



February 2, 2022

Dear Chair Patterson, Vice Chair Kennemer, and members of the committee,

My name is Kalpana Krishnamurthy from Forward Together Action and I'm testifying today in support of SB 1530's -4 amendments. Without the -4 amendment, the legislation as proposed will exacerbate disparities between Oregonians -- creating a two tiered system of reproductive healthcare that we fought so hard to end in 2017.

Forward Together Action works with Black, Indigenous and other women of color and nonbinary folks of color to ensure that all families have the rights, recognition and resources they need to thrive. We work on issues of healthcare and reproductive healthcare because we believe that the ability to form the family you want is a fundamental right that belongs to all Oregonians.

As you know, infertility is a common reproductive healthcare issue affecting 1 in 8 women. Fertility issues also impact LGBTQ, trans and nonbinary individuals, though research is nascent. Infertility is often a treatable medical issue--but the cost makes it too far out of reach. Today, 15 states require insurance companies to cover fertility treatments, but none of these states require coverage for those who receive public insurance. This is where Oregon can help lead the way.

Unfortunately, SB 1530 takes us backward. By refusing to cover IVF treatment for the nearly 1 in 3 Oregonians on the Oregon Health Plan, this legislation is saying that OHP recipients don't deserve to access the means to create the families that those on private insurance do.

Throughout US history, the fertility and childbearing of poor women and women of color has not been valued equally to the fertility and childbearing of white women. This stratified reproduction means that medical technology has been used to enhance the fertility of primarily married, rich, white women, not that of poor Black and brown women. Meanwhile, Black and Indigenous women of color and nonbinary folks of color experience infertility and additional systemic barriers to having the families they want. In fact:

- Studies suggest that Black women are twice as likely as white women to have fertility problems but are far less likely to seek or receive infertility treatment.⁵
- Only 8% of Black women and 7.6% of Latina women between the ages of 25-44 seek medical help to get pregnant compared to 15% of white women.⁶

In 2017, the legislature passed the Reproductive Health Equity Act to ensure that all Oregonians, regardless of their gender, insurance type, or documentation status would be treated fairly in accessing reproductive healthcare services ranging from birth control to

⁵ [Infertility and Impaired Fecundity in the US](#), 1982-2010. Data from the National Survey of Family Growth.

⁶ [Infertility. Endured Through a Prism of Race](#). Tanzina Vega. New York Times. April 25, 2014.

abortion. We said that a two tiered healthcare system for reproductive healthcare in which some Oregonians would have access to care thru insurance and others would have to pay out of pocket was not okay.

IVF, IUI, and fertility services are a critical part of reproductive healthcare. We should figure out how to cover these services. And we will need to figure out how to pay for them. While we understand that the federal government may not cover the cost of all of these services, they will likely cover some. We need to engage in a conversation led by legislators about how to create a concrete and specific plan for what can be covered by the federal government through waiver, and we need conversations with OHP recipients and care providers.

In addition, we are concerned about the religious exemptions in the original bill. We continue to oppose expanding religious exemptions and carve outs for specific insurers and the amendments. Though the language is better in the -2 and -3 amendments that attempt to deal with the religious healthcare provider carve out, we believe far more consideration is needed..

In closing, let's slow down and do this right. Let's live into the values of RHEA. Let's actually practice leaving no Oregonians behind when it comes to reproductive health care.

Thank you for your time.