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HOUSE BILL NO. 1609

AMENDMENT IN THE NATURE OF A SUBSTITUTE
(Proposed by the House Committee on Labor and Commerce
on January 16, 2025)

(Patron Prior to Substitute—Delegate Helmer)

A *BILL to direct the Health Insurance Reform Commission to consider coverage for infertility treatment in its 2025 essential health benefits benchmark plan review.*

Be it enacted by the General Assembly of Virginia:

1. § 1. *That notwithstanding subsection D of § 30-343.1 of the Code of Virginia, the Health Insurance Reform Commission (the Commission) shall consider in its 2025 review of the essential health benefits benchmark plan, conducted pursuant to § 30-343.1 of the Code of Virginia, coverage for (i) diagnosis and treatment of infertility, (ii) standard fertility preservation procedures, and (iii) embryo transfer of an embryo that was created as a result of another individual's treatment for infertility and donated to a covered individual. Diagnosis and treatment of infertility shall include the recommended procedures and medications at the direction of a licensed physician that are consistent with established, published, or approved medical practices or professional guidelines published by the American College of Obstetricians and Gynecologists or the American Society for Reproductive Medicine. Standard fertility preservation procedures shall include procedures to preserve fertility that are consistent with established medical practices and professional guidelines published by the American Society for Reproductive Medicine or the American Society of Clinical Oncology for a person who has a medical condition or is expected to undergo medication therapy, surgery, radiation, chemotherapy, or other medical treatment that is recognized by medical professionals to cause a risk of impairment to fertility. As used in this act, "embryo transfer" has the same meaning as provided in § 20-156 of the Code of Virginia.*

The Commission shall include such coverage in its recommendation to the General Assembly for a new essential health benefits benchmark plan unless the Commission identifies a compelling reason to exclude such coverage.

HOUSE SUBSTITUTE

HB 1609H1