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In Senate, May 6, 1991

Approved for introduction by a majority of the Legislative Council pursuant to Joint Rule 27. Reference to the Committee on Banking and Insurance suggested and ordered printed.

JOY J. O'BRIEN Secretary of the Senate

Presented by Senator CLARK of Cumberland Cosponsored by Representative MITCHELL of Vassalboro and Representative GARLAND of Bangor.

STATE OF MAINE

IN THE YEAR OF OUR LORD NINETEEN HUNDRED AND NINETY-ONE

An Act Concerning Insurance Coverage for the Diagnosis and Treatment of the Disease of Infertility.

(AFTER DEADLINE)

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2	Be it enacted by the People of the State of Maine as follows:
4	Sec.1. 24 MRSA §2320-B is enacted to read:
-	<u>§2320-B. Coverage for diagnosis and treatment of the disease of</u>
б	infertility
8	1. Definitions. For the purposes of this section, "disease of infertility" means:
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12	A. The inability to conceive a pregnancy after a year or more of regular sexual relations without contraception:
14	B. The inability to carry a pregnancy to a live birth; or
16	C. The presence of a demonstrated condition recognized as a
	cause of the disease of infertility by a licensed medical
18	physician.
20	2. Required coverage. All individual and group nonprofit
	medical services plan contracts and all nonprofit health care
22	plan contracts that provide coverage for gynecological and urological illnesses must provide coverage for diagnosis and
24	treatment of the disease of infertility at the level of
6 T	reimbursement for gynecological and urological illnesses.
26	<u>Coverage for diagnosis and treatment of the disease of</u>
	infertility must include nonexperimental procedures, consistent
28	with established medical practices in the diagnosis and treatment
N'ar	of the disease of infertility, considered necessary by the
30	attending physician.
32	3. Application. This section applies to all policies,
	contracts and certificates executed, delivered and issued for
34	delivery, continued or renewed in this State on or after the
ا يواد والعام	effective date of this section. For the purposes of this
36	section, all policies and contracts are deemed to be renewed no
[.] 38	later than the next yearly anniversary of the policy or contract date.
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40	4. Prior treatment or diagnosis. Diagnosis or treatment of
	the disease of infertility prior to the effective date of this
42	section may not be deemed a preexisting condition or in any way
	restrict or deny a right or benefit to coverage for diagnosis and
44	treatment of infertility under any law, plan or policy.
46	Sec. 2. 24-A MRSA §§2752 and 2837-B are enacted to read:
48	<u>§2752. Coverage for diagnosis and treatment of the disease of infertility</u>
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52	<u>1. Definitions.</u> For the purposes of this section, "disease of infertility" means:

A. The inability to conceive a pregnancy after a year or more of regular sexual relations without contraception;

B. The inability to carry a pregnancy to a live birth; or

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<u>C.</u> The presence of a demonstrated condition recognized as a cause of the disease of infertility by a licensed medical physician.

2. Required coverage. All individual insurance policies that provide coverage for gynecological and urological illnesses must provide coverage for diagnosis and treatment of the disease of infertility at the level of reimbursement for gynecological and urological illnesses. Coverage for diagnosis and treatment of the disease of infertility must include nonexperimental procedures, consistent with established medical practices in the diagnosis and treatment of the disease of infertility, considered necessary by the attending physician.

 3. Application. This section applies to all policies,
22 contracts and certificates executed, delivered and issued for delivery, continued or renewed in this State on or after the
24 effective date of this section. For the purposes of this section, all policies and contracts are deemed to be renewed no
26 later than the next yearly anniversary of the policy or contract date.

4. Prior treatment or diagnosis. Diagnosis or treatment of the disease of infertility prior to the effective date of this section may not be deemed a preexisting condition or in any way restrict or deny a right or benefit to coverage for diagnosis and treatment of the disease of infertility under any law, plan or 34 policy.

36 <u>§2837-B. Coverage for diagnosis and treatment of the disease of</u> <u>infertility</u>

1. Definitions. For the purposes of this section, "disease 40 of infertility" means:

42 <u>A. The inability to conceive a pregnancy after a year or</u> more of regular sexual relations without contraception;

<u>B. The inability to carry a pregnancy to a live birth; or</u>

C. The presence of a demonstrated condition recognized as a cause of the disease of infertility by a licensed medical physician.

2. Required coverage. All group insurance policies that 52 provide coverage for gynecological and urological illnesses must provide coverage for diagnosis and treatment of the disease of infertility at the level of reimbursement for gynecological and urological illnesses. Coverage for diagnosis and treatment of the disease of infertility must include nonexperimental procedures, consistent with established medical practices in the diagnosis and treatment of the disease of infertility, considered necessary by the attending physician.

 3. Application. This section applies to all policies,
10 contracts and certificates executed, delivered and issued for delivery, continued or renewed in this State on or after the
12 effective date of this section. For the purposes of this section, all policies and contracts are deemed to be renewed no
14 later than the next yearly anniversary of the policy or contract date.
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4. Prior treatment or diagnosis. Diagnosis or treatment of the disease of infertility prior to the effective date of this section may not be deemed a preexisting condition or in any way restrict or deny a right or benefit to coverage for diagnosis and treatment of the disease of infertility under any law, plan or policy.

STATEMENT OF FACT

This bill provides that all individual and group insurance policies, all individual and group nonprofit medical services plan contracts and all nonprofit health care plan contracts that provide coverage for gynecological and urological illnesses must provide coverage for the diagnosis and treatment of the disease of infertility. The coverage for the disease of infertility must include procedures consistent with established medical practices considered necessary by the attending physician.

The bill clarifies that insurance policies reflect the fact that diagnosis and treatment for the disease of infertility can not be clearly distinguished from other aspects of gynecological and urological care and redresses past practices in the insurance industry that have resulted in inconsistent and inequitable coverage.

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