

Pederson Testimony - 2025

Hello!

My name is Kaydee Pederson. I am a constituent from Minot. I am writing to you in support of House Bill 1477. This is regarding fertility health benefits.

I was born with a genetic condition called Turner Syndrome. Turner Syndrome resulted in my ovaries not developing and a congenital heart condition. I've known for as long as I can remember that having biological children would not be in the cards for me.

When my husband, Matt, and I decided to look into our family building options, the reality of the cost was overwhelming. Since I don't have ovaries, we knew we would need to utilize IVF with donor eggs so my husband could have the chance for a biological child. Using a gestational carrier was brought up as a less riskier option due my heart condition.

Donor eggs and a gestational carrier are both extremely expensive options for the potential to grow a biological family.

Two sessions ago, a representative said on the house floor something along the lines of it is a choice to pursue fertility treatment and that the public shouldn't have to pay higher insurance premiums because of it.

Many people have children naturally every day, and some of them, at a great cost to the public in tax payer dollars via programs and financial assistance. Mandating access to coverage and care for fertility treatment is a small drop in the bucket price wise to the public.

Let me tell you as someone who does not have the biological means necessary to have children naturally that pursuing the medical help needed to grow my family certainly does not feel like a choice. When a new doctor tells you two weeks after having a D&C that they do not feel it is safe for you to carry a pregnancy because of your congenital heart defect and that gestational carrier is the route they recommend for your one remaining embryo, seeking fertility treatment certainly does not feel elective.

My particular infertility diagnosis is admittedly a worse case scenario cost wise. Most patients medical cases are simpler and could be made easier with proper access to care and coverage. Doctors end up medically gaslighting patients because insurance companies don't want to cover a medical condition, making it harder for a proper diagnosis.

By providing the access to care and coverage, insurance companies can actually SAVE money. Getting a proper diagnosis in a timely manner can help patients get the proper treatment needed, which then ultimately could mean treatment like IVF would maybe not be needed in some cases.

While our family vision was ultimately completed through adoption, it does not mean I no longer deal with an infertility diagnosis. I will have lifelong issues with hormone production and management that will require continuous medical care due to my lack of ovaries.

You are voted by your constituents like me to be the decision makers for our state. I implore you to vote yes on this bill for future North Dakota families. What the passing of this bill means is so much bigger than any one person, which is why I will continue to fight to make access to coverage a reality.

My name is Kaydee Pederson. Thank you for your time and consideration.