
15	meaning any benefit available to married opposite-sex		
16	couples shall also be available for same-sex couples,		
17	and for women regardless of marital status;		
18	$\left[\frac{1}{2}\right]$ (2) Benefits under this section shall be provided to		

19 the same extent as the benefits provided for other20 pregnancy-related benefits;



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1	[(2)	The patient is a subscriber or member or covered
2		dependent of the subscriber or member;]
3	(3)	The [patient's] oocytes [are fertilized with the
4		patient's spouse's sperm;] or sperm of the subscriber
5		or member or of the subscriber's or member's dependent
6		spouse are used in the in vitro fertilization
7		procedures;
8	(4)	The:
9		(A) [Patient and the patient's spouse have]
10		Subscriber or member or the subscriber's or
11		member's dependent spouse has a history of
12		infertility of at least [five years' duration;
13		or] <u>two years;</u>
14		(B) Infertility is associated with one or more of the
15		following medical conditions:
16		(i) Endometriosis;
17		(ii) Exposure in utero to diethylstilbestrol,
18		commonly known as DES;
19		(iii) Blockage of, or surgical removal of, one or
20		both fallopian tubes (lateral or bilateral
21		<pre>salpingectomy); or</pre>



1		(iv) Abnormal male factors contributing to [the]
2		infertility; <u>or</u>
3		(C) Subscriber or member and the subscriber's or
4		member's dependent spouse are of the same sex;
5	(5)	The [patient] subscriber or member or the subscriber's
6		or member's dependent spouse has been unable to attain
7		a successful pregnancy through other applicable
8		infertility treatments [for which coverage is
9		available] covered under the contract; and
10	(6)	The in vitro fertilization procedures are performed at
11		medical facilities that conform to the American
12		College of Obstetricians and [Gynecologists]
13		<u>Gynecologists'</u> guidelines for in vitro fertilization
14		clinics or $[to]$ the American Society for Reproductive
15		[Medicine minimal] Medicine's minimum standards for
16		[programs of] in vitro fertilization[+] programs.
17	The benef	its available under this subsection shall be covered
18	expenses	directly related to in vitro fertilization services and
19	shall not	include other pregnancy-related or other post-in vitro
20	fertiliza	tion outpatient services."



1 SECTION 4. The coverage for in vitro fertilization services required under sections 2 and 3 of this Act is not 2 intended to apply to the medicaid program. 3 4 SECTION 5. Statutory material to be repealed is bracketed 5 and stricken. New statutory material is underscored. 6 SECTION 6. This Act shall take effect on July 1, 2023. 7

INTRODUCED BY:

Hal North



Report Title:

In Vitro Fertilization; Mandatory Insurance Coverage; Same-Sex Couples; Unmarried Women; Male Infertility; Parity

Description:

Removes discriminatory requirements for mandatory insurance coverage of in vitro fertilization procedures to create parity of coverage for same-sex couples, unmarried women, and oppositesex couples for whom male infertility is the relevant factor. Requires the insured or the insured's dependent spouse to have a history of infertility of at least two years rather than five years.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

