

CENTER *for* REPRODUCTIVE RIGHTS

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Via email: househealthandhumanservices@rilegislature.gov

Re: HB 5629, An Act Relating to Insurance – Accident and Insurance Policies

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

The Center for Reproductive Rights (the “Center”) submits this letter in support of An Act Relating to Insurance – Accident and Insurance Policies (HB 5629) and to encourage the Committee to report it out with a favorable recommendation.

The Center is a legal advocacy organization that uses the power of law to advance reproductive rights as fundamental human rights around the world. As part of our mission, we work to ensure that people’s reproductive autonomy and rights are protected such that all people can make decisions about their reproductive life, including whether to have children, when to have children, and how many children to have. To make this right real, all people without discrimination must have meaningful access to fertility health care that is available, accessible, acceptable, and of good quality.

Well-documented disparities in access to fertility health care reveal that people of color, people with low incomes, people with disabilities, and the LGBTQ+ community access fertility health care at disproportionately low rates. If enacted, HB 5629 would ensure more equitable access to fertility health care under Rhode Islands’ private insurance law, which as written often excludes single and LGBTQ+ individuals from eligibility for coverage, and which has contributed to inequitable access to care among Rhode Island’s residents. This is critical coverage given that the out-of-pocket costs of fertility health care, including but not limited to intra-uterine insemination, in vitro fertilization, and fertility preservation, is prohibitively expensive for most individuals and families. In particular, the Center applauds the bill’s inclusive and non-discriminatory infertility definition that would ensure coverage not only for couples with an infertility diagnosis, but also LGBTQ+ and single individuals. This definition reflects the diversity of Rhode Island’s residents and supports them in accessing the care they need to build their families.

If Rhode Island enacts HB 5629, it will follow a growing trend of states who have amended their fertility insurance laws to provide more equitable fertility health care coverage to their residents. HB 5629 also offers Rhode Island the opportunity

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to embrace the evolving landscape of family formation and expand access to the fertility health care its residents need to build their families. The Center emphatically encourages the House Committee on Health and Human Services to report HB 5629 out with a favorable recommendation.

Sincerely,

Karla Torres
Senior Human Rights Counsel
Center for Reproductive Rights