Dear Chair Donovan and distinguished members of the House Committee on Health and Human Services:

My name is Dr. Andrey Dolinko, I am a constituent from North Kingstown, RI. I am a Reproductive Endocrinology & Infertility Physician at the Women & Infants Fertility Center, Assistant Professor at the Warren Alpert Medical School at Brown University, and a member of the New England Fertility Society and the American Society for Reproductive Medicine.

I am writing to testify in strong support of House Bill No. 5629 (Rep. Alzate). This bill will improve access to family building health care by aligning fertility health care insurance coverage with the medical standard of care and the definition of infertility as outlined by the American Society for Reproductive Medicine. This will allow more Rhode Island residents to have the opportunity to build their family, appropriately including and expanding coverage to members of the LGBTQ+ community and single people. Fertility health care is essential to building families.

I have dedicated my professional career to helping people from all walks of life build their families. One in seven women of reproductive age have impaired fertility. One in eight men struggle with infertility. Every day, I see patients in my office who desperately want to build their families, who have been trying to build their families, and have not been successful for 6 months, 1 year, 3 years, sometimes 10 years. They come into my office asking for help and worrying about how they will pay for it. Every day I hear people say – "I've heard IVF is really expensive."

Just last week, I saw a young woman come with her female partner asking how they could build their family. In addition to walking them through the medical and psychosocial aspects of conceiving with the use of donor sperm, I had to tell them that their insurance would not cover fertility treatment for them — or at least not right away. In addition to worrying about how they would choose a sperm donor, they had to think whether or not they would have the money to pay for the donor sperm and the treatments for up to 6 months before insurance would kick in. Some insurances require even longer periods before coverage starts. With the cost of donor sperm starting at about \$1200 per sample, that can quickly rise to close to \$10,000!

Another patient in my practice right now is a woman in her late 30s. She has always wanted to be a mother, but to date has not found the right partner, so she set out on a journey to build her family herself. During her evaluation, we discussed that based on her age, her best chances of success would be to go directly to *in vitro* fertilization (or IVF) with the use of donor sperm. Yet her insurance would not pay for IVF until she had completed 6 cycles of intrauterine inseminations. She unfortunately has not conceived after these cycles. That's 6 vials of donor sperm wasted. That's 6 months of her life. It is 6 extra months of her not becoming the mother that she wants and deserves to be.

Although we are already lucky that Rhode Island law requires private insurance providers to cover fertility health care, the definition currently being used is outdated and is set up primarily in reference to heterosexual intercourse. Thus single individuals and LGBTQ+ families, as I just described, are often excluded completely or at least from timely coverage. And the out-of-pocket costs are often prohibitive, making fertility health care not accessible for most people. According to the World Health Organization, "individuals and couples have the right to decide the number, timing and spacing of their children. Infertility can negative the realization of these essential human rights." Let me repeat – it is every person's RIGHT to decide on how and when they will build their families.

I support H5629 because access to family-building health care such as IVF is essential health care for the people in our state. My life's mission is to help my patients through their fertility struggles and help them have children, regardless of who they are or how much they earn. Our state must do everything that it can to protect access to fertility health care for the people who call Rhode Island home. I urge the committee and the legislature to vote in favor of H5629.

Thank you for your time and consideration.

Andrey V. Dolinko, MD 101 Dudley St Providence, RI 02905