

Advocacy Committee Agenda

3/1/23

Join Zoom Meeting

<https://us06web.zoom.us/j/82616546212?pwd=VVN3ZFkxbVRNWXAxZWFRaWtBxUnE4Zz09>

Meeting ID: 826 1654 6212

Passcode: 442031

Present: Catherine Tucker, Kate LeBlanc, Beth Seniw, Janene Oleaga.

State legislative updates sent by email 3/1/2023:

Vermont is now the last state in New England to pass a fertility insurance law so we are working proactively there. The House version of the fertility insurance legislation in Vermont has been introduced ([H.369](#)). The Senate version is [S.63](#). We are grateful that the House version includes fertility preservation as a required benefit (it is optional in the Senate bill, which is of course not what we wanted).

Maine's fertility insurance bill was signed into law in May 2022 and will take effect January 1, 2024. The state still needs to do rulemaking to outline the covered benefits more specifically, so we have asked to be involved in this process. Governor Janet Mills is concerned that Maine will have to defray costs due to the ACA provision so she has put 3.8M in her state budget for this. Kate will testify virtually in support of this appropriation.

We are part of a campaign in Connecticut to update the existing infertility statute there to make it more inclusive.

In New Hampshire we are supporting bill for state to conduct a cost study related to expanding their fertility law to be more LGBTQ inclusive and another bill to update the state's parentage law.

We are supporting multiple bills in [Massachusetts](#).

There are also a couple bills in Rhode Island (re: embryo storage safety and PGD coverage).

- Housekeeping
 - a) Kate
 - b) SOPs - RNE created standard operating procedures for standing committees. Need to get invites, agendas, reminders, and meeting minutes sent out and posted.
 - c) Meeting Invites/Reminders-Kate
 - d) Agenda to Emily/Kate

- e) Repurposing-Dobbs panel-Kate is going to add this panel to the YouTube page.
- f) Report to Board - 2022 accomplishments and 2023 goals
 1. Committee 2022 outcomes: monthly meetings, 1 member from each New England state, Dobbs panel for Resolve conference.
 2. 2023 goals: (1) Momentum toward policy progress in some New England states relative to fertility and family building (committee sponsors, coalition support, bipartisan support, passage through key committees), (2) Publish at least 4 blogs and 2 magazine articles, (3) Recruit replacement committee members to represent each NE state, (4) Host one in person advocacy committee retreat.
- Discussion of committee activities
 - a) Blogging
 1. Blog posts once every two months
 1. Kate-mental health perinatal & postpartum (still in development but tabled pending results of grant funding request)
 2. Next topic: Vermont fertility law
 - b) Magazine article? Catherine will write about self-advocacy.
 - c) NH Insurance Subcommittee/Task Force: Will recruit on Facebook and other sources to find individuals who have experienced denials. Fertility Within Reach and Resolve NE interns will support.
 1. Members: ?
 2. Meetings: ?
 - d) Self-Advocacy
 1. Insurance - tabled for next meeting.
 - e) Legislation
 1. MA
 1. Parentage/MPA
 2. Pregnancy Loss
 3. Paid leave for pregnancy loss/failed fertility treatment/disrupted adoption
 2. NH
 1. Expansion of insurance coverage law to same-sex couples, single persons--cost study-passed Senate Committee and full Senate on a voice vote, now goes to House.
 - Cost assessment for LGBTQ+ and single individuals to get coverage immediately under fertility law. Finances will be an important component for this to pass.
 - Cost study got through Senate committee and Senate. Now going to house.
 - Maine cost study made some faulty assumptions about NICU costs/multiple births from fertility

treatment that we don't want them to replicate in NH.

2. Parentage: Technical Corrections bill & Affidavits of Parentage-in committee
3. Abortion bills-in committee
4. polycystic ovary syndrome awareness-Executive Departments and Administration-inexpedient to legislate
3. CT
 1. FACT Campaign
 - Consensus that bill will include both Medicaid and private insurance. Medicaid may come out of the bill ultimately.
 - Now the bill doesn't include private insurance or Medicaid to cover donor conception in certain circumstances which is a shortcoming and likely impacts partner support for the bill. Kate will send the bill text to the committee for review and discuss potential changes at upcoming internal meeting.
4. RI
 1. Infertility insurance law is outdated
5. VT
 1. Insurance coverage law
 - Kate will testify at the "walk through" for finance committee to review the bill on Friday 3/3. Testimony is invite only.
 - Kate will push back against 2019 cost study that was done that includes maternity care costs increase.
 - Focusing on the House version of the bill because it has fertility preservation as a required benefit.
 - Next step will be a big push for advocates to contact legislators once the bill progresses.
 - Still need to contend with the ACA mandate defrayal provision that is being debated in other states (like ME)
 2. Protecting providers of reproductive health care and gender affirming care [Bill Status H.89 \(vermont.gov\)](#)
6. ME
 1. Rulemaking for insurance coverage law
 2. Costs for individual plans
 - \$3.8 million in Gov's budget for cost defrayal if necessary. Appropriations hearing 3/1 and hopefully the money will be included in the final budget and it will sit in reserve but will not be proactively paid by the state. If not spent on this money would go back to general fund.

f) Long-Term Goals

1. Keeping fertility treatment accessible despite abortion restrictions
2. Insurance reforms
3. Paid leave for fertility care/loss
4. Helping people to advocate for themselves as fertility patients/modern family builders
5. Usage of appropriate forms
6. Advocating for ungendered language in fertility care/forms
7. Teaching of infertility, same sex reproduction (see what was used in ME), Kate to ask Kayla at planned parenthood