



General Assembly

February Session, 2026

Raised Bill No. 5483

LCO No. 2361



Referred to Committee on HUMAN SERVICES

Introduced by:
(HS)

AN ACT CONCERNING FERTILITY CARE UNDER THE MEDICAID PROGRAM.

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

1 Section 1. (NEW) (*Effective January 1, 2027*) (a) As used in this section:

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

6 (2) "Infertility" means (A) the inability to establish or carry a
7 pregnancy based on an individual's medical, sexual and reproductive
8 history, age, physical findings, diagnostic testing or any combination of
9 those factors, including, but not limited to, infertility arising from
10 disabilities or from medical treatments or conditions associated with a
11 disability, (B) the need for medical intervention to establish a pregnancy
12 either as an individual or with a partner, (C) an individual's inability to
13 establish a pregnancy or carry a pregnancy to live birth after twelve
14 months of unprotected sexual intercourse when the individual and the
15 individual's partner have the necessary gametes to establish a

16 pregnancy, provided a pregnancy loss shall not restart the twelve-
17 month period, and (D) an individual's inability to establish a pregnancy
18 or to carry a pregnancy to live birth after six months of unprotected
19 sexual intercourse due to the individual's age when the individual and
20 the individual's partner have the necessary gametes to establish a
21 pregnancy, provided a pregnancy loss shall not restart the six-month
22 period;

23 (3) "Intrauterine insemination" means a procedure that places sperm
24 directly into an individual's uterus at the time of ovulation to increase
25 the chances of fertilization;

26 (4) "In-vitro fertilization" or "IVF" means a medical procedure where
27 an egg is fertilized by sperm in a laboratory setting; and

28 (5) "Standard fertility preservation services" means counseling,
29 products, medications, procedures, genetic testing and services
30 intended to preserve fertility, consistent with established medical
31 practice and professional guidelines published by the American Society
32 for Reproductive Medicine or the American Society for Clinical
33 Oncology, for an individual who (A) has a medical or genetic condition,
34 including, but not limited to, conditions related to disability or chronic
35 illness, or (B) is expected to receive medical treatment that has a side
36 effect or possible side effect of a risk to an individual's fertility and
37 includes, but is not limited to, expenses related to evaluation, laboratory
38 assessments, medications and treatment, as well as the procurement and
39 cryopreservation of gametes, embryos and reproductive material and
40 storage.

41 (b) Beginning on January 1, 2027, the Commissioner of Social Services
42 shall provide Medicaid coverage, to the extent permissible under federal
43 law, for:

44 (1) Fertility diagnostic care;

45 (2) Standard fertility preservation services, including, but not limited

46 to, storage of gametes from the time of cryopreservation, provided that
47 coverage for such storage shall extend until the individual reaches the
48 age of thirty, or for a period of five years, whichever is later, provided
49 the commissioner may extend the period of time; and

50 (3) Treatment of infertility, including, but not limited to, (A) any
51 medically necessary ovulation-enhancing medications and medical
52 services related to prescribing and monitoring the use of the ovulation-
53 enhancing medications for at least three cycles of ovulation-enhancing
54 medication treatment, and (B) at least six cycles of intrauterine
55 insemination.

56 (c) In implementing the coverage required in this section, the
57 Commissioner of Social Services shall not:

58 (1) Impose a waiting period;

59 (2) Use any prior diagnosis, an individual's disability or prior fertility
60 treatment as a basis for excluding, limiting or otherwise restricting the
61 availability of coverage required under this section;

62 (3) Impose any limitations on coverage for any fertility services based
63 on an individual's use of donor gametes; and

64 (4) Impose different limitations on coverage for, provide different
65 benefits to or impose different requirements on a class of persons on
66 account of their age, ancestry, color, disability, ethnicity, gender
67 identity, genetic information, marital status, national origin, race,
68 religion, sex or sexual orientation.

69 (d) The Commissioner of Social Services shall consult with the
70 Centers for Medicare and Medicaid Services on whether in-vitro
71 fertilization is a medically reasonable and necessary procedure as
72 required for Medicaid coverage under federal law. Not later than July 1,
73 2027, the commissioner shall submit a report, in accordance with the
74 provisions of section 11-4a of the general statutes, to the joint standing

75 committee of the General Assembly having cognizance of matters
76 relating to human services on (1) possible methods for covering IVF as
77 a Medicaid-covered benefit (A) for both fee-for-service and managed
78 care organizations, and (B) under any applicable Medicaid waiver
79 programs, and (2) the amount of money that would need to be allocated
80 in federal and state funds for such coverage.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>January 1, 2027</i>	New section

Statement of Purpose:

To provide Medicaid coverage consistent with federal law for fertility care.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]