

1 STATE OF OKLAHOMA

2 2nd Session of the 56th Legislature (2018)

3 SENATE BILL 1468

By: Dossett

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6 AS INTRODUCED

7 An Act relating to health insurance; requiring
8 certain health benefit plans to provide coverage for
9 in vitro fertilization procedures in certain
circumstances; providing exception to applicability
of act; and providing an effective date.

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12 BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

13 SECTION 1. NEW LAW A new section of law to be codified
14 in the Oklahoma Statutes as Section 6060.3b of Title 36, unless
15 there is created a duplication in numbering, reads as follows:

16 A. Any health benefit plan that is offered, issued or renewed
17 in this state on or after January 1, 2018, that provides pregnancy-
18 related benefits for individuals covered under the plan, pursuant to
19 6060.3 of Title 36 of the Oklahoma Statutes, shall provide coverage
20 for services and benefits on an expense incurred, service, or
21 prepaid basis for outpatient expenses that arise from in vitro
22 fertilization procedures. Benefits for in vitro fertilization
23 procedures required under this section must be provided to the same
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1 extent as benefits provided for other pregnancy-related procedures
2 under the plan.

3 B. The coverage offered under subsection A of this section is
4 required only if:

5 1. The patient for the in vitro fertilization procedure is an
6 individual covered under the group health benefit plan;

7 2. The fertilization or attempted fertilization of the
8 patient's oocytes is made only with the sperm of the patient's
9 spouse;

10 3. The patient and the patient's spouse have a history of
11 infertility of at least five (5) continuous years' duration or the
12 infertility is associated with:

- 13 a. endometriosis,
- 14 b. exposure in utero to diethylstilbestrol (DES),
- 15 c. blockage of or surgical removal of one or both
16 fallopian tubes, or
- 17 d. oligospermia;

18 4. The patient has been unable to attain a successful pregnancy
19 through any less costly applicable infertility treatments for which
20 coverage is available under the group health benefit plan; and

21 5. The in vitro fertilization procedures are performed at a
22 medical facility that conforms to the minimal standards for programs
23 of in vitro fertilization adopted by the American Society for
24 Reproductive Medicine.

1 C. An insurer, health maintenance organization or self-insuring
2 employer that is owned by or that is part of an entity, group or
3 order that is directly affiliated with a bona fide religious
4 denomination that includes as an integral part of its beliefs and
5 practices that in vitro fertilization is contrary to moral
6 principles that the religious denomination considers to be an
7 essential part of its beliefs is not required to offer coverage for
8 in vitro fertilization.

9 SECTION 2. This act shall become effective November 1, 2018.

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