

Department of Legislative Services
Maryland General Assembly
2008 Session

FISCAL AND POLICY NOTE

House Bill 701 (Delegate Kaiser, *et al.*)
Health and Government Operations

Health Insurance - Coverage for In Vitro Fertilization - Miscarriage

This bill requires insurers, nonprofit health service plans, and HMOs (carriers) that provide hospital, medical, or surgical benefits under policies or contracts issued in the State, in determining a patient's eligibility for in vitro fertilization, to calculate the duration of the patient's history of infertility without regard to any pregnancy that terminates in a miscarriage.

Fiscal Summary

State Effect: To the extent the bill allows individuals covered under the State Employee and Retiree Health and Welfare Benefits Program (State plan) to access IVF services within a shorter timeframe, State plan expenditures could be incurred sooner than under current law. No effect on revenues.

Local Effect: Any impact on local government expenditures is assumed to be minimal.

Small Business Effect: Minimal to none.

Analysis

Current Law: Carriers that provide pregnancy-related services may not exclude benefits for all outpatient expenses arising from IVF procedures performed on the policyholder or subscriber or their dependent spouse. Benefits must be provided to the same extent as other pregnancy-related procedures for insurers and nonprofit health service plans and other infertility services for HMOs.

To qualify for IVF benefits: • the patient must be the policyholder or subscriber or their dependent spouse; • the patient's eggs must be fertilized with their spouse's sperm; • the patient and the patient's spouse must have a history of infertility of at least two years duration or infertility associated with endometriosis, DES exposure, blockage or removal of one or more fallopian tubes, or abnormal male factors; • the patient must have been unable to attain a successful pregnancy through a less costly infertility treatment available under the policy or contract; and • the IVF procedures must be performed at specified medical facilities.

IVF benefits may be limited to three IVF attempts per live birth, not to exceed a maximum lifetime benefit of \$100,000.

Background: According to the American Society for Reproductive Medicine, infertility is defined as an inability to conceive within 12 months. About 6.1 million couples nationally (10% of couples of childbearing age) experience infertility. Miscarriage is the loss of a pregnancy within the first 20 weeks and may happen in as many as 25% of all pregnancies.

As calculation of infertility is based on successful conception, the two-year infertility period required for IVF benefits could be extended beyond two years in the event that a patient successfully conceived a pregnancy that ended in miscarriage. The bill would shorten the time period required to reach the two-year qualification requirement for some couples and potentially allow access to IVF procedures within a shorter timeframe than under current law.

State Expenditures: To the extent the bill allows individuals covered under the State plan to access IVF services within a shorter timeframe, eventual State plan expenditures could be incurred sooner than they would be under current law. As it is unknown how many individuals would gain access to IVF benefits within a shorter timeframe, any fiscal impact cannot be reliably estimated at this time. In fiscal 2007, the State plan provided coverage for 148 IVF procedures at a cost of \$15,000 to \$20,000 per procedure.

State plan expenditures are split 60% general funds, 20% federal funds, and 20% special funds; also 20% of expenditures are reimbursable funds from employee contributions.

Additional Information

Prior Introductions: None.

Cross File: None.

Information Source(s): American Society for Reproductive Medicine, Department of Health and Mental Hygiene, Maryland Insurance Administration, Department of Budget and Management, Department of Legislative Services

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