Chairman Ruby and Members of the Committee:

I share my testimony in favor of HB 1282 as a person who has spent her life in our state, built my career serving the mental health of others in our state, and whom now needs you to advocate for coverage of one of my most essential medical treatments I have ever had: IVF I wanted to be a mom for decades, and raise my children in Fargo where I had grown up. I was diagnosed with breast cancer at age 32. Because of the nature of my treatment (chemotherapy, radiation, and surgery), fertility preservation was the only remaining route to secure a possibility of being a mother one day. My point being, that North Dakotas arrive at requiring fertility intervention for diverse, personal, and devastating circumstances, and our state's coverage of that should be tailored to meet the diverse medical needs of each of our residents.

I had cancer at age 32. I learned over the last 5 years that I am not alone in my early cancer diagnosis in our state. Because of the time sensitivity of my chemotherapy starting and my life being on the line without the treatment, I ended up doing fertility preservation before and after chemotherapy to secure more embryos for future use. These IVF treatments totaled \$130,000 to date. Having cancer made my situation different than someone with unexplained infertility. For this reason, having service limits versus dollar limits would more adequately meet the specific medical needs of each patient seeking services. Much like cancer, we need to tailor our treatments to the individual needs of each patient, and this bill would support that.

Please consider moving towards service limits versus dollar limits to support the needs of more North Dakota couples to becoming families, and vote in favor of HB 1282.

Sincerely,

Shauna M. Erickson-Abou Zahr

1/24/25