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1		AN ACT relating to coverage for medical services.
2	Be it	enacted by the General Assembly of the Commonwealth of Kentucky:
3		→ SECTION 1. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER 304
4	IS C	REATED TO READ AS FOLLOWS:
5	<u>(1)</u>	As used in this section:
6		(a) "Iatrogenic infertility" means an impairment of fertility caused by surgery,
7		radiation, chemotherapy, or any other medical treatment affecting
8		reproductive organs or processes;
9		(b) "May directly or indirectly cause" means the treatment has a likely side
10		effect of infertility as established by the American Society for Reproductive
11		Medicine, the American Society of Clinical Oncology, or other reputable
12		professional medical organizations;
13		(c) "Religious organization" includes but is not limited to a religious group,
14		corporation, association, school or educational institution, ministry, order,
15		society, or similar entity, regardless of whether it is integrated or affiliated
16		with a church or other house of worship; and
17		(d) "Standard fertility preservation services" means procedures to preserve
18		fertility that are consistent with established medical practices and
19		professional guidelines published by the American Society for Reproductive
20		Medicine, the American Society of Clinical Oncology, or other reputable
21		professional medical organizations.
22	<u>(2)</u>	Except as provided in subsection (5) of this section, all health benefit plans shall
23		provide coverage for standard fertility preservation services when a medically
24		necessary medical treatment may directly or indirectly cause iatrogenic infertility
25		to an insured.
26	<u>(3)</u>	The coverage required by subsection (2) of this section:
27		(a) Shall include:

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1	1. Evaluation expenses;
2	2. Laboratory assessments; and
3	3. Medications and treatment associated with oocyte and sperm
4	cryopreservation procedures, including obtaining, freezing, and
5	storing gametes for up to one (1) year; and
6	(b) May:
7	1. Exclude costs associated with storage of oocytes or sperm after one (1)
8	<u>year;</u>
9	2. Include age restrictions in accordance with the guidelines set forth by
10	the American Society for Reproductive Medicine or the American
11	Society of Clinical Oncology;
12	3. Include a lifetime limit of one (1) oocyte or sperm cryopreservation
13	procedure per eligible insured; and
14	4. Be limited to nonexperimental procedures, as defined by the American
15	Society for Reproductive Medicine or the American Society of Clinical
16	Oncology.
17	(4) Procedures covered by this section shall:
18	(a) Be performed at a health facility licensed or certified in Kentucky or
19	another state; and
20	(b) Conform to the guidelines of the American Society for Reproductive
21	Medicine or the American Society of Clinical Oncology.
22	(5) This section shall not apply to an employer-sponsored health benefit plan if the
23	employer is a religious organization.
24	→SECTION 2. A NEW SECTION OF SUBTITLE 17A OF KRS CHAPTER 304
25	IS CREATED TO READ AS FOLLOWS:
26	(1) All insurers issuing or renewing a health insurance policy or plan, including but
27	not limited to a health benefit plan, that provides medical or surgical benefits

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1	with respect to orchiectomy or orchidectomy as treatment for testicular or other
2	urological cancer shall provide coverage, in a manner determined in consultation
3	with the attending physician and the covered person and subject to applicable
4	cost sharing that is consistent with the cost sharing that is established for other
5	benefits under the coverage, for the following:
6	(a) All stages of surgical reconstruction related to the orchiectomy or
7	orchidectomy, including testicular or other urological prostheses; and
8	(b) Physical complications of all stages of orchiectomy or orchidectomy,
9	including any related surgical reconstruction.
10	(2) The policy or plan shall provide written notice to a covered person of the
11	availability of medical and surgical benefits with respect to an orchiectomy or
12	orchidectomy upon enrollment and annually thereafter.
13	→SECTION 3. A NEW SECTION OF SUBTITLE 17C OF KRS CHAPTER 304
14	IS CREATED TO READ AS FOLLOWS:
15	Section 2 of this Act shall apply to limited health service benefit plans, including any
16	limited health service contract, as defined in KRS 304.38A-010.
17	→SECTION 4. A NEW SECTION OF SUBTITLE 38A OF KRS CHAPTER 304
18	IS CREATED TO READ AS FOLLOWS:
19	Limited health service organizations shall comply with Section 2 of this Act.
20	→ Section 5. This Act applies to policies or plans issued or renewed on or after
21	January 1, 2023.
22	→ Section 6. This Act takes effect January 1, 2023.