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# Artificial Insemination and Embryo Protection Act

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Amended by the following acts

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| 04.06.2008 | RT I 2008, 25, 163    | 05.07.2008   |
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| 09.12.2008 | RT I 2008, 56, 313    | 01.01.2009   |
| 18.11.2009 | RT I 2009, 60, 395    | 01.07.2010   |
| 10.02.2011 | RT I, 03.03.2011, 1   | 13.03.2011   |
| 19.06.2014 | RT I, 29.06.2014, 109 | 01.07.2014, official titles of ministers replaced on the basis of subsection 4 of § 107 <sup>3</sup> of the Government of the Republic Act starting from the wording in force as of 1 July 2014. |
| 29.01.2015 | RT I, 26.02.2015, 1   | 01.03.2015   |
| 06.12.2017 | RT I, 28.12.2017, 4   | 01.01.2018   |
| 08.06.2022 | RT I, 20.06.2022, 63  | 27.06.2022   |
| 20.06.2023 | RT I, 06.07.2023, 6   | 01.01.2024   |

## Chapter 1 GENERAL PROVISIONS

### § 1. Scope of application of Act

(1) This Act regulates the artificial insemination of a woman with the sperm of a man, transfer of embryos created *in vitro* as well as the protection of embryos created *in vitro* and the filiation of a child born as a result of artificial insemination.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) The procurement of gametes, creation of embryos as well as the coding, labelling, research, preservation, processing, packaging, storage, release and issue of gametes and embryos are governed by the Procurement, Handling and Transplantation of Cells, Tissues and Organs Act unless otherwise provided by this Act.

[RT I, 26.02.2015, 1 – entry into force 01.03.2015]

### § 2. Artificial insemination

Artificial insemination comprises acts which are performed with the aim of conception and in the course of which the sperm of a man or an embryo created *in vitro* is transferred to a woman.

[RT I 2008, 25, 163 – entry into force 01.01.2009]

### **§ 3. Embryo**

“Embryo” means an embryo in its early stage of development from the time of fertilisation of the ovum. For the purposes of this Act, “embryo” means a human embryo unless otherwise provided by this Act.

#### **§ 3<sup>1</sup>. Donor for artificial insemination**

A donor for artificial insemination (hereinafter donor) is an anonymous donor, non-partner donor or partner donor who voluntarily donates their gametes for the purposes of artificial insemination. Unless otherwise provided by this Act, sperm donors and ovum donors are both deemed to be donors.  
[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 3<sup>2</sup>. Partner donation, non-partner donation and anonymous donation**

(1) For the purposes of this Act, partner donation means the donation of gametes between a man and a woman, where the person of the donor is known to the recipient and the donor declares that the child is deemed to descend from the donor.

(2) For the purposes of this Act, non-partner donation means the donation of gametes, where the person of the donor is known to the recipient but the donor declares that the child is not deemed to descend from the donor.

(3) For the purposes of this Act, anonymous donation means the donation of gametes, where the person of the donor is not known to the recipient and the donor declares that the child is not deemed to descend from the donor.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## **Chapter 2 CONDITIONS AND PROCEDURE FOR ARTIFICIAL INSEMINATION**

### **§ 4. Voluntary nature of artificial insemination**

(1) Only adult women younger than 51 years of age who have active legal capacity are, at their own request, permitted to undergo artificial insemination. No-one shall compel or persuade a woman to undergo artificial insemination.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) A woman's consent to artificial insemination shall be recorded pursuant to the procedure provided for in § 16 of this Act.

(3) A woman has the right to refuse to undergo artificial insemination until it is carried out and declare her consent void.

### **§ 5. Indications for artificial insemination**

(1) Artificial insemination of a woman is permitted with donor gametes or embryo created from ovum of another woman, regardless of her marital status:

- 1) if it is justified by medical indications or
- 2) in the absence of a suitable male partner.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) [Repealed - RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(3) Artificial insemination of a woman is prohibited if pregnancy or delivery is dangerous to the life or health of the woman or the baby or if other medical contraindications exist.

[RT I, 03.03.2011, 1 – entry into force 13.03.2011]

### **§ 6. Establishing of indications for artificial insemination**

(1) The indications specified in § 5 of this Act shall be established by a competent provider of specialised medical care who, if necessary, has the right to refer the patient to a provider of specialised medical care who organises artificial insemination. The provider of specialised medical care organising artificial insemination shall verify the indications for artificial insemination on the basis of the documents forwarded to the provider and has the right to require additional information concerning the state of health of the patient from the provider of specialised medical care who referred the patient thereto, and conduct additional examinations if necessary.

(2) Examinations relating to indications for artificial insemination shall be recorded in a document which proves the provision of the health care services and sets out the conclusion concerning the medical indications and contraindications for artificial insemination.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### **§ 7. Doctors' exclusive right to perform artificial insemination**

(1) A decision concerning the need for and permissibility of artificial insemination shall be made by a doctor pursuant to the procedure established by this Act and other legislation.

(2) Only doctors have the right to perform artificial insemination and transfer an embryo to a woman. Other health care professionals who have received appropriate training have the right to participate in acts relating to artificial insemination.

[RT I 2008, 25, 163 – entry into force 01.01.2009]

### **§ 8. Voluntary nature of medical activities**

(1) A doctor or any other health care professional shall not be required to perform or participate in the activities specified in § 2 of this Act.

(2) A doctor who has commenced artificial insemination may interrupt the procedure if medical contraindications become evident.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### **§ 9. Organisation of artificial insemination**

Artificial insemination may be organised by a provider of specialised medical care who according to an activity licence issued on the basis of the Health Services Organisation Act has the right to organise artificial insemination.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### **§ 10. Medical and legal counselling**

(1) Before performing artificial insemination after having established the indications prescribed in § 5 of this Act, the provider of specialised medical care who organises the artificial insemination shall explain the biological and medical nature of and the possible risks related to artificial insemination to the woman who wishes to undergo artificial insemination and to the man who donates his sperm in the course of artificial insemination as a non-partner donor or partner donor.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(1<sup>1</sup>) The provider of specialised medical care who organises the artificial insemination is not liable for the content of counselling on the legal bases of artificial insemination and legal consequences related with the filiation of a child born as a result of artificial insemination. The content, form and procedure of counselling on the legal bases of artificial insemination and legal consequences related with the filiation of a child born as a result of artificial insemination shall be established by a regulation of the minister in charge of the policy sector.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) A report in two original copies shall be prepared on the counselling specified in subsection 1 of this section. One of the copies of the report shall be submitted to the person(s) who received counselling and the other shall remain with the provider of specialised medical care who organised the counselling.

(3) A report on counselling shall set out:

- 1) the time and place of the counselling;
- 2) the name, number of the activity licence, address and telecommunications numbers of the provider of specialised medical care who organised the counselling;
- 3) the given name and surname of the doctor who provided counselling and the registration code of a health care professional;

[RT I, 20.06.2022, 63 – entry into force 27.06.2022]

- 4) the first name(s), surname(s), personal identification code(s) or, in the absence thereof, date(s) of birth, address(es) and telecommunications numbers of the person(s) who received counselling;

- 5) the aim and content of the counselling;

- 6) the signatures of the doctor who provided counselling and the person(s) who received counselling.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### **§ 11. Prohibition on intermediation of artificial insemination**

Intermediation of artificial insemination outside the health care system is prohibited and the agreements concluded as a result of the intermediation are void.

[RT I 2008, 15, 108 – entry into force 01.11.2008]

## **§ 12. Insemination of woman with sperm of only one man**

In artificial insemination of a woman, the sperm of only one man shall be used in each case of insemination.

## **§ 13. Number of children from one anonymous or non-partner donor**

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

The gametes obtained from one anonymous or non-partner donor may be used in order to conceive babies to be born to up to six different women in Estonia.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## **§ 14. Maintaining records of artificial insemination**

The required documents concerning artificial insemination shall be prepared by the provider of specialised medical care who organises the artificial insemination. The medical history form for artificial insemination and the procedure for preparing the necessary records shall be established by the minister in charge of the policy sector.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

## **§ 15. Disclosure of information concerning artificial insemination**

(1) Personal data relating to artificial information shall not be disclosed except in the case prescribed in § 28 of this Act.

(2) In scientific studies concerning artificial insemination, information shall be disclosed in adherence to the restrictions prescribed in this Act.

# **Chapter 3**

## **RIGHTS AND OBLIGATIONS OF PERSONS INVOLVED IN ARTIFICIAL INSEMINATION**

## **§ 16. Woman's consent to artificial insemination**

(1) Artificial insemination of a woman shall be carried out only under the conditions prescribed in §§ 4 and 5 of this Act and with the written consent of the woman.

(2) The written consent of a woman shall set out that she agrees to:

1) insemination with the sperm of an anonymous or non-partner donor or insemination as partner donation;

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

2) *in vitro* fertilisation of her ova;

3) impregnation with an embryo originating from an ovum of another woman;

4) freezing of embryos.

[RT I 2008, 25, 163 – entry into force 01.01.2009]

(3) If examinations conducted on the basis of § 6 of this Act lead to a finding which confirms risk factors but does not preclude artificial insemination, the consent of the woman shall set out separately that she consents to artificial insemination even considering the risk involved.

(4) Artificial insemination may be performed after at least one month has passed from the counselling prescribed in § 10 of this Act.

(5) The format of the written consent prescribed in this section shall be established by the minister in charge of the policy sector.

## **§ 17. Husband's consent to artificial insemination of his wife**

[Repealed - RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## **§ 17<sup>1</sup>. Man's consent to artificial insemination of woman**

(1) A man may grant a written consent to the artificial insemination of a woman with the gametes of an anonymous or non-partner donor or with an embryo created from ovum of another woman or as partner donation. A man's gametes may be used for the artificial insemination of a woman with his written consent. A man's consent must be in conformity with a woman's consent which has been given in accordance with § 16 of this Act.

(2) Where the artificial insemination of a woman is performed with the sperm of a man who has granted consent to artificial insemination of a woman as partner donation, the consent must set out whether he consents to the artificial insemination of the woman with his sperm also after his death.

(3) A man has the right to withdraw the consent to artificial insemination of a woman in writing until the beginning of the procedure of artificial insemination.

(4) Where the artificial insemination of a woman is performed with the gametes of an anonymous or non-partner donor or an embryo created from ovum of another woman, the child is not deemed to descend from that donor. An anonymous or non-partner donor may not demand ascertaining the filiation from them and third persons may not demand ascertaining the filiation from them.

(5) Where a man has granted consent to the artificial insemination of a woman with the gametes of an anonymous or non-partner donor or an embryo created from ovum of another woman or as partner donation in accordance with subsection 1 of this section and has not withdrawn his consent, the child is deemed to descend, through grant of consent to artificial insemination, from the man having granted consent to the artificial insemination of a woman. The man having granted consent to the artificial insemination of a woman cannot dispute the filiation of the child from him. Third persons cannot dispute the filiation of a child from the man having granted consent to the artificial insemination of a woman.

(6) Where a man who granted consent to the artificial insemination of a woman as partner donation in accordance with subsection 1 of this section, withdraws his consent, the child is not deemed to descend from him through grant of consent to artificial insemination. Filiation of the child from the man shall be established pursuant to the procedure provided for in the Family Law Act.

(7) The content and form of the written consent prescribed for in this section shall be established by a regulation of the minister in charge of the policy sector.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 17<sup>2</sup>. Female spouse's consent to artificial insemination of her female spouse**

(1) A female spouse may grant a written consent to the artificial insemination of her female spouse with the gametes of an anonymous or non-partner donor or an embryo created from ovum of another woman. The female spouse's consent must be in conformity with the consent of her female spouse given in accordance with § 16 of this Act.

(2) A female spouse has the right to withdraw her consent in writing until the beginning of the procedure of artificial insemination.

(3) Where the artificial insemination of a female spouse is performed with the gametes of an anonymous or non-partner donor or an embryo created from ovum of another woman, the child is not deemed to descend from the anonymous or non-partner donor. An anonymous or non-partner donor may not demand ascertaining the filiation from them and third persons may not demand ascertaining the filiation from them.

(4) Where a female spouse has granted consent to the artificial insemination of her female spouse with the gametes of an anonymous or non-partner donor or an embryo created from ovum of another woman in accordance with subsection 1 of this section and has not withdrawn her consent, the child is deemed to descend, through grant of consent to artificial insemination, from the female spouse having granted consent to the artificial insemination of her female spouse. The female spouse having granted consent to the artificial insemination of her female spouse cannot dispute the filiation of the child from her. Third persons cannot dispute the filiation of the child from the female spouse having granted consent to the artificial insemination of her female spouse.

(5) Where a female spouse withdraws the consent to the artificial insemination of her female spouse, the child is not deemed to descend from her. Filiation of the child shall be established pursuant to the procedure provided for in the Family Law Act.

(6) Where a female spouse has granted consent to undergo artificial insemination with a man's sperm as partner donation, and the man has granted consent in accordance with subsection 1 of § 17<sup>1</sup> of this Act and the man has not withdrawn his consent, the child is deemed to descend, through grant of consent to artificial insemination, from the man having donated his sperm as partner donation. The man having granted consent to artificial insemination of the woman as partner donation cannot dispute the filiation of the child from him. Third persons cannot dispute the filiation of the child from the man having granted consent to the artificial insemination of a woman as partner donation.

(7) Where a man who granted consent to the artificial insemination of a female spouse specified in subsection 6 of this section as partner donation in accordance with subsection 1 of § 17<sup>1</sup> of this Act, withdraws his consent, the child is not deemed to descend from the man through grant of consent to artificial insemination.

(8) Where a female spouse grants consent to the artificial insemination of her female spouse after the man having granted consent to the artificial insemination as partner donation has withdrawn his consent, the child

is deemed to descend, through grant of consent to artificial insemination, from the female spouse having granted consent to the artificial insemination of her female spouse. The female spouse having granted consent to the artificial insemination of her female spouse cannot dispute the filiation of the child from her. Third persons cannot dispute the filiation of the child from the female spouse having granted consent to the artificial insemination of her female spouse. Otherwise the filiation of the child from the man shall be established pursuant to the procedure provided for in the Family Law Act.

(9) The content and form of the written consent prescribed for in this section shall be established by the minister in charge of the policy sector.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 18. Artificial insemination of woman after divorce**

(1) Upon divorce, the man's consent for the use of his sperm and also the spouse's consent to artificial insemination is deemed to be withdrawn.

(2) Artificial insemination of a woman with the sperm of her divorced husband may be performed only with the man's renewed written consent granted in accordance with subsection 1 of § 17<sup>1</sup> of this Act.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 19. [Repealed – RT I 2003, 18, 102 – entered into force 07.03.2003]**

#### **§ 20. Artificial insemination of woman after husband's death**

Artificial insemination of a woman with the sperm of the man having participated in partner donation later than one month after the death of the man is prohibited.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 21. Artificial insemination of unmarried woman with sperm of specific man**

[Repealed - RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 22. Artificial insemination of unmarried woman with sperm of donor**

[RT I 2003, 18, 102 – entry into force 07.03.2003]

(1) [Repealed - RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) [Repealed – RT I 2009, 60, 395 – entered into force 01.07.2010]

#### **§ 23. Transfer to woman of embryo created from ovum of another woman**

(1) Transfer to a woman of an embryo created from an ovum of another woman is permitted if fertilisation of the woman is not possible in any other manner.

(2) The written consent of the donor of the ovum is necessary for performing the act prescribed in subsection 1 of this section. Before obtaining the consent of the donor, she shall be informed of the health risks relating to ovum donation. A report on the counselling of the donor shall be prepared in accordance with the requirements specified in subsections 2 and 3 of § 10. The donor may withdraw her consent at any time until the beginning of the procedure of ovum removal.

(3) An embryo created from an ovum of a woman of up to 35 years of age may be transferred to another woman on the grounds prescribed in subsection 1 of this section. With the consent of the woman who wishes to undergo artificial insemination, the ovum donor may be older than 35 years of age if she is a relative of the woman.

(4) Transfer of an embryo created from an ovum of another woman is permitted after the ovum has been frozen and preserved for six months, except in the case where the woman wishes the embryo to be transferred earlier after having been informed about the related risks.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

#### **§ 24. Child's filiation in event of transfer of embryo created from ovum of another woman**

In accordance with § 83 of the Family Law Act, a child born as a result of artificial insemination in accordance with § 23 of this Act is deemed to descend from the woman who gave birth to the child. The child's filiation from the father or the other parent shall be established in accordance with §§ 17<sup>1</sup> and 17<sup>2</sup> of this Act.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

#### **§ 25. Gamete donation**

(1) Any adult man of up to 40 years of age and any adult woman of up to 35 years of age (except in the case provided for in subsection 3 of § 23) who is mentally and physically healthy, has consented to donate his or her

gametes for the purposes of artificial insemination and has entered into a corresponding written contract for that purpose may be a gamete donor.

[RT I 2008, 25, 163 – entry into force 01.01.2009]

(2) [Repealed – RT I 2008, 25, 163 – entered into force 01.01.2009]

(3) Gametes shall not be used for artificial insemination if the donor has not entered into a contract specified in subsection 1 of this section, has not undergone the required medical examination before each case of gamete donation or, in the case of sperm donation, less than six months have passed from the donation.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

(4) The selection requirements for gametes donors, the list of circumstances precluding donation, the list of mandatory laboratory studies prescribed for donors and the conditions of and procedure for the conduct of studies have been provided for in the Procurement, Handling and Transplantation of Cells, Tissues and Organs Act.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## **§ 26. Rights and obligations of anonymous or non-partner donor**

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(1) An anonymous donor has the right to:

- 1) remuneration for gamete donation;
- 2) non-disclosure of the fact that he or she is an anonymous donor.

(2) An anonymous or non-partner donor are required to undergo the medical examination prescribed in § 25 of this Act.

(3) An anonymous or non-partner donor does not have the right to establish preconditions for the use of the gametes donated by them.

(4) An anonymous or non-partner donor does not have the right to require establishment of the identity of the mother, father or child.

(5) An anonymous or non-partner donor does not have the right to require that he or she be declared the mother or father of the child .

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## **§ 27. Disclosure of anonymous donor's personal data**

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(1) The personal data of an anonymous donor shall not be disclosed upon artificial insemination.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

(2) The woman and the man who have granted their consent to artificial insemination have the right to know the following information concerning the biological and social background of the anonymous donor :

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]:

- 1) nationality;
- 2) colour;
- 3) education;
- 4) marital status;
- 5) whether he or she has got any children;
- 6) height;
- 7) constitution;
- 8) hair colour;
- 9) eye colour.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

## **§ 28. Child's right to be aware of having been artificially conceived**

(1) An adult person who was born as a result of artificial insemination has the right to ask information from a vital statistics office concerning his or her artificial conception.

(2) If a person specified in subsection 1 of this section was born as a result of conception with the gametes of an anonymous donor, information concerning the anonymous donor shall be disclosed to them pursuant to subsection 2 of § 27 of this Act.

[RT I, 06.07.2023, 6 - entry into force 01.01.2024]

## Chapter 4

# PROTECTION OF EMBRYOS CREATED IN VITRO

### § 29. Purpose of *in vitro* fertilisation of ova

An ovum shall be fertilised *in vitro* only with the aim of transferring the ovum to a woman.

### § 30. Freezing of embryos

(1) Embryos created *in vitro* shall be frozen and preserved in frozen form for up to seven years.  
[RT I 2008, 25, 163 – entry into force 01.01.2009]

(2) If an embryo is not transferred to a woman within the term specified in subsection 1 of this section, the embryo shall be used for scientific research or destroyed.

### § 31. Use of embryos

(1) An embryo preserved *in vitro* shall be used:

- 1) for transfer to a woman pursuant to the procedure prescribed in this Act;
- 2) for scientific research under the conditions prescribed in § 32 of this Act.

(2) In the course of one artificial insemination, up to three embryos created from the gametes of the same persons may be transferred to a woman.

(3) Transactions with embryos are prohibited.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### § 32. Use of embryos for scientific research

(1) Embryos which, in order to ensure the success of the artificial insemination or to protect the health of the child or the mother, are not transferred to a woman, and embryos which have remained unused due to circumstances specified in subsection 3 of § 4 or subsection 2 of § 30 of this Act may be used for scientific research.

(2) The consent of the persons who donated the gametes is necessary for using an embryo for scientific research.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### § 33. Prohibition on transfer of embryos used for scientific research

Transfer of an embryo which has been used for scientific research to a woman is prohibited.

### § 34. Term for preservation or use of embryos

An embryo may be preserved or used on the grounds prescribed in § 31 or 32 of this Act within fourteen days after fertilisation of the ovum. Preservation or use of embryos after expiry of the specified term is prohibited. The time during which the embryo is frozen pursuant to § 30 of this Act shall not be included in such term.  
[RT I 2003, 18, 102 – entry into force 07.03.2003]

### § 35. Prohibited acts with embryo

It is prohibited to perform the following acts in connection with artificial insemination of a woman:

- 1) artificial fertilisation of an ovum with a sperm which has been selected on the basis of the sex chromosome contained therein, except in the cases where a gamete is selected in order to avoid transmission of a serious sex-related inheritable disease to the child;
- 2) creation, by way of substitution of the nucleus of a fertilised ovum by a somatic cell of another embryo, foetus or living or dead person, of an embryo with genetic information identical to that of the embryo, foetus or living or dead person;
- 3) fusion of embryos with different genetic information in order to create a cell fusion if at least one of the embryos is a human embryo, or fusion of a human embryo with a cell which contains genetic information different from that of the cells of the embryo and which may develop further together with the embryo;
- 4) creation of an embryo capable of developing by fertilisation of a human ovum with animal sperm or animal ovum with human sperm.

## Chapter 4<sup>1</sup>



# COMPENSATION FOR IN VITRO FERTILISATION

## § 35<sup>1</sup>. Compensation for health care services related to *in vitro* fertilisation and embryo transfer and for medical expenses related thereto

[RT I 2008, 25, 163 – entry into force 05.07.2008]

Health care services related to *in vitro* fertilisation and embryo transfer and the medical expenses related thereto shall be compensated for on the conditions and pursuant to the procedure provided for in the Health Insurance Act.

[RT I, 28.12.2017, 4 – entry into force 01.01.2018]

## Chapter 5 FINAL PROVISIONS

### § 36. [Omitted from this text.]

### § 37. Implementation of § 10

Until registration of a doctor pursuant to the procedure provided for in the Health Care Services Organisation Act, the doctor's code may be used instead of the number of the registration certificate specified in § 10 of this Act.

[RT I 2003, 18, 102 – entry into force 07.03.2003]

### § 38. Implementing provisions

(1) § 35<sup>1</sup> of this Act shall be applied since 1 January 2006.

(2) Compensations for *in vitro* fertilisation applied for the year 2006 shall be paid from 1 February 2007 until 1 April 2007.

[RT I 2006, 32, 245 – entry into force 01.09.2006]