

SUBJECT: Requiring certain health benefit plans to cover fertility preservation

COMMITTEE: Insurance — favorable, without amendment

VOTE: 6 ayes — Oliverson, A. Johnson, Cortez, Caroline Harris, Julie Johnson, Paul

1 nay — Cain

2 absent — Hull, Perez

WITNESSES: For — Amanda Rice, The Chick Mission; Karen Albritton; Haleigh Curlee; Tom Whiteside (*Registered, but did not testify*: David Lofye, Alliance for Fertility Preservation; James Gray, American Cancer Society Cancer Action Network; Lindsay Lanagan, Legacy Community Health; Georgia Bates, Leukemia & Lymphoma Society; Maureen Milligan, Teaching Hospitals of Texas; Joe Pojman Ph.D., Texas Alliance for Life; Danielle Lobsinger Bush, Texas Healthcare and Bioscience Institute; Elisabeth Potter, Ben Wright, Texas Medical Association; Kyle Mauro, Texas Society of Clinical Oncology; Ware Wendell, Texas Watch; Randy Cubriel; Alyse Meyer; Jason Ryan)

Against — (*Registered, but did not testify*: Annie Spilman, NFIB; Matt Abel, Texas Association of Business; Blake Hutson, Texas Association of Health Plans)

On — Terri Woodard, M.D., The University of Texas MD Anderson Cancer Center

BACKGROUND: Concerns have been raised that certain cancer patients, whose treatment can affect fertility, may be unable to access fertility preservation treatments.

DIGEST: HB 1649 would require certain health benefit plans to provide coverage for fertility preservation services to a covered person who would receive a medically necessary treatment, including surgery, chemotherapy, and

radiation, that the American Society of Clinical Oncology or the American Society for Reproductive Medicine had established could directly or indirectly cause impaired fertility. The fertility preservation services would have to be standard procedures to preserve fertility consistent with established medical practices or certain professional guidelines.

The bill would apply only to a health benefit plan issued by an insurance company, a group hospital service corporation, a health maintenance organization, and certain other entities. The bill would not apply to Medicaid or the Child's Health Insurance Program. The bill also would not apply to a health benefit plan that provided coverage for wages or payment in lieu of wages for a period during which an employee was absent from work because of sickness or injury or provided coverage only for hospital expenses.

The bill would take effect September 1, 2023, and would apply only to a health benefit plan delivered, issued for delivery, or renewed on or after January 1, 2024.