

**Second Regular Session
Seventy-second General Assembly
STATE OF COLORADO**

PREAMENDED

*This Unofficial Version Includes Committee
Amendments Not Yet Adopted on Second Reading*

LLS NO. 20-0293.01 Christy Chase x2008

HOUSE BILL 20-1158

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A BILL FOR AN ACT

101 **CONCERNING INSURANCE COVERAGE FOR INFERTILITY, AND, IN**
102 **CONNECTION THEREWITH, MAKING AN APPROPRIATION.**

Bill Summary

(Note: This summary applies to this bill as introduced and does not reflect any amendments that may be subsequently adopted. If this bill passes third reading in the house of introduction, a bill summary that applies to the reengrossed version of this bill will be available at <http://leg.colorado.gov>.)

The bill enacts the "Colorado Building Families Act", which requires health benefit plans issued or renewed in Colorado on or after January 1, 2022, to cover diagnosis of infertility, treatment for infertility, and fertility preservation services. The coverage for fertility medications must not impose any limits that are not applicable to coverage under the plan for other prescription medications, and the plan cannot impose

Shading denotes HOUSE amendment. Double underlining denotes SENATE amendment.
Capital letters or bold & italic numbers indicate new material to be added to existing statute.
Dashes through the words indicate deletions from existing statute.

HOUSE
3rd Reading Unamended
February 19, 2020

HOUSE
Amended 2nd Reading
February 18, 2020

deductibles, copayments, coinsurance, benefit maximums, waiting periods, or other limitations that are not applicable to other medical services covered under the plan.

1 *Be it enacted by the General Assembly of the State of Colorado:*

2 **SECTION 1. Short title.** The short title of this act is the
3 "Colorado Building Families Act".

4 **SECTION 2.** In Colorado Revised Statutes, 10-16-104, **add** (23)
5 as follows:

6 **10-16-104. Mandatory coverage provisions - definitions -**
7 **rules. (23) Infertility diagnosis and treatment - fertility preservation**
8 **services. (a) EXCEPT AS PROVIDED IN SUBSECTION (23)(e) OF THIS**
9 **SECTION, ALL INDIVIDUAL AND GROUP HEALTH BENEFIT PLANS ISSUED OR**
10 **RENEWED IN THIS STATE SHALL PROVIDE COVERAGE FOR THE DIAGNOSIS**
11 **OF AND TREATMENT FOR INFERTILITY AND STANDARD FERTILITY**
12 **PRESERVATION SERVICES.**

13 (b) THE COVERAGE REQUIRED BY THIS SUBSECTION (23) INCLUDES
14 THREE COMPLETED OOCYTE RETRIEVALS WITH UNLIMITED EMBRYO
15 TRANSFERS IN ACCORDANCE WITH THE GUIDELINES OF THE ASRM, USING
16 SINGLE EMBRYO TRANSFER WHEN RECOMMENDED AND MEDICALLY
17 APPROPRIATE.

18 (c) THE HEALTH BENEFIT PLAN SHALL NOT IMPOSE:

19 (I) ANY EXCLUSIONS, LIMITATIONS, OR OTHER RESTRICTIONS ON
20 COVERAGE OF FERTILITY MEDICATIONS THAT ARE DIFFERENT FROM THE
21 EXCLUSIONS, LIMITATIONS, OR OTHER RESTRICTIONS IMPOSED ON ANY
22 OTHER PRESCRIPTION MEDICATIONS COVERED UNDER THE HEALTH BENEFIT
23 PLAN; OR

24 (II) DEDUCTIBLES, COPAYMENTS, COINSURANCE, BENEFIT

1 MAXIMUMS, WAITING PERIODS, OR OTHER LIMITATIONS ON COVERAGE FOR
2 THE DIAGNOSIS OF AND TREATMENT FOR INFERTILITY AND STANDARD
3 FERTILITY PRESERVATION SERVICES, EXCEPT AS OTHERWISE SPECIFIED IN
4 THIS SUBSECTION (23), THAT ARE DIFFERENT FROM DEDUCTIBLES,
5 COPAYMENTS, COINSURANCE, BENEFIT MAXIMUMS, WAITING PERIODS, OR
6 OTHER LIMITATIONS IMPOSED ON BENEFITS FOR SERVICES COVERED UNDER
7 THE HEALTH BENEFIT PLAN THAT ARE NOT RELATED TO INFERTILITY.

8 (d) THE COMMISSIONER SHALL ADOPT RULES CONSISTENT WITH
9 AND AS ARE NECESSARY TO IMPLEMENT THIS SUBSECTION (23).

10 (e) A RELIGIOUS EMPLOYER MAY REQUEST AND A CARRIER
11 SUBJECT TO THIS SUBSECTION (23) SHALL GRANT AN EXCLUSION FROM THE
12 COVERAGE REQUIRED UNDER THIS SUBSECTION (23) IN A HEALTH BENEFIT
13 PLAN IF THE REQUIRED COVERAGE CONFLICTS WITH THE RELIGIOUS
14 ORGANIZATION'S BONA FIDE RELIGIOUS BELIEFS AND PRACTICES. A
15 RELIGIOUS EMPLOYER THAT OBTAINS AN EXCLUSION UNDER THIS
16 SUBSECTION (23)(e) SHALL PROVIDE ITS EMPLOYEES REASONABLE AND
17 TIMELY NOTICE OF THE EXCLUSION OF THE COVERAGE DESCRIBED IN THIS
18 SUBSECTION (23) FROM THE HEALTH BENEFIT PLAN THE RELIGIOUS
19 EMPLOYER OFFERS TO ITS EMPLOYEES.

20 (f) FOR PURPOSES OF THIS SUBSECTION (23):

21 (I) "ACOG" MEANS THE AMERICAN COLLEGE OF OBSTETRICIANS
22 AND GYNECOLOGISTS OR ITS SUCCESSOR ORGANIZATION.

23 (II) "ASCO" MEANS THE AMERICAN SOCIETY OF CLINICAL
24 ONCOLOGY OR ITS SUCCESSOR ORGANIZATION.

25 (III) "ASRM" MEANS THE AMERICAN SOCIETY FOR
26 REPRODUCTIVE MEDICINE OR ITS SUCCESSOR ORGANIZATION.

27 (IV) "DIAGNOSIS OF AND TREATMENT FOR INFERTILITY" MEANS

1 THE PROCEDURES AND MEDICATIONS RECOMMENDED BY A LICENSED
2 PHYSICIAN THAT ARE CONSISTENT WITH ESTABLISHED, PUBLISHED, OR
3 APPROVED MEDICAL PRACTICES OR PROFESSIONAL GUIDELINES FROM
4 ACOG OR ASRM FOR DIAGNOSING AND TREATING INFERTILITY.

5 (V) "FAILURE TO IMPREGNATE OR CONCEIVE" MEANS THE FAILURE
6 TO ESTABLISH A CLINICAL PREGNANCY AFTER TWELVE MONTHS OF
7 REGULAR, UNPROTECTED SEXUAL INTERCOURSE OR THERAPEUTIC DONOR
8 INSEMINATION FOR A WOMAN UNDER THE AGE OF THIRTY-FIVE, OR AFTER
9 SIX MONTHS OF REGULAR, UNPROTECTED SEXUAL INTERCOURSE OR
10 THERAPEUTIC DONOR INSEMINATION FOR A WOMAN THIRTY-FIVE YEARS OF
11 AGE OR OLDER. CONCEPTION RESULTING IN A MISCARRIAGE DOES NOT
12 RESTART THE TWELVE-MONTH OR SIX-MONTH CLOCK TO QUALIFY AS
13 HAVING INFERTILITY.

14 (VI) "INFERTILITY" MEANS A DISEASE OR CONDITION
15 CHARACTERIZED BY:

16 (A) THE FAILURE TO IMPREGNATE OR CONCEIVE;

17 (B) A PERSON'S INABILITY TO REPRODUCE EITHER AS AN
18 INDIVIDUAL OR WITH THE PERSON'S PARTNER; OR

19 (C) A LICENSED PHYSICIAN'S FINDINGS BASED ON A PATIENT'S
20 MEDICAL, SEXUAL, AND REPRODUCTIVE HISTORY, AGE, PHYSICAL
21 FINDINGS, OR DIAGNOSTIC TESTING.

22 (VII) "LICENSED PHYSICIAN" MEANS A PERSON LICENSED BY THE
23 COLORADO MEDICAL BOARD PURSUANT TO ARTICLE 240 OF TITLE 12 TO
24 PRACTICE MEDICINE IN THIS STATE.

25 (VIII) "STANDARD FERTILITY PRESERVATION SERVICES" MEANS
26 PROCEDURES AND SERVICES THAT ARE CONSISTENT WITH ESTABLISHED
27 MEDICAL PRACTICES OR PROFESSIONAL GUIDELINES PUBLISHED BY ASRM

1 OR ASCO FOR A PERSON WHO HAS A MEDICAL CONDITION OR IS EXPECTED
2 TO UNDERGO MEDICATION THERAPY, SURGERY, RADIATION,
3 CHEMOTHERAPY, OR OTHER MEDICAL TREATMENT THAT IS RECOGNIZED BY
4 MEDICAL PROFESSIONALS TO CAUSE A RISK OF IMPAIRMENT TO FERTILITY.

5 **SECTION 3. Appropriation.** For the 2020-21 state fiscal year,
6 \$3,337 is appropriated to the department of regulatory agencies for use by
7 the division of insurance. This appropriation is from the division of
8 insurance cash fund created in section 10-1-103 (3), C.R.S., and is based
9 on an assumption that the division will require an additional 0.1 FTE. To
10 implement this act, the division may use this appropriation for personal
11 services.

12 **SECTION 4. Act subject to petition - effective date -**
13 **applicability.** (1) This act takes effect at 12:01 a.m. on the day following
14 the expiration of the ninety-day period after final adjournment of the
15 general assembly (August 5, 2020, if adjournment sine die is on May 6,
16 2020); except that, if a referendum petition is filed pursuant to section 1
17 (3) of article V of the state constitution against this act or an item, section,
18 or part of this act within such period, then the act, item, section, or part
19 will not take effect unless approved by the people at the general election
20 to be held in November 2020 and, in such case, will take effect on the
21 date of the official declaration of the vote thereon by the governor.

22 (2) This act applies to health benefit plans issued or renewed on
23 or after January 1, 2022.