Provider Update

June 27, 2025



Infertility and Fertility Services

Effective July 1, 2025, California Senate Bill (SB) 729 expands coverage requirements for the diagnosis and treatment of infertility and fertility services to:

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

Sutter Health Plan implements this 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).

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

Coverage for Infertility and Fertility Services

Beginning July 1, 2025, Sutter Health Plan covers medically necessary services, supplies and drugs for the diagnosis and treatment of infertility and fertility services as follows:

- All large group plans that are new or renewing on or after July 1, 2025.
- All small group Plus plans as of July 1, 2025, regardless of plan effective date.

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

- 1. A licensed physician's findings, based on a patient's medical, sexual and reproductive history, age, physical findings, diagnostic testing or any combination of those factors.
- 2. A person's inability to reproduce either as an individual or with their partner without medical intervention.
- 3. The failure to establish a pregnancy or to carry a pregnancy to live birth after regular, unprotected sexual intercourse.

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

P-CC-25-012R Page 1 of 2

- 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

Cost sharing for covered services to diagnose and treat infertility and fertility services are the standard cost sharing applicable to the type of service (e.g., office visit, outpatient lab, etc.).

Sutter Health Plan provides coverage for the treatment of infertility and fertility services without discrimination on the basis of age, ancestry, color, disability, domestic partner status, gender, gender expression, gender identity, genetic information, marital status, national origin, race, religion, sex or sexual orientation.

For more specific information about a member's coverage, please refer to their Sutter Health Plan Evidence of Coverage (EOC) available on the Provider Portal at **shplan.org/providerportal**.

Additional Information

Sutter Health Plan has provided updated benefit plan documents to members, brokers and employers affected by the SB 729 coverage changes.

If you have questions about the information in this update, call Customer Service at 855-315-5800 (TTY 855-830-3500). Customer Service is available 8 a.m. to 7 p.m., Monday through Friday.