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State of Connecticut
HOUSE OF REPRESENTATIVES
LEGISLATIVE OFFICE BUILDING
HARTFORD, CONNECTICUT 06106-1591

REPRESENTATIVE MATTHEW LESSER
ONE HUNDRETH ASSEMBLY DISTRICT

HOME: 860-344-1230
CAPITOL: 860-240-8585
FAX: 860-240-0021
E-MAIL: Matthew.Lesser@cga.ct.gov

CHAIRMAN
BANKING COMMITTEE

MEMBER
APPROPRIATIONS COMMITTEE
GOVERNMENT ADMINISTRATION &
ELECTIONS COMMITTEE

February 17, 2015

Chairman Megna, Chairman Crisco, Ranking Members Sampson and Kelly, Honorable Vice Chairs and Members of the Insurance and Real Estate Committee:

I wish to testify in support of H.B. No. 5500 AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR FERTILITY PRESERVATION FOR INSURED'S DIAGNOSED WITH CANCER.

I want to thank the committee for raising this issue, which is a critical issue for young people living with cancer in Connecticut.

As many of you know, and as I learned myself when I was treated two years ago, getting treated for cancer often results in infertility.

In addition to having to make difficult decisions about treatment, young people interested in raising a family have to make an additional decision about possibly delaying treatment – either to try to conceive a child first or to raise the significant funds necessary for fertility preservation.

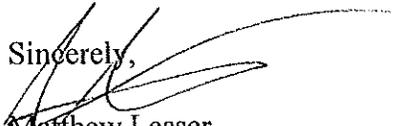
1. **This is a limited issue.** The vast majority of cancer patients in Connecticut are older adults, and not of childbearing age. A UConn cost/benefit analysis found the cost of this mandate to be approximately \$.06 per patient per month. However they did not consider savings resulting from faster or more aggressive cancer treatment.
2. **Connecticut already has a much more expensive fertility treatment mandate on the books.** Although insurance plans are not required to cover preservation, they are already required to cover *in vitro* fertilization for many insureds, one of the most expensive mandates. If we cover

treatment for the already-infertile, we ought to provide coverage for the soon-to-be infertile, particularly given the fact that fertility preservation can reduce the need for IVF.

3. **In part, this is a gender equity issue.** The cost for a young woman freezing her eggs is often over \$10,000. The cost for a man to freeze sperm is only a few hundred dollars. This presents a significant financial burden on young women with cancer whose insurance does not cover treatment – one that does not exist for men.
4. **It's time.** This is the third time the Committee has considered this issue, and I want to thank the Committee for raising the concept as a committee bill. Last year, the Committee reported favorably on the concept and after three years of stasis since our Essential Health Benefits package was set, it's important that we reevaluate required mandates in the face of new needs and technological progress.
5. **This will save lives.** You do not have to be an oncologist to understand that in treating cancer, time is of the essence – and the time delay involved in raising the funds necessary for fertility preservation or waiting until natural conception can be the difference between life and death, or at the very least a less expensive and aggressive treatment option and a more expensive and aggressive alternative.

I thank you for considering this testimony and hope you will report favorably on the legislation.

Sincerely,



Matthew Lesser