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HOUSE BILL 95

57TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2025

INTRODUCED BY

Pamelya Herndon

AN ACT

RELATING TO INSURANCE; ENACTING NEW SECTIONS OF THE HEALTH CARE PURCHASING ACT AND THE NEW MEXICO INSURANCE CODE TO REQUIRE FERTILITY PRESERVATION SERVICES IN CERTAIN CASES.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF NEW MEXICO:

SECTION 1. A new section of the Health Care Purchasing Act is enacted to read:

"[NEW MATERIAL] COVERAGE FOR FERTILITY PRESERVATION SERVICES. --

As used in this section, "fertility preservation" means the use of specific medical interventions, in accordance with clinical practice guidelines that are generally accepted by health care providers in relevant clinical specialties, including the procurement, cryopreservation or storage of oocytes, embryos or gonadal .228819.2

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- В. Group health coverage, including any form of self-insurance, that is offered, issued or renewed under the Health Care Purchasing Act shall provide coverage for fertility preservation services for enrollees whose disease or medically necessary disease treatment, as determined by the enrollee's health care provider, may lead to infertility.
- Coverage shall be provided regardless of the enrollee's:
 - expected length of life; (1)
 - (2) present or predicted disability;
 - degree of medical dependency; (3)
- perceived quality of life or other health (4) conditions; or
- personal characteristics, including age, (5) sex, sexual orientation, marital status, gender or gender identity."
- SECTION 2. A new section of Chapter 59A, Article 22 NMSA 1978 is enacted to read:

"[NEW MATERIAL] COVERAGE FOR FERTILITY PRESERVATION SERVICES.--

As used in this section, "fertility preservation" means the use of specific medical interventions, in accordance with clinical practice guidelines that are generally accepted by health care providers in relevant .228819.2

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clinical specialties, including the procurement,
cryopreservation or storage of oocytes, embryos or gonadal
tissue.

- B. An individual or group health insurance policy, health care plan or certificate of health insurance that is delivered, issued for delivery or renewed in this state shall provide coverage for fertility preservation services for insureds whose disease or medically necessary disease treatment, as determined by the insured's health care provider, may lead to infertility.
- C. Coverage shall be provided regardless of the insured's:
 - (1) expected length of life;
 - (2) present or predicted disability;
 - (3) degree of medical dependency;
- (4) perceived quality of life or other health conditions; or
- (5) personal characteristics, including age, sex, sexual orientation, marital status, gender or gender identity."
- SECTION 3. A new section of Chapter 59A, Article 23 NMSA 1978 is enacted to read:
- "[NEW MATERIAL] COVERAGE FOR FERTILITY PRESERVATION
 SERVICES.--
- A. As used in this section, "fertility .228819.2

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preservation" means the use of specific medical interventions
in accordance with clinical practice guidelines that are
generally accepted by health care providers in relevant
clinical specialties, including the procurement,
cryopreservation or storage of oocytes, embryos or gonadal
tissue.

- A blanket or group health policy, health care plan or certificate of health insurance that is delivered, issued for delivery or renewed in this state shall provide coverage for fertility preservation services for insureds whose disease or medically necessary disease treatment, as determined by the insured's health care provider, may lead to infertility.
- Coverage shall be provided regardless of the insured's:
 - expected length of life; (1)
 - present or predicted disability; (2)
 - degree of medical dependency; (3)
- perceived quality of life or other health (4) conditions; or
- personal characteristics, including age, sex, sexual orientation, marital status, gender or gender identity."
- SECTION 4. A new section of the Health Maintenance Organization Law is enacted to read:

"[NEW MATERIAL] COVERAGE FOR FERTILITY PRESERVATION .228819.2

SERVICES. --

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A. As used in this section, "fertility preservation" means the use of specific medical interventions, in accordance with clinical practice guidelines that are generally accepted by health care providers in relevant clinical specialties, including the procurement, cryopreservation and storage of oocytes, embryos or gonadal tissue.

- B. An individual or group health maintenance organization contract that is offered, issued for delivery or renewed in this state shall provide coverage for fertility preservation services for eligible enrollees whose disease or medically necessary disease treatment, as determined by the eligible enrollee's health care provider, may lead to infertility.
- C. Coverage shall be provided regardless of the eligible enrollee's:
 - (1) expected length of life;
 - (2) present or predicted disability;
 - (3) degree of medical dependency;
- (4) perceived quality of life or other health conditions; or
- (5) personal characteristics, including age, sex, sexual orientation, marital status, gender or gender identity."

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	SECTION	5. A	new	section	of	the	Nonprofit	Health	Care
Plan	Law is e	enacteo	l to	read:					

"[NEW MATERIAL] COVERAGE FOR FERTILITY PRESERVATION
SERVICES.--

- A. As used in this section, "fertility preservation" means the use of specific medical interventions, in accordance with clinical practice guidelines that are generally accepted by health care providers in relevant clinical specialties, including the procurement, cryopreservation and storage of oocytes, embryos or gonadal tissue.
- B. An individual or group health plan or certificate of insurance that is delivered, issued for delivery or renewed in this state shall provide coverage for fertility preservation services for the eligible subscriber whose disease or medically necessary disease treatment, as determined by the eligible subscriber's health care provider, may lead to infertility.
- C. Coverage shall be provided regardless of the eligible subscriber's:
 - (1) expected length of life;
 - (2) present or predicted disability;
 - (3) degree of medical dependency;
- (4) perceived quality of life or other health conditions; or

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SECTION 6. EFFECTIVE DATE.--The effective date of the provisions of this act is January 1, 2026.

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