



February 2, 2017

To: House Committee on Health  
The Honorable Della Au Belatti, Chair  
The Honorable Bertrand Kobayashi, Vice Chair

From: Beth Giesting, Hawai'i Association of Health Plans

**Re: Concerns about HB 677, RELATING TO IN VITRO FERTILIZATION  
INSURANCE COVERAGE**

The Hawai'i Association of Health Plans (HAHP) thanks you for the opportunity to share concerns about House Bill 677, which would expand eligibility for covered *in vitro* fertilization services.

HAHP's concerns with the proposed changes are as follows:

- Reducing the waiting time from five years to 12 months could encourage a couple to bypass stepped services that are often effective as well as being less risky, invasive, and. Expert opinion should be surveyed to help law-makers and plans arrive at the optimal waiting time.
- The demand and related costs for expanded services as described in this bill are unknown. Insurers would have to assess the impact and build the added costs into employer premiums, which would be done gingerly as we seek to balance essential benefits with the burden to employers.

We appreciate the intent of this bill and look forward to working with lawmakers to ensure that Hawai'i residents continue to have the health benefits they need and that coverage for them is affordable.

Testimony of  
John M. Kirimitsu  
Legal and Government Relations Consultant

Before:  
House Committee on Health  
The Honorable Della Au Belatti, Chair  
The Honorable Bernard Kobayashi, Vice Chair

February 2, 2017  
9:30 am  
Conference Room 329

**Re: HB 677 Relating to In Vitro Fertilization Insurance Coverage**

Chair, Vice Chair, and committee members, thank you for this opportunity to provide testimony on this bill relating to fertility rights of cancer patients.

**Kaiser Permanente Hawaii supports the intent of this bill but requests amendments.**

**Replace References to “Insured’s Dependent”**

On Page 2, Line 20; Page 3, Line 4; and Page 5, Line 10 and Line 15-16: Replace all references to “insured’s dependent” with “insured’s spouse/civil union partner dependent” to differentiate between adult versus child dependents.

**Delete Reference that Health Insurers “shall” Cover all Infertility Treatments.**

On Page 4, Lines 5-6; and Page 6, Lines 17-18: Delete “shall” and replace with “is” available under the insurance contract, so it reads as follows:

*“The patient has been unable to attain a successful pregnancy through other applicable infertility treatments for which coverage [shall] is available under the insurance contract . . . ”*

Note: [bracketed language is deleted] and underscoring language is added

Otherwise, this bill will require that health insurers “shall” cover every and all infertility treatments, i.e., the entire universe of infertility treatments.

Thank you for the opportunity to comment.

February 7, 2017

The Honorable Della Au Belatti, Chair  
The Honorable Bertrand Kobayashi, Vice Chair  
House Committee on Health

Re: HB 677 – Relating to In Vitro Fertilization Insurance Coverage

Dear Chair Au Belatti, Vice Chair Kobayashi, and Members of the Committees:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on HB 677, which would amend the requirements for mandatory insurance coverage of in vitro fertilization. HMSA would like to offer the following comments on this Bill.

HMSA certainly is aware and empathetic to the situations under which in vitro fertilization (IVF) procedures would be conducted. To that end, HMSA does not believe marital status should be a factor used in determining when this medical service is provided. Consequently, we support that specific provision of this Bill that eliminates reference to the term, “spouse” in Section 432:1-604, Hawaii Revised Statutes.

HMSA does, however, have concerns with other aspects of the Bill that we would like to bring to the Committee’s attention, for example:

- Section 4 could be interpreted to require plans to cover the diagnosis of infertility as a precursor to IVF. Any expansion of benefits could result in the plan incurring costs that could potentially impact the overall cost of our health plans.
- The Bill also removes the requirement that a member and spouse show five years of infertility and replaces it with a requirement that a member need only show one year (or six months) of infertility, depending on her age. Would this be a requirement for demonstrating infertility in the absence of the member having a particular medical condition associated with infertility such as endometriosis, DES, etc.? Changing the amount of time a member must demonstrate a history of infertility from five years to twelve months (or six months) could also be a concern with regard to the necessary time within which OB/GYNs and fertility specialists would accurately diagnose infertility.
- Consider amending Section 5 of the bill to change the effective date to apply to all policies, contracts, plans, or agreements issued or renewed in the State after July 1, 2018; this will ensure that that plans and providers have suitable time to implement and operationalize any proposed changes.

Thank you for allowing us to testify on HB 677.

Sincerely,



Mark K. Oto  
Director, Government Relations.



TIM VANDEVEER  
Chair  
MARIE STRAZAR  
Vice Chair

MARGARET WILLE  
SEAN SMITH  
Legislation Committee Co-Chairs

February 2, 2017

Representative Della Au Belatti, Chair  
Representative Bertrand Kobayashi, Vice Chair  
House Committee on Health

**Submitted On Behalf of the Democratic Party of Hawai'i**

The Democratic Party of Hawai'i (DPH) offers the following **comments on HB 677**.

DPH appreciates the fact that this bill seeks to establish equal access to in vitro fertilization (IVF) insurance for women regardless of marital status. However, DPH is concerned that this bill a) does not also require equal coverage for same sex couples; and b) contains religious exemption language in the preamble. DPH believes the better bill is HB 664. That bill would ensure equal coverage for both unmarried women and same sex couples. This is something DPH has identified as a legislative priority for 2017. DPH has submitted testimony in support of HB 664 separately.

Mahalo for the opportunity to testify on this bill.

Respectfully submitted,

Tim Vandever  
Chair of the Democratic Party of Hawai'i

/s/ Marie (Dolly) Strazar  
Vice Chair of the Democratic Party of Hawai'i

/s/ Margaret Wille  
/s/ Sean Smith  
Legislative Committee Co-chairs

kobayashi2 - Jessi

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From: mailinglist@capitol.hawaii.gov  
Sent: Tuesday, January 31, 2017 11:00 PM  
To: HLTtestimony  
Cc: mgolojuch@hotmail.com  
Subject: Submitted testimony for HB677 on Feb 2, 2017 09:30AM

**HB677**

Submitted on: 1/31/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Michael Golojuch Jr	LGBT Caucus of the Democratic Party of Hawaii	Oppose	Yes

Comments: The LGBT Caucus opposes HB 677 in its current form as it leaves out LGBT couples and adds in a religious exemption clause that is not needed.

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Sent: Tuesday, January 31, 2017 9:36 PM  
To: HLTtestimony  
Cc: annsfreed@gmail.com  
Subject: Submitted testimony for HB677 on Feb 2, 2017 09:30AM

**HB677**

Submitted on: 1/31/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Ann S Freed	Hawaii Women's Coalition	Comments Only	No

Comments: Given the "religious exemption" clause it seems that insurance companies might find it easy to discriminate against LGBTQ and single women. We prefer HB664

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## Hawai'i LGBT Legal Association

February 2, 2017

TO: House Committee on Health

FROM: Hawai'i LGBT Legal Association

RE: **Comments on HB 677**

Chair Belatti, Vice Chair Kobayashi, and members of the committee:

The Hawai'i LGBT Legal Association ("HLLA") is a voluntary professional organization of Hawai'i lawyers, legal workers and law students dedicated to the fair and just treatment of the LGBT community. HLLA offers the following comments on HB 677.

The purpose of HB 677 is to ensure that Hawai'i's in vitro fertilization (IVF) insurance mandate requires equal coverage for women, regardless of marital status. HLLA appreciates the intent of the bill but believes it does not do enough to address the IVF insurance needs of same sex couples. HLLA believes HB 664 is the better bill as it would ensure equal coverage for both same sex couples and unmarried women.

Thank you for the opportunity to testify on this bill.

Sincerely,

Nick Kacprowski, Co-President  
Kaliko'onalani Fernandes, Co-President  
Hawai'i LGBT Legal Association



# ADVANCED REPRODUCTIVE MEDICINE & GYNECOLOGY



February 1, 2017

**LATE**

Dear Honorable Committee Chair and Committee Members:

This letter is in **SUPPORT** of HB 677.

Approximately 15% of the US population has difficulty conceiving and are given the diagnosis of infertility. For many people with infertility, the dream of having a family will never be realized. The 85% of the US population without infertility are indeed very blessed but often do not realize how blessed they truly are.

Infertility treatments are no longer experimental or taboo. Infertility treatments are no longer kept secret from friends and family. These treatments are the Standard of Care for treating infertility. Over 7- million babies have been conceived using In Vitro Fertilization and many many many more millions of babies have been born using other infertility treatments.

There are many etiologies for infertility. Some are easily diagnosed and treated and others require more advanced technologies. I have been lucky enough to practice in two other states with mandated infertility coverage (Maryland and New Jersey). In those states, patients are able to progress from lesser infertility treatments such as ovulation induction and artificial insemination to In Vitro Fertilization. As an infertility provider, I have seen first hand that the type of coverage that is outlined in HB677 offers patients the greatest chance to achieve their dream of having a family.

Not everyone has success with infertility treatments but for those who are successful –This is truly a gift of life! Thanks to infertility treatment I am a proud parent of 2 boys and 1 girl. My wife and I underwent multiple infertility treatment cycles prior to doing In Vitro Fertilization (IVF). Our first two IVF cycles were unsuccessful and it was not until the third cycle that we had success. We were lucky! Not only because we were successful but because we had the ability to continue to attempt treatments until we were able to conceive. Every day I look at my two boys and I am thankful to all of those healthcare providers who helped make our dreams come true.

As an infertility provider, I see myself in my patients. I understand their hopes and dreams. I understand their despair when not successful. Through my many years of training and practicing, I also understand that many of my patients would achieve their dream of having family if they were allowed to continue treatment.

**I fully and enthusiastically support HB 677 to allow for expanded applicability for fertility services.** Without it, many of our friends and families will not be able to experience the privilege of having a family –a privilege that many without infertility take for granted.

Sincerely and Mahalo,

John L. Frattarelli, M.D., HCLD  
Reproductive Endocrinology and Infertility  
Advanced Reproductive Medicine & Gynecology of Hawaii, Inc.  
&

Fertility Institute of Hawaii  
1401 South Beretania Street, Ste 250, Honolulu HI 96814  
[www.IVFCenterHawaii.com](http://www.IVFCenterHawaii.com)



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February 2, 2017

The Honorable Della Au Belatti  
Chair, House Health Committee  
Hawaii State Capitol, Room 402  
Honolulu, HI 96813

Re: HB 664 and HB 677

Dear Chairwoman Belatti and Members of the Health Committee:

As the President & CEO of RESOLVE: The National Infertility Association, a nonprofit that represents men and women all over the country who face fertility problems, we support HB 664 and HB 677.

On behalf of the over 28,000 Hawaiians who are trying to overcome the disease of infertility and have children, we urge the Health Committee to pass these bills, which update Hawaii's law providing coverage for in vitro fertilization (IVF).

The updates are discussed below:

- 1. Removing the five-year waiting period.** The American Society for Reproductive Medicine (ASRM), which is the professional society in this field, defines infertility as the failure to conceive after one year (12 months) of intercourse; earlier evaluation may be justified after six months for women over the age of 35. Hawaii's old requirement of five years is obviously much longer. Waiting five years, however, can materially hurt a woman's chance of conceiving with IVF, because female fertility is time sensitive and beginning around age 32-35, declines quickly.

Hawaii's five-year waiting period is by far the longest waiting period in any of the laws mandating infertility insurance in this country. This bill will bring Hawaii's law in step with other states. And, it will help infertility patients obtain needed treatment on a timely basis.

2. **Eliminating the requirement that only the spouse's sperm may be used.** It makes sense medically to cast off this requirement because more than a third of infertility is caused by "male factor," that is, a problem with the man's sperm. Some husbands may also be carriers of a sex-linked disease. If pregnancy can't be achieved with a husband's sperm, then patients should be able to use sperm from a donor. Also, same-sex couples and unmarried women may need donor sperm to have a family. The proposed change in the bills will help Hawaiian citizens in these circumstances, too.

The updates are straightforward: they will help bring Hawaii's law in step with current practice; they improve the quality of care; their goal is equality and non-discrimination; and they are pro-family. We hope you will vote to pass HB 664 and HB 677.

On behalf of people with infertility who are trying to build families, we support this legislation and urge you to pass it.

Respectfully submitted,

A handwritten signature in black ink that reads "Barbara Collura". The signature is written in a cursive, flowing style.

Barbara Collura  
President & CEO

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Birmingham, Alabama 35216-2809  
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February 2, 2017

Honorable Della Au Belatti  
Chair, House Health Committee  
Hawaii State Capitol, Room 402

**LATE**

Dear Chairwoman Belatti and Members of the Health Committee:

On behalf of the American Society for Reproductive Medicine (ASRM) and the Society for Assisted Reproductive Technology (SART), we are writing to express support for the intent of HB 664 and HB 677.

ASRM is a multidisciplinary organization of nearly 8,000 professionals dedicated to the advancement of the science and practice of reproductive medicine. Distinguished members of ASRM include obstetricians and gynecologists, urologists, reproductive endocrinologists, embryologists, mental health professionals and others. SART is an organization of nearly 400 member practices performing more than 95% of the assisted reproductive technology (ART) cycles in the United States. SART's mission is to set and help maintain the highest medical and professional standards for ART. SART works with the ASRM to create practice guidelines and minimum standards of care. SART is also actively involved in the collection of data outcomes from its member programs.

Infertility is a disease of the reproductive system that impairs one of the body's most basic functions: the conception of children. In the United States, infertility affects about 7.3 million women and their partners, or about 12 percent of the reproductive-age population. Due to the myriad of causes of infertility, the numerous implications of the disease, and the devastating effect of the diagnosis, it is vitally important that policymakers work to make combating infertility a priority. As the medical specialists who present treatment options for patients and perform procedures during what is often an emotional time for them, ASRM recognizes how important a means to addressing their medical condition can be for those hoping to build their families.

The State of Hawaii has also recognized the importance of requiring insurance coverage for the treatment of this disease, that recognition first made in 1989. HB 664 and HB 677 together would correct shortcomings in the existing statute. We are pleased, Chairwoman Belatti, that you have introduced these bills and we applaud your leadership on this issue.

Hawaii's insurance code requires that certain health plans cover the cost of IVF, but historically this has been available only to married couples and has excluded coverage when donor sperm is necessary. This has closed the door on IVF coverage when the infertility diagnosis is due to a severe male factor problem. When the husband has no sperm, or a very poor semen analysis, or when there is a genetic problem which could be inherited from the male, donor sperm is a valid consideration. Severe injury to the male reproductive system can result in the absence of sperm. Sadly, these types of injuries became all too common in wounded soldiers due to the type of warfare used in our recent military conflicts.

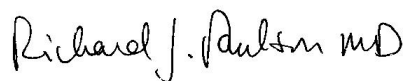
Approximately 10% to 15% of men of reproductive age cannot produce sperm. This may be due to a multitude of causes that prevent sperm from reaching the place it needs to go for reproduction to occur. In certain male factor diagnoses, the couple must be informed of the potential associated genetic abnormalities in the sperm and counseled about the option of donor sperm. To be counseled, but not be permitted to select donor sperm as a family building option, is inappropriate. For these medical reasons, it is important that the use of donor sperm be permitted under the Hawaii insurance code.

For equity reasons, it is important, as well. The existing statute does not afford same sex married couples diagnosed with infertility access to the IVF benefit. HR 664 recognizes the discriminatory nature of the statute and allows the use of donor sperm by these couples.

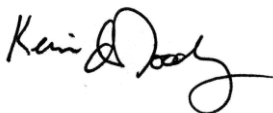
Finally, the existing statute requires infertile patients to wait four years longer than is medically recommended before they can seek reimbursable treatment of infertility. ASRM defines infertility as the failure to achieve a successful pregnancy after twelve months or more of regular unprotected intercourse. Earlier evaluation and treatment may be justified based on medical history or physical findings and is warranted after six months for women over the age of 35. Because fertility declines with age, the chance for success of IVF is largely dependent on the age of the female patient. These bills remove the five year wait requirement to reflect the medical definition of infertility

ASRM urges the members of the House Health Committee to pass HB 664 and HB 677.

Sincerely,



Richard Paulson, MD  
President, ASRM



Kevin Doody, MD  
President, SART

kobayashi2 - Jessi

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From: mailinglist@capitol.hawaii.gov  
Sent: Wednesday, February 1, 2017 8:11 AM  
To: HLTtestimony  
Cc: ashley.decoligny@gmail.com  
Subject: \*Submitted testimony for HB677 on Feb 2, 2017 09:30AM\*

**HB677**

Submitted on: 2/1/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Ashley de Coligny	Individual	Oppose	No

Comments:

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**From:** [mailinglist@capitol.hawaii.gov](mailto:mailinglist@capitol.hawaii.gov)  
**To:** [HLTtestimony](#)  
**Cc:** [mikegolojuch808@gmail.com](mailto:mikegolojuch808@gmail.com)  
**Subject:** Submitted testimony for HB677 on Feb 2, 2017 09:30AM  
**Date:** Tuesday, January 31, 2017 5:09:31 PM

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**HB677**

Submitted on: 1/31/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Mike Golojuch	Individual	Oppose	No

Comments: I strongly oppose HB677. Although I am speaking as an individual, as a member of State Central Committee of the Democratic Party, this bill does not conform with previous resolutions passed by the Democratic Party on this subject and is not in keeping with our Platform. It does not provide equality for all couples.

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Sent: Wednesday, February 1, 2017 11:08 AM  
To: HLTtestimony  
Cc: ds.pups08@gmail.com  
Subject: \*Submitted testimony for HB677 on Feb 2, 2017 09:30AM\*

**HB677**

Submitted on: 2/1/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Dawn Tanimoto	Individual	Support	No

Comments:

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**HB677**

Submitted on: 2/1/2017

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<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Mary Smart	Individual	Oppose	No

Comments:

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Sent: Wednesday, February 1, 2017 5:01 PM  
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Cc: hiabbybrown@gmail.com  
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**HB677**

Submitted on: 2/1/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
AbigailAu	Individual	Support	No

Comments: I support HB677. the language in the bill better reflects the best medical practice when it comes to IVF Abigail Au 82-6065 Mamalahoa Hwy. B-302 Captain Cook, HI 96704

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Cc: andresyg@hawaii.edu  
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**HB677**

Submitted on: 2/2/2017

Testimony for HLT on Feb 2, 2017 09:30AM in Conference Room 329

<b>Submitted By</b>	<b>Organization</b>	<b>Testifier Position</b>	<b>Present at Hearing</b>
Andres Gonzalez	Individual	Oppose	No

Comments:

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