

Testimony to the Senate Committee on Health and Committee on Commerce and Consumer Protection Friday, February 6, 2015 at 1:15 P.M. Conference Room 414, State Capitol

RE: SENATE BILL 787 RELATING TO THE AUDITOR

Chairs Green and Baker, Vice Chairs Wakai and Taniguchi, and Members of the Committees:

The Chamber of Commerce of Hawaii ("The Chamber") **supports** SB 787, which appropriates funds to the auditor to conduct a study on the effects of requiring insurers to cover infertility procedures.

The Chamber is the largest business organization in Hawaii, representing over 1,000 businesses. Approximately 80% of our members are small businesses with less than 20 employees. As the "Voice of Business" in Hawaii, the organization works on behalf of members and the entire business community to improve the state's economic climate and to foster positive action on issues of common concern.

With the introduction of various bills to increase mandated coverage for fertility procedures, we believe that asking the auditor to review this issue is both a good way to get an objective perspective. We look forward to being part of the discussion and working with the legislature, auditor, and other stakeholders on this issue.

Thank you for the opportunity to testify.



February 6, 2015

The Honorable Josh Green, M.D., Chair Senate Committee on Health The Honorable Rosalyn H. Baker, Chair Senate Committee on Commerce and Consumer Protection

Re: SB 787 – Relating to the Auditor

Dear Chair Green, Chair Baker and Members of the Committees:

The Hawaii Medical Service Association (HMSA) appreciates the opportunity to testify on SB 787 which would require the State Auditor to examine the social and financial impact of requiring health insurers to provide infertility procedure coverage. HMSA supports this Bill.

HMSA certainly is aware and empathetic to the situations under which the procedures would be conducted, and we do offer a one-time only coverage for in-vitro fertilization (IVF) procedures. In seeking to expand the coverage level, other legislation before this Committee raises (SB 789) issues that need to be clarified. For example:

(1) If three in vitro fertilization (IVF) procedures are performed under coverage by one plan and the member transfers to another plan, would the individual be eligible for three additional IVF cycle procedures in the new plan?

(2) If a woman has a successful IVF procedure resulting in a live birth, would she still be eligible for two remaining procedures?

(3) It the law provides for IVF insurance coverage equality for women who are diagnosed with infertility. This suggests that the woman would not have previously had a child. If a woman has had a child, it is unclear whether she could be diagnosed with infertility by meeting the requirement of "failure to achieve a successful pregnancy after twelve months or more of appropriate, timed unprotected intercourse or therapeutic donor insemination for women thirty-five years or younger or six months for women over thirty-five years."

There also are cost considerations. A single IVF attempt, including drugs, cost between \$17,000 and \$18,000. And, physician services for the procedure cost between \$4,000 and \$5,000 per attempt.

Given these concerns we believe it appropriate for the State Auditor to be directed to review the impacts of an IVF coverage mandate.

Thank you for allowing us to testify in support of SB 787.

Sincerely,

Jennifer Diesman Vice President, Government Relations