



## SB 729 and APL 25-021 Fertility and Infertility Coverage

### Frequently Asked Questions

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#### General

##### 1. What is SB 729?

California Senate Bill 729 expands access to fertility coverage for Fully Insured employer groups in the Small and Large Group Lines of Business.

It requires Large Group plans to provide coverage for the diagnosis and treatment of infertility and fertility services including covering 3 completed oocyte retrievals and unlimited embryo transfers for plans issued or renewed on or after the effective date. It requires Small Group plans to offer coverage for the diagnosis and treatment of infertility and fertility services for plans issued or renewed on or after the effective date.

On June 30, 2025, Governor Newsom officially signed AB 116 which included a provision delaying the effective date for SB 729 from the original effective date of July 1, 2025, to January 1, 2026.

##### 2. What does the All Plan Letter (APL) 25-021 entail?

APL 25-021 provides regulatory guidance to health plans on how to implement the requirements of SB 729 in 2026. This includes clarification on certain definitions, additional guidance on implementing coverage requirements, and information on filing requirements to the regulators for coverage and benefits. We expect the regulators may issue additional guidance with further clarification sometime this year.

##### 3. Who does it apply to?

Fully Insured and Flex-Funded Small Business, Mid Market, and Premier Groups

Please Note: This does NOT apply to Self-Funded, ASO, however, these groups may offer the same coverage as required for Fully Insured groups

##### 4. What is the compliance date?

Blue Shield of California SB 729 FAQs  
Updated February 12, 2026

On June 30, 2025, Governor Newsom officially signed AB 116 which includes a provision delaying the effective date for SB 729 from the original effective date of July 1, 2025, to January 1, 2026. APL 25-021 confirms that these changes apply upon new group issuance or renewal in 2026.

**5. Do lifetime benefit maximum amounts apply to infertility benefits under SB 729?**

SB 729 does not allow us to apply a lifetime dollar benefit maximum on infertility benefits. For example, benefits provided by another carrier previously do not count towards the coverage limits provided by Blue Shield once they are a Blue Shield member.

## Small Business

### Small Business Coverage

**6. Can Small Business groups opt out?**

Small Business groups may choose to offer coverage for fertility services (opt in). Blue Shield will offer a version of each medical plan with corresponding fertility benefits providing the required fertility coverage in compliance with this mandate. APL 25-021 requires health plans to offer at least one plan with the full SB 729 benefits. We expect the regulators to issue another APL clarifying Small Group coverage requirements and are monitoring this closely. **Please note:** The products currently in the market were approved by the DMHC before they issued the additional guidance in the APL which are now under review.

**7. What is the cost-share for the services required under SB 729?**

The mandate provides that cost shares or other limitations applied to the coverage of the diagnosis and treatment of infertility must not differ from those applied to benefits for services not related to infertility.

**8. My group currently offers certain reproductive benefits, can they maintain those benefits?**

Yes, the reproductive benefits currently offered by some Small Business groups, will still be available, however, the cost share may change.

**9. Will there be updated plan documents and an endorsement sent to Small Group members?**

This is currently being assessed.

## Large Group – Fully Insured

### Large Group Fully Insured Coverage

**10. What happens to Large Group coverage as a result of the compliance date extension from July 1, 2025, to January 1, 2026?**

Large Groups can expect changes to fertility coverage as outlined in SB 729 to take effect on or after January 1, 2026, upon new issuance or renewal. There will be a corresponding adjustment in rates to reflect the change in benefits.

**11. Can groups opt out of the requirements of SB 729?**

In the Fully Insured Large Group space, only religious employers who meet the definition of a religious employer under the California Health and Safety Code Section 1367.25 can opt out of providing this coverage.

All other Fully Insured Large Group employers cannot opt out and are required to provide coverage for the diagnosis and treatment of infertility and fertility services, including a maximum of 3 completed oocyte retrievals (egg retrievals) with unlimited embryo transfers, using single embryo transfer when recommended and medically appropriate.

While ASO groups are not required to provide this coverage, they will have the ability to opt in and embed the same coverage as required for Fully Insured offerings.

**12. What is the cost-share for the services required under SB 729?**

The mandate provides that cost shares or other limitations applied to the coverage of the diagnosis and treatment of infertility must not differ from those applied to benefits for services not related to infertility.

**13. Are there ways for groups to enhance their fertility coverage beyond the mandate minimum?**

Yes, groups will be able to customize their fertility coverage to offer more generous benefits than SB 729 requires should that employer group choose to do so.

**14. Will there be updates to the Large Group renewal kits?**

Yes, there is information in the renewal cover letter to explain the minimum requirements of SB 729 and that we are working in good faith to implement this mandate.

**15. Will member EOC and SOBs reflect the coverage available to Large Group members?**

Yes, EOC and SOBs reflect the coverage available to Large Group members and was approved by the Department of Managed Health Care (DMHC).

**16. Will there be an endorsement sent to Large Group members?**

Plan documents, such as EOCs and SOBs have been updated for 2026 following DMHC approval of our approach to implement the requirements of SB 729.

**17. Will reproductive endocrinologists be indicated in our provider directories?**

Yes, reproductive endocrinologists are listed in the Find a Doctor tool.

## Large Group - Self-Funded

### Self-Funded Coverage

**18. Can ASO opt in to provide the same coverage as required for Fully Insured Core and Premier groups?**

While ASO groups are not required to provide this coverage, they will have the ability to opt in and embed the same coverage as required for Fully Insured offerings.

**19. What is the process for ASO groups to opt in?**

If a group is interested in opting in, they should reach out to their Account Management team.