California Health Care Coverage Summary: Treatment for Infertility including in vitro fertilization –

Prior to recent guidance SB 729, California law required group health care plans to offer coverage for the treatment of infertility, except In Vitro Fertilization (IVF).

- Fully insured large group health plans, which includes Irvine Unified School District's HMO
 plan, must provide coverage for diagnosis and treatment of infertility and fertility services
 including coverage for IVF.
- Fully insured small group health plans and disability policies must offer coverage for diagnosis and treatment of infertility and fertility services including coverage for IVF.
- SB 729 does <u>not</u> apply to Irvine Unified School District's self-funded PPO plan.

Legislation formally indicates that benefits are required on or after renewal, January 1, 2026, for Large Group (LG), but UnitedHealthcare has designated this as a Benefit Standard effective for policies new or renewing on or after 7/1/2025. For Small Group (SG) it will be available only if purchased.

Key Points for SB 729 law

- Legislation formally indicates that benefits are required plans issued, amended, or renewed on or after January 1, 2026, for Large Group, but UnitedHealthcare has designated this as a Benefit Standard effective for policies new or renewing on or after 7/1/2025. For small groups it will be available for policies new or renewing only if purchased.
- Ends the prior exclusion of IVF from required coverage.
- Requires large group fully insured (HMO) plans to cover the expenses of up to three completed oocyte (egg) retrievals per plan year and unlimited embryo transfers.
- Ends exclusion of LGBTQ+ people in fertility coverage. Prohibits discrimination in coverage for medical and disability plans.
- Insurance contracts may not put extra restrictions (exclusions, limitations, exclusions, deductibles, copays, benefit maximums, waiting periods or other restrictions) on fertility services, treatment, diagnosis, or medications that aren't imposed on other services or prescriptions.
- Can't deny people fertility coverage for fertility services that involve sperm donors, egg donors, or surrogates.
- Can't exclude or deny fertility coverage based on "a covered individual's participation in fertility services provided by or to a third party."

Key Points for UHC approach

- Coverage for IVF aligns with the group's plan year, not calendar year.
- Fertility-related medications (including injectables) remain unchanged and will continue under the Members' current structure (e.g., coinsurance, copay) unless the employer elects to make a change to either their medical or pharmacy drug coverage.
 - a. **HMO** Members will follow the Medical Policy.
 - b. **PPO** Members will follow the Retail Pharmacy Policy.

Questions and Answers

What services are covered under SB 729 for members?

Coverage for diagnosis and treatment of infertility and fertility services. Additionally, members will have access to:

- Invitro fertilization for 3 completed oocyte (egg) retrievals per plan year and unlimited embryo transfers.
- Artificial insemination
- Allows for sperm donors, egg donors, or surrogates.
- Prohibits discrimination in coverage for medical and disability plans based on age, ancestry, color, disability, domestic partner status, gender, gender expression, gender identity, genetic information, marital status, national origin, race, religion, sex, or sexual orientation.
- Removes extra restrictions (for example: exclusions, limitations, exclusions, deductibles, copays, benefit maximums, waiting periods or other restrictions) on fertility services, treatment, diagnosis, or medications that aren't imposed on other services or prescriptions.
- Allows a covered individual's participation in fertility services provided by or to a third party.

Are there dollar limits for IVF retrieval or for treatment or diagnosis?

There are no lifetime limits or dollar limits for retrieval.

However, for IVF there is an annual maximum of three completed oocyte retrievals with unlimited embryo transfers using single embryo transfer when recommended and medically appropriate.

Transfers are in accordance with the American Society for Reproductive Medicine (ASRM).

Under California law what characteristics define infertility as a condition?

- 1) A licensed physician's findings, based on a patient's medical, sexual, and reproductive history, age, physical findings, diagnostic testing, or any combination of those factors.
 - Testing and diagnosis of infertility may occur before the 12-month, or 6-month period to establish infertility.

- 2) A person's inability to reproduce either as an individual or with their partner without medical intervention.
- 3) The failure to establish a pregnancy or to carry a pregnancy to live birth after regular, unprotected sexual intercourse.
 - "Regular, unprotected sexual intercourse" means no more than 12 months of unprotected sexual intercourse for a person under 35 years of age or no more than 6 months of unprotected sexual intercourse for a person 35 years of age or older.
 - Pregnancy resulting in miscarriage does not restart the 12-month or 6-month period to qualify as having infertility.