



General Assembly

January Session, 2025

Substitute Bill No. 7022



**AN ACT PROMOTING EQUITY IN MEDICAID COVERAGE FOR
FERTILITY HEALTH CARE.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective January 1, 2026*) (a) As used in this section:

2 (1) "Fertility diagnostic care" means procedures, products,
3 medications and services intended to provide information and
4 counseling about an individual's fertility, including, but not limited to,
5 laboratory assessments and imaging studies.

6 (2) "Fertility preservation services" (A) means procedures, products,
7 medications and services intended to preserve fertility, consistent with
8 established medical practice and professional guidelines published by
9 the American Society for Reproductive Medicine, its successor
10 organization or a comparable organization for an individual who has a
11 medical or genetic condition or who is expected to undergo treatment
12 that may directly or indirectly cause a risk of impairment of fertility, and
13 (B) includes, but is not limited to, the procurement and cryopreservation
14 of gametes, embryos and reproductive material and storage from the
15 date of cryopreservation until the individual reaches the age of thirty,
16 or for a period of not less than five years, whichever is later.

17 (3) "Fertility treatment" means procedures, products, genetic testing,
18 medications and services intended to achieve pregnancy that result in a

19 live birth and that are provided in a manner consistent with established
20 medical practice and professional guidelines published by the American
21 Society for Reproductive Medicine, its successor organization or a
22 comparable organization.

23 (4) "Gamete" means a sperm or egg.

24 (5) "Infertility" means (A) the presence of a condition recognized by a
25 licensed physician as a cause of loss or impairment of fertility, based on
26 an individual's medical, sexual and reproductive history, age, physical
27 findings, diagnostic testing or any combination of those factors, (B) an
28 individual's inability to achieve pregnancy after twelve months of
29 unprotected sexual intercourse when the individual and the
30 individual's partner have the necessary gametes to achieve pregnancy,
31 (C) an individual's inability to achieve pregnancy after six months of
32 unprotected sexual intercourse due to the individual's age, (D) an
33 individual's increased risk of transmitting a serious, inheritable genetic
34 or chromosomal abnormality to a child, either through the individual or
35 the individual's partner, or (E) "infertility" as defined by the American
36 Society of Reproductive Medicine, its successor organization or a
37 comparable organization.

38 (b) The Commissioner of Social Services shall amend the Medicaid
39 state plan to provide coverage for fertility diagnostic care, fertility
40 preservation services and fertility treatment. Such coverage shall
41 provide for:

42 (1) Any medically necessary ovulation-enhancing drugs and medical
43 services related to prescribing and monitoring the use of ovulation-
44 enhancing drugs that is intended to treat infertility and achieve a
45 pregnancy that results in a live birth, and

46 (2) At least three cycles of ovulation-enhancing medication treatment.

47 (c) Not later than July 1, 2026, the Commissioner of Social Services
48 shall, after consultation with the Centers for Medicare and Medicaid
49 Services, submit a report to the joint standing committees of the General

50 Assembly having cognizance of matters relating to appropriations and
51 the budgets of state agencies and human services on the costs and
52 benefits of establishing in-vitro fertilization as a covered benefit under
53 the fee-for-service state medical assistance program and any future
54 model of the state medical assistance program involving managed care
55 organizations. The commissioner shall include in the report (1) any
56 potential Medicaid waivers that may be necessary to establish such
57 covered benefit, and (2) the amount of state funds that may be needed
58 to establish such covered benefit. For purposes of this subsection, "state
59 medical assistance program" has the same meaning as "Husky Health"
60 as defined in section 17b-290 of the general statutes.

This act shall take effect as follows and shall amend the following sections:		
Section 1	January 1, 2026	New section

Statement of Legislative Commissioners:

In Subsec.(c), "and the budgets of state agencies" was inserted after "appropriations" for statutory consistency and "means the HUSKY Health program" was changed to "has the same meaning as 'Husky Health'" for accuracy.

HS *Joint Favorable Subst. -LCO*