



February 27, 2023

Oregon Health &
Science
University

Department of
Obstetrics &
Gynecology

Division of
Reproductive
Endocrinology &
Infertility

Mail Code: CH10F
3303 S. Bond Avenue
Portland, OR 97239
☎ 503 418-3700
✉ rubine@ohsu.edu

Elizabeth S. Rubin MD
Fellow, Division of REI,
Department of Ob/Gyn,
OHSU

Madam Chair Senator Patterson and Members of the Committee:

My name is Dr. Elizabeth Rubin. I live in Portland and I am an Obstetrician-Gynecologist at Oregon Health & Science University where I am a subspecialty fellow who cares for patients with infertility. I would like to submit this written testimony to supplement my verbal testimony given on February 27th, 2023 in support for SB 491.

SB 491 is critically important to the appropriate medical care for Oregon residents. This bill would not only support insurance coverage for the 10-15% of Oregonians suffering with infertility, it will also make fertility preservation affordable for patients with cancer. Additionally, it will aid family building in countless LGBTQ individuals, a group that is disproportionately impacted by the costs of family building medical care.

I would like to tell you about my patients Danielle and Kevin, who are a perfect example of the ways in which non-coverage of fertility-related services can have devastating impact of people's lives. Danielle and Kevin were patients of mine; a lovely couple in their 30s who really wanted to have a baby together. Kevin is transgender man who had wanted to freeze eggs years ago, before his gender affirming treatment, but didn't because it was not covered by his insurance plan, and he could not afford the thousands of dollars for the cost out of pocket. Thus, the couple was planning to have Danielle conceive. However, their insurance didn't even provide coverage for the most basic LGBTQ family building treatments, such as medically supervised donor sperm insemination. So, the couple delayed having kids for a couple years, to try to save up the money. They thought they had more time. But then, something shocking happened: Danielle was diagnosed with breast cancer. Her oncologist recommended she consider fertility preservation, as her chemotherapy would cause infertility. Danielle was a great candidate, and she had just enough time before chemotherapy to do embryo freezing if we started right away. Unfortunately, the couple could not afford the \$15,000-20,000 for embryo freezing, and at this point they did not have time to save more money or navigate alternatives. Danielle's life was in danger if she didn't get treatment within weeks. Ultimately, Danielle made the heartbreaking decision to proceed with chemotherapy without fertility preservation, and to forego future biological children, simply because of cost. Our current system repeatedly failed this couple. Not only were they *both* denied access to medically indicated fertility preservation, but had their insurance covered basic LGBTQ family building treatment Danielle could have had a baby years before her cancer diagnosis, as they had planned.

It is because of patients like Danielle and Kevin that I strongly support legislation to require insurance companies to cover infertility treatment, medically indicated fertility preservation, and LGBTQ family building services. This couple had to let go of their dream to have biological children simply because they did not have access to the right insurance coverage. I respectfully ask that you pass SB 491 out of the committee on behalf of them and the many Oregonians struggling to build families.

Thank you for your consideration,

A handwritten signature in black ink that reads "ERubin".

Elizabeth Sara Rubin, MD
Fellow, Reproductive Endocrinology & Infertility