

House Bill 589

By: Representatives Drenner of the 85th, Cannon of the 58th, Au of the 50th, and Park of the 107th

A BILL TO BE ENTITLED
AN ACT

1 To amend Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated,
2 relating to medical assistance generally, so as to provide coverage for fertility diagnostic
3 care, fertility treatment, and for fertility preservation services; to provide for amending the
4 Georgia Medicaid plan; to provide for a plan amendment or waiver when necessary; to
5 provide for definitions; to provide for related matters; to provide for an effective date and
6 applicability; to repeal conflicting laws; and for other purposes.

7 BE IT ENACTED BY THE GENERAL ASSEMBLY OF GEORGIA:

8 **SECTION 1.**

9 Article 7 of Chapter 4 of Title 49 of the Official Code of Georgia Annotated, relating to
10 medical assistance generally, is amended by adding a new Code section to read as follows:

11 "49-4-159.5.

12 (a) As used in this Code section, the term:

13 (1) 'American Society for Reproductive Medicine' means the American Society for
14 Reproductive Medicine or its successor organization.

15 (2) 'Covered person' means an individual covered under a health benefit policy.

16 (3) 'Experimental fertility procedure' means a procedure for which the published medical
17 evidence is not sufficient for the American Society for Reproductive Medicine or a
18 comparable organization to regard such procedure as an established medical practice.

19 (4) 'Fertility diagnostic care' means procedures, products, medications, genetic testing,
20 counseling, and services, including laboratory assessments and imaging studies, intended
21 to provide information and counseling about an individual's fertility.

22 (5) 'Fertility patient' means:

23 (A) An individual or couple with infertility;

24 (B) An individual unable to conceive as an individual or with a partner because the
25 individual or couple does not have the necessary gametes for conception; or

26 (C) A couple who is at increased risk of passing a serious inheritable genetic or
27 chromosomal abnormality to a child.

28 (6) 'Fertility preservation services' means procedures, products, medications, genetic
29 testing, counseling, and services intended to preserve fertility and that are provided in a
30 manner consistent with established medical practice and professional guidelines as
31 published by the American Society for Reproductive Medicine or a comparable
32 organization for an individual who has a medical condition or who is expected to receive
33 medical treatment that may cause or has the potential to cause a risk of impairment of
34 fertility. Such term includes, but is not limited to, evaluation expenses, laboratory
35 assessments, medications, and treatment associated with fertility preservation services,
36 as well as the procurement and cryopreservation of gametes, embryos, and reproductive
37 material and storage from the time of cryopreservation for a period of three years;
38 provided, however, that storage may be offered for a longer period of time.

39 (7) 'Fertility treatment' means procedures, products, medications, genetic testing,
40 counseling, and services intended to achieve pregnancy that results in a live birth with
41 healthy outcomes and that are provided in a manner consistent with established medical

42 practice and professional guidelines as published by the American Society for
43 Reproductive Medicine or a comparable organization.

44 (8) 'Gamete' means sperm or eggs.

45 (9) 'Infertility' means:

46 (A) The inability to establish pregnancy or to carry a pregnancy to live birth after 12
47 months of regular, unprotected sexual intercourse when the couple has the necessary
48 gametes for conception, or after a period of less than 12 months due to a person's age
49 or other factors when the couple has the necessary gametes for conception. Pregnancy
50 resulting in a loss shall not cause the time period of trying to achieve a pregnancy to be
51 restarted; or

52 (B) The presence of a condition recognized by a licensed physician that impacts an
53 individual's ability to establish pregnancy or to carry a pregnancy based on a patient's
54 medical, sexual, and reproductive history, as well as age, physical findings, or
55 diagnostic testing, or any combination of those factors.

56 (10) 'Intrauterine insemination' means a procedure that places sperm directly into a
57 person's uterus at the time of ovulation to increase the chances of fertilization.

58 (b) Beginning January 1, 2026, the Department of Community Health shall amend the
59 Georgia Medicaid plan to provide coverage to a fertility patient for the following:

60 (1) Fertility diagnostic care;

61 (2) Fertility treatment; and

62 (3) Fertility preservation services.

63 (c) The coverage required under this Code section shall include at least three complete egg
64 retrievals with unlimited embryo transfers from those egg retrievals or from any egg
65 retrieval performed prior to January 1, 2026, in accordance with the guidelines of the
66 American Society for Reproductive Medicine or a comparable organization, using single
67 embryo transfer when recommended and medically appropriate.

68 (d) Fertility preservation coverage shall be provided to an individual who has a medical
69 or genetic condition or who is expected to undergo treatment that may directly or indirectly
70 cause a risk of impairment of fertility.

71 (e) Coverage required under this Code section shall be provided regardless of whether
72 donor gametes or embryos are used or if an embryo will be transferred to the uterus of a
73 third-party.

74 (f) Coverage required under this Code section shall be provided without discrimination on
75 the basis of a covered person's actual or perceived race, color, religion, national origin, sex,
76 sexual orientation, gender, mental disability, or physical disability.

77 (g) This Code section shall not be construed to require any insurer to provide coverage for:

78 (1) Any experimental fertility procedure; or

79 (2) Any nonmedical costs related to donor gametes, donor embryos, or surrogacy.

80 (h) The amended Georgia Medicaid plan provided for in subsection (b) of this Code
81 section shall provide coverage for fertility preservation and the diagnosis of infertility, and
82 any medically necessary ovulation-enhancing drugs and medical services related to
83 prescribing and monitoring the use of the ovulation-enhancing drugs, and intrauterine
84 insemination that is intended to treat infertility and achieve a pregnancy that results in a
85 live birth and shall include at least three cycles of ovulation-enhancing medication
86 treatment over a Georgia Medicaid recipient's period of Medicaid eligibility.

87 (i) On or before August 1, 2026, the Department of Community Health shall submit to the
88 General Assembly, after consulting with the Centers for Medicare and Medicaid Services
89 on whether in vitro fertilization and standard fertility preservation services are medically
90 reasonable and necessary procedures under federal law, a report on possible methods for
91 covering in-vitro fertilization and standard fertility preservation services as a Medicaid
92 covered benefit for both fee-for-service and managed care organizations, including any
93 potentially applicable waiver authorities, and the amount of money that would need to be
94 allocated to federal and local funds for such coverage.

95 (j) To implement the provisions of this Code section, the Department of Community
96 Health shall, when necessary, submit a Georgia Medicaid plan amendment or waiver
97 request to the United States Department of Health and Human Services."

98 **SECTION 2.**

99 This Act shall become effective upon its approval by the Governor or upon its becoming law
100 without such approval and shall apply to Medicare plans issued or renewed on or after
101 January 1, 2026.

102 **SECTION 3.**

103 All laws and parts of laws in conflict with this Act are repealed.