

[Third Reprint]

ASSEMBLY, No. 1862

STATE OF NEW JERSEY
209th LEGISLATURE

INTRODUCED JANUARY 24, 2000

Sponsored by:

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District 20 (Union)

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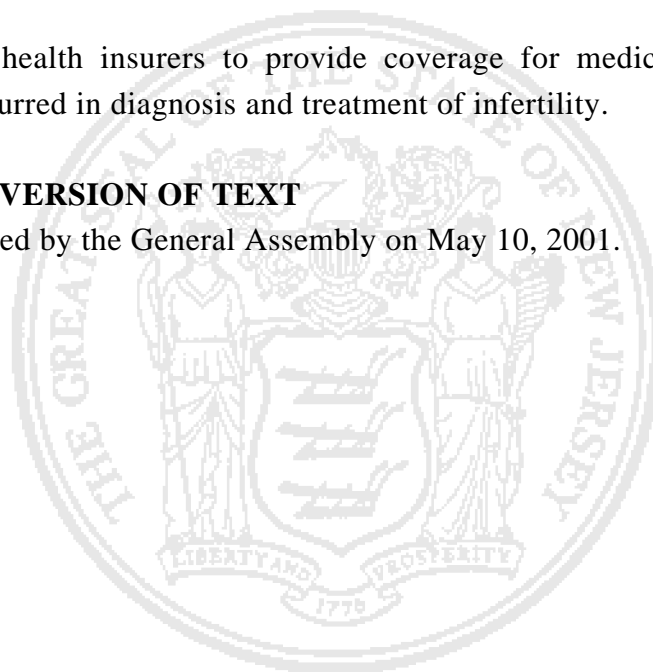
Assemblymen Lance, Augustine, Assemblywomen Previte, Quigley, Assemblyman Barnes, Assemblywoman Buono, Assemblyman LeFevre, Assemblywoman Weinberg, Assemblymen Blee, Felice, Garcia, Assemblywoman Greenstein, Assemblymen Holzapfel, Wolfe, Gusciora, Conaway, Asselta, Wisniewski and Geist

SYNOPSIS

Requires health insurers to provide coverage for medically necessary expenses incurred in diagnosis and treatment of infertility.

CURRENT VERSION OF TEXT

As amended by the General Assembly on May 10, 2001.



(Sponsorship Updated As Of: 6/8/2001)

1 AN ACT requiring health insurers to provide coverage for medically
2 necessary expenses incurred in the diagnosis and treatment of
3 infertility and supplementing ¹[Title 17 of the Revised Statutes,
4 Title 17B of the New Jersey Statutes and P.L.1973, c.337 (C.26:2J-
5 1 et seq.)] various parts of the statutory law¹.

6

7 **BE IT ENACTED** by the Senate and General Assembly of the State
8 of New Jersey:

9

10 1. ³a.³ A hospital service corporation contract which provides
11 hospital or medical expense benefits for groups with more than 50
12 persons, which includes pregnancy-related benefits, shall not
13 be delivered, issued, executed or renewed in this State, or approved
14 for issuance or renewal in this State by the Commissioner of Banking
15 and Insurance on or after the effective date of this act unless the
16 contract provides coverage for persons covered under the contract for
17 medically necessary expenses incurred in the diagnosis and treatment
18 of infertility as provided pursuant to this section. The hospital service
19 corporation contract shall provide coverage which includes, but is not
20 limited to, the following services related to infertility: diagnosis and
21 diagnostic tests; medications; surgery; in vitro fertilization; embryo
22 transfer; artificial insemination; gamete intra fallopian transfer; zygote
23 intra fallopian transfer; intracytoplasmic sperm injection; and four
24 completed egg retrievals per lifetime of the covered person. The
25 hospital service corporation may provide that coverage for in vitro
26 fertilization, gamete intra fallopian transfer and zygote intra fallopian
27 transfer shall be limited to a covered person who: a. has used all
28 reasonable, less expensive and medically appropriate treatments and
29 is still unable to become pregnant or carry a pregnancy; b. has not
30 reached the limit of four completed egg retrievals; and c. is 45 years
31 of age or younger.

32 For purposes of this section, "infertility" means the disease or
33 condition that results in the abnormal function of the reproductive
34 system such that a person is not able to: impregnate another person;
35 conceive after two years of unprotected intercourse if the female
36 partner is under 35 years of age, or one year of unprotected
37 intercourse if the female partner is 35 years of age or older or one of
38 the partners is considered medically sterile; or carry a pregnancy to
39 live birth.

40 The benefits shall be provided to the same extent as for other

EXPLANATION - Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

¹ Assembly ABI committee amendments adopted January 18, 2001.

² Assembly floor amendments adopted January 29, 2001.

³ Assembly floor amendments adopted May 10, 2001.

1 pregnancy-related procedures under the contract, except that the
2 services provided for in this section shall be performed at facilities that
3 conform to standards established by the American Society for
4 Reproductive Medicine or the American College of Obstetricians and
5 Gynecologists. ²The same copayments, deductibles and benefit limits
6 shall apply to the diagnosis and treatment of infertility pursuant to this
7 section as those applied to other medical or surgical benefits under the
8 contract.²

9 ³b. A religious employer may request, and a hospital service
10 corporation shall grant, an exclusion under the contract for the
11 coverage required by this section for in vitro fertilization, embryo
12 transfer, artificial insemination, zygote intra fallopian transfer and
13 intracytoplasmic sperm injection, if the required coverage is contrary
14 to the religious employer's bona fide religious tenets. The hospital
15 service corporation that issues a contract containing such an exclusion
16 shall provide written notice thereof to each prospective subscriber or
17 subscriber, which shall appear in not less than 10 point type, in the
18 contract, application and sales brochure. For the purposes of this
19 subsection, "religious employer" means an employer that is a church,
20 convention or association of churches or any group or entity that is
21 operated, supervised or controlled by or in connection with a church
22 or a convention or association of churches as defined in 26 U.S.C.
23 s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under
24 26 U.S.C. s.501(c)(3).

25 c.³ This section shall apply to those hospital service corporation
26 contracts in which the hospital service corporation has reserved the
27 right to change the premium.

28
29 2. ³a.³ A medical service corporation contract which provides
30 hospital or medical expense benefits for groups with more than 50
31 persons, which includes pregnancy-related benefits, shall not
32 be delivered, issued, executed or renewed in this State, or approved
33 for issuance or renewal in this State by the Commissioner of Banking
34 and Insurance on or after the effective date of this act unless the
35 contract provides coverage for persons covered under the contract for
36 medically necessary expenses incurred in the diagnosis and treatment
37 of infertility as provided pursuant to this section. The medical service
38 corporation contract shall provide coverage which includes, but is not
39 limited to, the following services related to infertility: diagnosis and
40 diagnostic tests; medications; surgery; in vitro fertilization; embryo
41 transfer; artificial insemination; gamete intra fallopian transfer; zygote
42 intra fallopian transfer; intracytoplasmic sperm injection; and four
43 completed egg retrievals per lifetime of the covered person. The
44 medical service corporation may provide that coverage for in vitro
45 fertilization, gamete intra fallopian transfer and zygote intra fallopian
46 transfer shall be limited to a covered person who: a. has used all

1 reasonable, less expensive and medically appropriate treatments and
2 is still unable to become pregnant or carry a pregnancy; b. has not
3 reached the limit of four completed egg retrievals; and c. is 45 years
4 of age or younger.

5 For purposes of this section, "infertility" means the disease or
6 condition that results in the abnormal function of the reproductive
7 system such that a person is not able to: impregnate another person;
8 conceive after two years of unprotected intercourse if the female
9 partner is under 35 years of age, or one year of unprotected
10 intercourse if the female partner is 35 years of age or older or one of
11 the partners is considered medically sterile; or carry a pregnancy to
12 live birth.

13 The benefits shall be provided to the same extent as for other
14 pregnancy-related procedures under the contract, except that the
15 services provided for in this section shall be performed at facilities that
16 conform to standards established by the American Society for
17 Reproductive Medicine or the American College of Obstetricians and
18 Gynecologists. ²The same copayments, deductibles and benefit limits
19 shall apply to the diagnosis and treatment of infertility pursuant to this
20 section as those applied to other medical or surgical benefits under the
21 contract.²

22 ³b. A religious employer may request, and a medical service
23 corporation shall grant, an exclusion under the contract for the
24 coverage required by this section for in vitro fertilization, embryo
25 transfer, artificial insemination, zygote intra fallopian transfer and
26 intracytoplasmic sperm injection, if the required coverage is contrary
27 to the religious employer's bona fide religious tenets. The medical
28 service corporation that issues a contract containing such an exclusion
29 shall provide written notice thereof to each prospective subscriber or
30 subscriber, which shall appear in not less than ten point type, in the
31 contract, application and sales brochure. For the purposes of this
32 subsection, "religious employer" means an employer that is a church,
33 convention or association of churches or any group or entity that is
34 operated, supervised or controlled by or in connection with a church
35 or a convention or association of churches as defined in 26 U.S.C.
36 s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under
37 26 U.S.C. s.501(c)(3).

38 c.³ This section shall apply to those medical service corporation
39 contracts in which the medical service corporation has reserved the
40 right to change the premium.

41
42 3. ³a.³ A health service corporation contract which provides
43 hospital or medical expense benefits for groups with more than 50
44 persons, which includes pregnancy-related benefits, shall not
45 be delivered, issued, executed or renewed in this State, or approved
46 for issuance or renewal in this State by the Commissioner of Banking

1 and Insurance on or after the effective date of this act unless the
2 contract provides coverage for persons covered under the contract for
3 medically necessary expenses incurred in the diagnosis and treatment
4 of infertility as provided pursuant to this section. The health service
5 corporation contract shall provide coverage which includes, but is not
6 limited to, the following services related to infertility: diagnosis and
7 diagnostic tests; medications; surgery; in vitro fertilization; embryo
8 transfer; artificial insemination; gamete intra fallopian transfer; zygote
9 intra fallopian transfer; intracytoplasmic sperm injection; and four
10 completed egg retrievals per lifetime of the covered person. The
11 health service corporation may provide that coverage for in vitro
12 fertilization, gamete intra fallopian transfer and zygote intra fallopian
13 transfer shall be limited to a covered person who: a. has used all
14 reasonable, less expensive and medically appropriate treatments and
15 is still unable to become pregnant or carry a pregnancy; b. has not
16 reached the limit of four completed egg retrievals; and c. is 45 years
17 of age or younger.

18 For purposes of this section, "infertility" means the disease or
19 condition that results in the abnormal function of the reproductive
20 system such that a person is not able to: impregnate another person;
21 conceive after two years of unprotected intercourse if the female
22 partner is under 35 years of age, or one year of unprotected
23 intercourse if the female partner is 35 years of age or older or one of
24 the partners is considered medically sterile; or carry a pregnancy to
25 live birth.

26 The benefits shall be provided to the same extent as for other
27 pregnancy-related procedures under the contract, except that the
28 services provided for in this section shall be performed at facilities that
29 conform to standards established by the American Society for
30 Reproductive Medicine or the American College of Obstetricians and
31 Gynecologists. ²The same copayments, deductibles and benefit limits
32 shall apply to the diagnosis and treatment of infertility pursuant to this
33 section as those applied to other medical or surgical benefits under the
34 contract.²

35 ³b. A religious employer may request, and a health service
36 corporation shall grant, an exclusion under the contract for the
37 coverage required by this section for in vitro fertilization, embryo
38 transfer, artificial insemination, zygote intra fallopian transfer and
39 intracytoplasmic sperm injection, if the required coverage is contrary
40 to the religious employer's bona fide religious tenets. The health
41 service corporation that issues a contract containing such an exclusion
42 shall provide written notice thereof to each prospective subscriber or
43 subscriber, which shall appear in not less than ten point type, in the
44 contract, application and sales brochure. For the purposes of this
45 subsection, "religious employer" means an employer that is a church,
46 convention or association of churches or any group or entity that is

1 operated, supervised or controlled by or in connection with a church
2 or a convention or association of churches as defined in 26 U.S.C.
3 s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under
4 26 U.S.C. s.501(c)(3).

5 c.³ This section shall apply to those health service corporation
6 contracts in which the health service corporation has reserved the right
7 to change the premium.

8
9 4. a.³ A group health insurance policy which provides hospital or
10 medical expense benefits for groups with more than 50 persons, which
11 includes pregnancy-related benefits, shall not be delivered, issued,
12 executed or renewed in this State, or approved for issuance or renewal
13 in this State by the Commissioner of Banking and Insurance on or after
14 the effective date of this act unless the policy provides coverage for
15 persons covered under the policy for medically necessary expenses
16 incurred in the diagnosis and treatment of infertility as provided
17 pursuant to this section. The policy shall provide coverage which
18 includes, but is not limited to, the following services related to
19 infertility: diagnosis and diagnostic tests; medications; surgery; in vitro
20 fertilization; embryo transfer; artificial insemination; gamete intra
21 fallopian transfer; zygote intra fallopian transfer; intracytoplasmic
22 sperm injection; and four completed egg retrievals per lifetime of the
23 covered person. The insurer may provide that coverage for in vitro
24 fertilization, gamete intra fallopian transfer and zygote intra fallopian
25 transfer shall be limited to a covered person who: a. has used all
26 reasonable, less expensive and medically appropriate treatments and
27 is still unable to become pregnant or carry a pregnancy; b. has not
28 reached the limit of four completed egg retrievals; and c. is 45 years
29 of age or younger.

30 For purposes of this section, "infertility" means the disease or
31 condition that results in the abnormal function of the reproductive
32 system such that a person is not able to: impregnate another person;
33 conceive after two years of unprotected intercourse if the female
34 partner is under 35 years of age, or one year of unprotected
35 intercourse if the female partner is 35 years of age or older or one of
36 the partners is considered medically sterile; or carry a pregnancy to
37 live birth.

38 The benefits shall be provided to the same extent as for other
39 pregnancy-related procedures under the policy, except that the
40 services provided for in this section shall be performed at facilities that
41 conform to standards established by the American Society for
42 Reproductive Medicine or the American College of Obstetricians and
43 Gynecologists. ²The same copayments, deductibles and benefit limits
44 shall apply to the diagnosis and treatment of infertility pursuant to this
45 section as those applied to other medical or surgical benefits under the
46 policy.²

1 ³b. A religious employer may request, and an insurer shall grant, an
2 exclusion under the policy for the coverage required by this section for
3 in vitro fertilization, embryo transfer, artificial insemination, zygote
4 intra fallopian transfer and intracytoplasmic sperm injection, if the
5 required coverage is contrary to the religious employer's bona fide
6 religious tenets. The insurer that issues a policy containing such an
7 exclusion shall provide written notice thereof to each prospective
8 insured or insured, which shall appear in not less than ten point type,
9 in the policy, application and sales brochure. For the purposes of this
10 subsection, "religious employer" means an employer that is a church,
11 convention or association of churches or any group or entity that is
12 operated, supervised or controlled by or in connection with a church
13 or a convention or association of churches as defined in 26 U.S.C.
14 s.3121(w)(3)(A), and that qualifies as a tax-exempt organization under
15 26 U.S.C. s.501(c)(3).

16 c.³ This section shall apply to those insurance policies in which the
17 insurer has reserved the right to change the premium.

18

19 5. ³a.³ No certificate of authority to establish and operate a health
20 maintenance organization in this State shall be issued or continued on
21 or after the effective date of this act unless the health maintenance
22 organization provides health care services, to groups of more than 50
23 enrollees, for medically necessary expenses incurred in the diagnosis
24 and treatment of infertility as provided pursuant to this section. A
25 health maintenance organization shall provide enrollee coverage which
26 includes, but is not limited to, the following services related to
27 infertility: diagnosis and diagnostic tests; medications; surgery; in vitro
28 fertilization; embryo transfer; artificial insemination; gamete intra
29 fallopian transfer; zygote intra fallopian transfer; intracytoplasmic
30 sperm injection; and four completed egg retrievals per lifetime of the
31 enrollee. The health maintenance organization may provide that
32 health care services for in vitro fertilization, gamete intra fallopian
33 transfer and zygote intra fallopian transfer shall be limited to a covered
34 person who: a. has used all reasonable, less expensive and medically
35 appropriate treatments and is still unable to become pregnant or carry
36 a pregnancy; b. has not reached the limit of four completed egg
37 retrievals; and c. is 45 years of age or younger.

38 For the purposes of this section, "infertility" means the disease or
39 condition that results in the abnormal function of the reproductive
40 system such that a person is not able to: impregnate another person;
41 conceive after two years of unprotected intercourse if the female
42 partner is under 35 years of age, or one year of unprotected
43 intercourse if the female partner is 35 years of age or older or one of
44 the partners is considered medically sterile; or carry a pregnancy to
45 live birth.

46 The health care services shall be provided to the same extent as for

1 other pregnancy-related procedures under the contract, except that the
2 services provided for in this section shall be performed at facilities that
3 conform to standards established by the American Society for
4 Reproductive Medicine or the American College of Obstetricians and
5 Gynecologists. ²The same copayments, deductibles and benefit limits
6 shall apply to the diagnosis and treatment of infertility pursuant to this
7 section as those applied to other medical or surgical health care
8 services under the contract.²

9 ³b. A religious employer may request, and a health maintenance
10 organization shall grant, an exclusion under the contract for the health
11 care services required by this section for in vitro fertilization, embryo
12 transfer, artificial insemination, zygote intra fallopian transfer and
13 intracytoplasmic sperm injection, if the required health care services
14 are contrary to the religious employer's bona fide religious tenets. The
15 health maintenance organization that issues a contract containing such
16 an exclusion shall provide written notice thereof to each prospective
17 enrollee or enrollee, which shall appear in not less than ten point type,
18 in the contract, application and sales brochure. For the purposes of
19 this subsection, "religious employer" means an employer that is a
20 church, convention or association of churches or any group or entity
21 that is operated, supervised or controlled by or in connection with a
22 church or a convention or association of churches as defined in 26
23 U.S.C. s.3121(w)(3)(A), and that qualifies as a tax-exempt
24 organization under 26 U.S.C. s.501(c)(3).

25 c.³ The provisions of this section shall apply to those contracts for
26 health care services by health maintenance organizations under which
27 the right to change the schedule of charges for enrollee coverage is
28 reserved.

29

30 6. This act shall take effect ¹[on the 30th day] 90 days¹ after
31 enactment ¹and shall apply to policies or contracts issued or renewed
32 on or after the effective date¹.