

1 **SECTION 1.(c)** Coverage of in vitro fertilizations as described in
2 G.S. 135-40.6A(a)(10), as enacted by this act, shall be provided by optional programs
3 offered by the Plan under G.S. 135-39.5B.

4 **SECTION 2.** Article 51 of Chapter 58 of the General Statutes is amended by
5 adding the following new section to read:

6 **"§ 58-51-63. Coverage for infertility treatment.**

7 (a) Notwithstanding any other provision of law to the contrary, every policy or
8 contract of accident and health insurance, and every preferred provider benefit plan
9 under G.S. 58-50-60 that is issued, renewed, or amended on or after January 1, 2008,
10 that provides maternity benefits shall provide coverage for the diagnosis and treatment
11 of infertility. The same deductibles, coinsurance, and other limitations as apply to
12 similar services covered under the policy, contract, or plan shall apply to coverage for
13 infertility treatment.

14 (b) As used in this section, 'infertility treatment' means infertility studies, in vitro
15 fertilizations, ovum implant placements or transfers, gamete and zygote intrafallopian
16 transfers, intracytoplasmic sperm injections, varicocele ligations, and vasovasostomies
17 and sperm aspirations performed in medically supervised facilities when recommended
18 by an attending physician."

19 **SECTION 3.** Article 65 of Chapter 58 of the General Statutes is amended by
20 adding the following new section to read:

21 **"§ 58-65-97. Coverage for infertility treatment.**

22 (a) Notwithstanding any other provision of law to the contrary, every insurance
23 certificate or subscriber contract under any hospital service plan or medical service plan
24 governed by this Article and Article 66 of this Chapter, and every preferred provider
25 benefit plan under G.S. 58-50-56 that is issued, renewed, or amended on or after
26 January 1, 2008, that provides maternity benefits shall provide coverage for the
27 diagnosis and treatment of infertility. The same deductibles, coinsurance, and other
28 limitations as apply to similar services covered under the certificate, contract, or plan
29 shall apply to coverage for infertility treatment.

30 (b) As used in this section, 'infertility treatment' means infertility studies, in vitro
31 fertilizations, ovum implant placements or transfers, gamete and zygote intrafallopian
32 transfers, intracytoplasmic sperm injections, varicocele ligations, and vasovasostomies
33 and sperm aspirations performed in medically supervised facilities when recommended
34 by an attending physician."

35 **SECTION 4.** Article 67 of Chapter 58 of the General Statutes is amended by
36 adding the following new section to read:

37 **"§ 58-67-81. Coverage for infertility treatment.**

38 (a) Notwithstanding any other provision of law to the contrary, every health care
39 plan written by a health maintenance organization and in force, issued, renewed, or
40 amended on or after January 1, 2008, that is subject to this Article and that provides
41 maternity benefits shall provide coverage for the diagnosis and treatment of infertility.
42 The same deductibles, coinsurance, and other limitations as apply to similar services
43 covered under the plan shall apply to coverage for infertility treatment.

1 (b) As used in this section, 'infertility treatment' means infertility studies, in vitro
2 fertilizations, ovum implant placements or transfers, gamete and zygote intrafallopian
3 transfers, intracytoplasmic sperm injections, varicocele ligations, and vasovasostomies
4 and sperm aspirations performed in medically supervised facilities when recommended
5 by an attending physician."

6 **SECTION 5.** Effective January 1, 2008, G.S. 58-50-155 reads as rewritten:

7 "**§ 58-50-155. Standard and basic health care plan coverages.**

8 (a) Notwithstanding G.S. 58-50-125(c), and any other provision of law to the
9 contrary, the standard health plan developed and approved under G.S. 58-50-125 shall
10 provide coverage for all of the following:

- 11 (1) Mammograms and examinations and laboratory tests for the screening
12 for the early detection of cervical cancer at least equal to the coverage
13 required by G.S. 58-51-57.
- 14 (2) Prostate-specific antigen (PSA) tests or equivalent tests for the
15 presence of prostate cancer at least equal to the coverage required by
16 G.S. 58-51-58.
- 17 (3) Reconstructive breast surgery resulting from a mastectomy at least
18 equal to the coverage required by G.S. 58-51-62.
- 19 (4) For a qualified individual, scientifically proven bone mass
20 measurement for the diagnosis and evaluation of osteoporosis or low
21 bone mass at least equal to the coverage required by G.S. 58-3-174.
- 22 (5) Prescribed contraceptive drugs or devices that prevent pregnancy and
23 that are approved by the United States Food and Drug Administration
24 for use as contraceptives, or outpatient contraceptive services at least
25 equal to the coverage required by G.S. 58-3-178, if the plan covers
26 prescription drugs or devices, or outpatient services, as applicable. The
27 same exceptions and exclusions as are provided under G.S. 58-3-178
28 apply to standard plans developed and approved under G.S. 58-50-125.
- 29 (6) Colorectal cancer examinations and laboratory tests at least equal to
30 the coverage required by G.S. 58-3-179.
- 31 (7) Surveillance tests at least equal to coverage required by G.S. 58-3-266.
- 32 (8) Infertility treatment at least equal to the coverage required by
33 G.S. 58-51-63.

34 (a1), (a2) Repealed by Session Laws 1999-197, s. 2.

35 (b) Notwithstanding G.S. 58-50-125(c), in developing and approving the plans
36 under G.S. 58-50-125, the Committee and Commissioner shall give due consideration to
37 cost-effective and life-saving health care services and to cost-effective health care
38 providers."

39 **SECTION 6.** Nothing in this act shall apply to specific accident, specified
40 disease, hospital indemnity, or long-term care health insurance policies.

41 **SECTION 7.** This act is effective when it becomes law.