

SB 729 Fertility and Infertility Coverage:

Sutter Health Plan has implemented coverage for our large group plans and small group Plus plans in accordance with the requirements of SB 729 and the guidelines of the American Society for Reproductive Medicine (ASRM). Effective July 1, 2025, California Senate Bill (SB) 729 expands coverage requirements for the diagnosis and treatment of infertility and fertility services.

- Large group health plans must include coverage for the diagnosis and treatment of infertility, and fertility services.
- Small group health plans must offer coverage for the diagnosis and treatment of infertility, and fertility services.

These changes do not apply to small group Standard plans or individual and family plans (IFPs).

This coverage will include a maximum of three completed oocyte retrievals and unlimited embryo transfers.

Coverage

Sutter Health Plan will cover medically necessary services, supplies and drugs for the diagnosis and treatment of infertility and fertility services, in accordance with the guidelines of the ASRM. For covered services related to infertility treatment, members will pay the cost sharing they would pay for the applicable category of covered services (e.g., office visit, outpatient lab, etc.).

For purposes of this benefit, “infertility” means a condition or status characterized by any of the following:

Covered services include, but are not limited to:

- Consultations, exams, diagnostic tests, procedures and drug therapy to diagnose and treat infertility.
- A maximum of three completed oocyte retrievals.
- Unlimited embryo transfers, using single embryo transfer when recommended and medically appropriate.
- Cryopreservation and storage of sperm, oocytes, gonadal tissue and embryos for a period of three years.
- The new infertility benefit covers infertility treatment as medically necessary. There is no limit on the number of IVF cycles. There are only limits on the oocyte retrievals and cryopreservation/storage as listed above.

Limitations and Exclusions:

- Services for any individual who is not a covered Member, including any costs associated with the retrieval, cryopreservation, and storage of genetic material from anyone other than a covered Member.
- Services and supplies to reverse voluntary infertility including, but not limited to, reversals of vasectomy, tubal ligation or other surgically induced infertility, or to treat infertility following reversal procedures.
- Experimental and investigational diagnostic studies, procedures and drugs used to determine the cause of infertility or to treat infertility.