

HB 2724 -- INSURANCE COVERAGE FOR FERTILITY TREATMENTS

SPONSOR: Appelbaum

This bill requires health benefit plans covering more than 25 employees that provide pregnancy-related benefits to include coverage for the diagnosis and treatment of infertility, effective August 28, 2026.

Coverage includes in vitro fertilization (IVF), embryo transfer, artificial insemination, and medically necessary oocyte cryopreservation for patients undergoing treatments like chemotherapy.

Coverage for IVF will only be required if:

- (1) The individual has tried and failed to achieve a successful pregnancy through other, less expensive, medically appropriate infertility treatments covered by their health plan.
- (2) The individual has not completed more than four oocyte retrieval procedures, although two additional retrievals may be covered if a live birth follows a previous retrieval.
- (3) The IVF procedures must be conducted at clinics that adhere to the guidelines established by the American College of Obstetricians and Gynecologists or the minimal standards set by the American Society for Reproductive Medicine.

This bill contains an exemption for religious organizations that find the procedures to violate their religious and moral teachings and beliefs.

This bill is similar to HB 487 (2025) and HB 1683 (2024).