



The American College of  
Obstetricians and Gynecologists  
WOMEN'S HEALTH CARE PHYSICIANS

## **Testimony Re: H7940 (Rep Kislak) RELATING TO INSURANCE-ACCIDENT AND SICKNESS INSURANCE POLICIES**

April 9, 2026

### **Written Testimony on Behalf of the American College of Obstetricians and Gynecologists (ACOG) in Support of Rhode Island House Bill H7940**

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

My name is Melissa Russo, and I am speaking on behalf of the American College of Obstetricians and Gynecologists in strong support of House Bill H7940. I am testifying in strong support of House Bill H7940 (Rep. Kislak). This bill is important to support fair and equitable access to medically-necessary care for all Rhode Islanders. Bill H7940 prohibits discriminatory practices beyond claim denials to now include discriminatory plan designs and enrollment determinations and ensure accountability by requiring health care entities to provide a clear grievance process for enrollees who have experienced discrimination.

Rhode Island's current health insurance law lacks sufficient protection against discrimination - covering just race, color, or creed - leaving thousands of Rhode Islanders vulnerable. While federal civil rights laws have historically offered additional safeguards, recent federal actions have rolled back enforcement and weakened protections, creating significant gaps. For example, in May of last year, the Department of Health and Human services rescinded guidance that clarified that the Affordable Care Act's non-discrimination provisions prohibit discrimination based on sexual orientation and gender identity. Subsequent rulemaking and other agency actions have further limited access to gender-affirming care nationwide. It is now more critical than ever to ensure Rhode Islanders' rights and access to care are protected at the state level.

At the same time, the health insurance industry is changing rapidly, including widespread use of artificial intelligence (AI) in administering benefits. Over 84% of health insurers report using AI, and research shows these systems can produce discriminatory outcomes. Combined with rollbacks of federal civil rights protections, these developments underscore the urgent need for Rhode Island to take proactive measures to ensure residents can access medically necessary care fairly and equitably.

The proposed legislation would amend unfair discrimination statutes to encompass more protected categories and protect against additional forms of discrimination. Expand the protected categories to include actual or perceived: race; ethnicity; color; religion; national origin, including language; sex, including sex characteristics, sexual orientation, gender identity, gender expression, and pregnancy, childbirth or related medical conditions; age; disability; height; weight; or any combination

This federal administration has repeatedly failed to enforce civil rights protections and has actively pursued policies that dismantle safeguards. As a result, Rhode Islanders are increasingly at risk of being denied coverage, charged higher costs, or subjected to discriminatory health plan designs based on race, gender, sexual orientation, disability, age, or other personal characteristics. This legislation ensures that all residents receive fair and equitable access to medically necessary care, holds insurers accountable for discriminatory practices, and protects Rhode Islanders where the federal government refuses to act.

This bill would prohibit service denial secondary to insurer's failure to accommodate non-English speakers, charging higher premiums or out-of-pocket costs based on sex or gender, and denial of routine, preventative care services due to "gender specific" considerations.



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Current protections against discrimination in health insurance are limited: Rhode Island's law only covers race, color, or creed, leaving thousands vulnerable. Federal non-discrimination protections in health care are being rolled back or unenforced. Notably, in May 2025, the Department of Health and Human Services rescinded guidance clarifying that the Affordable Care Act prohibits discrimination based on sexual orientation and gender identity. Subsequent rulemaking and other actions from HHS have further limited access to care nationwide. Health insurers are increasingly using artificial intelligence and algorithms to administer benefits; over 84% report using AI, which can produce discriminatory outcomes if left unchecked, including on the basis of race and sex.

In conclusion, Bill H7940 supports fair and equitable access to medically-necessary care for all Rhode Islanders. It aligns Rhode Island with other states that have modern, comprehensive health insurance protections and holds insurers accountable where federal protections are absent or weakened with the current administration. I urge the committee and the legislature to vote in support of H7940 to provide residents of Rhode Island a clear path to seek remedies for discrimination insurance coverage of health care needs. Thank you for your time and consideration.

Melissa L. Russo MD  
Vice-Chair of Advocacy Committee in Rhode Island, District I ACOG  
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