

Insurance and Real Estate Committee JOINT FAVORABLE REPORT

Bill No.: SB-327

AN ACT REQUIRING HEALTH INSURANCE COVERAGE FOR ELECTIVE

Title: FERTILITY PRESERVATION TREATMENTS.

Vote Date: 3/10/2020

Vote Action: Joint Favorable

PH Date: 3/5/2020

File No.:

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SPONSORS OF BILL:

Insurance and Real Estate Committee

REASONS FOR BILL:

This bill will require health insurance coverage for elective fertility preservation treatments.

RESPONSE FROM ADMINISTRATION/AGENCY:

None Expressed

NATURE AND SOURCES OF SUPPORT:

Senator Mae Flexer, 29th District

Senator Christine Conley, 40th District

State Representative Liz Linehan, 103rd District

Tesitified that in today's world, women and men can use modern medicine to plan for their own future family with a technological twist: freezing their eggs, embryos, or banking their sperm in order to have children when it's best for them. However, the full monetary expense of fertility preservation treatments can cost tens of thousands of dollars. Without insurance coverage, the expense is too great for many people. This may be changing. Some of the biggest firms in Silicon Valley, including Apple and Facebook, are offering elective fertilization preservation treatments as part of their benefits packages to recruit and train talented employees, particularly women. 1 And overall, the tech industry pours more money into fertility benefits than any other industry, including finance, fashion, and pharmaceuticals.2 We would argue that these new benefit offerings act as social indicators and reveal what we value as a culture. Additionally, coverage for elective fertility preservation treatments may establish a significant cost-savings benefit over time. If men and women were able to pay for

egg embryo freezing, and sperm banking by their own volition, they may not have to spend as much money on extended fertility treatments later on. For example, if a woman freezes her eggs at age 30, she may not need to endure multiple In Vitro Fertilization (IVF) procedures to continue her fertility later in her life.

Center for Advanced Reproductive Services stated in their practice they have seen a nearly 80% increase in elective egg freezing over the past four years. This increase is due in large part to need and patient's fortunate enough to have insurance that covers the procedure. This bill will level the playing field of reproductive rights by providing access to this service beyond those with progressive employers who choose to provide the benefit or who can pay for it out of pocket.

As representative of reproductive health providers in our state, we request the CT legislative committee to seriously consider the individual and the social benefits to our community from expanding insurance coverage to include fertility preservation as an added benefit. This will mitigate both psychological and physical suffering on the part of our patients in their quest for a normal quality of life, including access to reproduction which is a basic human right.

CT Society of Eye Physician

CT Dermatology and Dermatologic Surgery Society

CT ENT Surgery

CT Urology Society

feel in the face of decreasing U.S. birth rates, it is our duty to support individuals planning to build their family now or in the future. We have already led the nation as one of a minority of states mandating private insurance coverage of assisted reproductive techniques and were the first to require oncofertility coverage with Public Act 17-55. We must ensure that fertility options are preserved for all individuals, regardless of gender, who are facing potentially gonad-threatening treatment options.

Greenwich Fertility stated today, it is possible to preserve future fertility in the form of egg, embryo, or sperm freezing. Women, and men, by preserving their gametes at ages of reproductive competence, can now be reassured from this preemptive approach that allows them some degree of autonomy towards plans for family building at a later stage of life. Unfortunately, we as reproductive health providers often see individuals, including patients with non-cancerous medical conditions that can adversely impact on fertility potential, who are unable to utilize these technologies as their health insurance plan excludes fertility preservation services. We, as representatives of reproductive health providers in our state, as well as representatives of the scientific community that is spearheading efforts towards optimizing reproductive wellbeing for all, request the CT legislative committee to seriously consider the individual and the social benefits to our community from expanding insurance coverage to include fertility preservation as an added benefit. This action will markedly mitigate both psychological and physical sufferings on the part of our patients in their quest for a normal quality of life, including access to reproduction – which is a basic human right.

Amanda N. Kallen, MD, FACOG, American Congress of Obstetricians and Gynecologists

feel today, it is possible to preserve future fertility in the form of egg, embryo, or sperm freezing. The American Society of Reproductive Medicine has removed the “experimental” label from egg freezing technology, making it now an established procedure. Unfortunately, due to lack of insurance coverage for fertility preservation options, many patients are unable

to access this technology. This includes patients with medical conditions in need of fertility preservation whose plan excludes them from accessing these services, which we see frequently. Thus, it is our plea that you will seriously consider expanding insurance coverage to include fertility preservation as an added benefit. This will alleviate both psychological and physical suffering on the part of our patients in their quest for a normal quality of life, including access to reproduction - a basic human right.

Aven Kelley as a transgender person, fertility preservation is an issue that I care deeply about. Transgender people receiving hormone replacement therapy long-term may find their natural fertility greatly reduced or even eliminated. Many of us are not counseled on our options for fertility preservation, and when we are, most of our options are far beyond our financial means. Some of my friends who want biological children one day have had to gamble on how hormone replacement therapy will affect their fertility, and what options might become accessible in the future for assisted reproduction, because what is currently available for fertility preservation is invasive and unaffordable for so many people, especially transgender youth. Most people do not have to make these kinds of considerations. That's something that deeply saddens and frustrates me. Health care, including comprehensive reproductive health care, is a human right. That is why I support SB 327. By ensuring that insurance covers fertility preservation and removing the financial burden of these services, this bill will make fertility preservation options more accessible for many transgender people, particularly transgender youth, who face systemic barriers to fertility and access to reproductive rights.

Pasquale Patrizio, MD, MBE, FACOG Director, Yale Fertility Center & Fertility Preservation Program feels approval of this bill and the Coverage for Elective Fertility Preservation Treatments will make possible to preserve future fertility in the form of egg or embryo freezing. The American Society of Reproductive Medicine (ASRM) has removed the "experimental" label from egg freezing technology seven years ago, making it now an established procedure. Unfortunately, due to lack of insurance coverage for elective fertility preservation options, many patients are unable to access this and other technologies and therefore cannot protect their future fertility. It is a profound moral injustice to know that a technology is available to protect future reproductive plans, but it is not accessible because not covered by insurance plans. Many young women wishing to preserve their future chance of pregnancy by should be helped and allowed to do so. As an academic professor and as Chair of the ASRM Fertility Preservation Group, it is my plea that you will seriously consider expanding insurance coverage to include elective fertility preservation as an added benefit. This will alleviate the enormous psychological burden of many young women by knowing that their reproductive option has been preserved. Such access is, as the United Nation states, a "basic human right and an indispensable ingredient of human dignity".

Yale Medicine Fertility Center as representatives of reproductive health providers in our state, as well as representatives of the scientific community that is spearheading efforts towards optimizing reproductive wellbeing for all, request the CT legislative committee to seriously consider the individual and the social benefits to our community from expanding insurance coverage to include fertility preservation as an added benefit. This action will markedly mitigate both psychological and physical sufferings on the part of our patients in their quest for a normal quality of life, including access to reproduction – which is a basic human right.

Mario Leigh urge the members of the committee to support this legislation and update our state's policies to account for the updated standards that we have historically used to keep our heal-care system effective and just. I urge the committee to relieve the financial degradation of same sex couples, couples suffering from infertility and those without the financial resources to account for an unexpected change comparable to a mortgage. I urge the committee to protect the institution that many Americans hold sacred, The American family.

.NATURE AND SOURCES OF OPPOSITION:

CT Association of Health Plans stated this bill qualifies as a new state mandate under the Affordable Care Act. And would require the State of CT pick up the associated costs. As the ACA recognized, the system cannot continue to absorb the additional costs of new mandates. The sheer volume of mandates add appreciable volatility to the overall process that is not conducive to an efficient, stable and predictable insurance market.

Michelle Rakebrand, Asst Counsel, CBIA broadly opposes any healthcare mandate bills without a complete cost-benefit analysis being conducted prior to passage. Health benefit mandates pose an enormous cost to all Connecticut residents. The business community looks forward to working with this committee in an effort to lower healthcare costs, while maintaining the highest quality of care.

Reported by: Diane Kubeck

Date: April 14, 2020