

2025 HOUSE HUMAN SERVICES

HB 1477

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

HB 1477
1/29/2025

Relating to fertility health care treatment rights; and to provide a penalty.

9:18 a.m. Chairman M. Ruby opened the hearing.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios, Rohr

Discussion Topics:

- Definitions
- Rights to infertility health care
- Proposed amendments related to Medicaid

9:19 a.m. Representative Hanson, District 44, introduced the bill and submitted testimony, #32329, #32330.

9:36 a.m. Doctor Stephan Christiansen, Physician, ObGyn, IVF, testified in favor.

9:50 a.m. Alyssa Braaten testified in favor and submitted testimony, #32230, #32231.

9:54 a.m. Courtney Koebele, Executive Director of the North Dakota Medical Association, testified in favor and submitted testimony, #32292.

9:55 a.m. Abbey Berger testified in favor.

9:58 a.m. Alexa Swanston testified in favor and submitted testimony, #32450.

10:00 a.m. Carly Sieverson testified in favor.

10:03 a.m. Emily Kuntz testified in favor.

10:05 a.m. Tara Harding testified in favor, #32398.

Additional written testimony:

#32392, #31310, #31369, #31380, #31389, #31390, #31394, #31411, #31414, #31448, #31557, #31562, #31614, #31666, #31712, #31812, #31873, #31895, #31912, #31943, #31966, #32032, #32085, #32104, #32179, #32216, #32227, #32228, #32229, #32240, #32244, #32254, #32281, #32332, #32352, #32352, #32363, #32368, #32377, #32378, #32406, #32421, #32436, #32437, #32451, #32457, #32464, #32466, #32487.

10:09 a.m. Chairman M. Ruby closed the hearing.

Jackson Toman, Committee Clerk

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 taxpayer 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.

1/24/25

I am writing to express my support for HB 1477 to protect fertility health care treatment for all North Dakota families. I have personally utilized some form of fertility health care in my family's journey to have children and I can't image our state taking away this right. I have many friends and family members that have experienced infertility and to be told you do not have an option available in the state would be awful and life altering. I strongly urge you to support this bill and protect all future families that need fertility health care.

Valerie Schwantes

Prepared Testimony of Shauna Erickson-Abou Zahr, M.S., LMFT

Testimony in Favor of House Bill 1477

Chairman Ruby and Members of the Committee:

I share my testimony in favor of HB 1477 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 protect one of the most sacred medical treatments of my life, which is saying something after nearly dying of breast cancer. I wanted to be a mom for decades and raise my children in Fargo where I had grown up. In 2019 I met my now husband, Dr. Abdallah Abou Zahr, an oncologist/hematologist who ended up literally saving my life. Weeks before we were set to marry in 2021, he found a mass in my breast. Unfortunately, days later our fears were confirmed, breast cancer at age 32. My dreams immediately halted, particularly my dream of motherhood.

My oncologist wanted to treat the cancer aggressively due to my age, which meant chemotherapy, surgery, and radiation, however she green lighted ONE round of IVF to try to get embryos prior to starting the chemotherapy that can cause infertility. The embryos we secured were testing and saved for after treatment, but the hope of what they could one day be (my children) was truly what got me through losing my hair, intensive treatments, and despair over cancer derailing my life. Imagining the highest graded embryo in my arms one day gave me reason to live, fight, and have hope through the uncertainty, hence why I named her "Nadia" (meaning hope) back when she was just a cluster of cells. Certainly, I knew she was a cluster of cells at that point, and not a baby, but the dreams of what she could be brought me so much peace. Fast forward to 2024, and Nadia debuted on the happiest day of my life in January, and has been nothing short of a miracle brought to us by modern medicine via IVF by the only fertility clinic we have in ND.

My message is that families end up having to utilize IVF because of unforeseen personal, diverse, and devastating complications in their lives. No one signs up for having to build a family in this intensive, expensive route but having access to IVF gives North Dakotans the greatest gift of all- opportunity to become parents, and that has to be protected. Had I not had access to local, high caliber fertility treatments, I wouldn't have been able to secure embryos before my life saving chemotherapy. IVF isn't some elective procedure, it is a necessary intervention to couples becoming families in our state. As a life long resident of our region, I know what North Dakotans invest in their community, and we need to protect their access to building families, however they and their doctor determine is necessary. And let me tell you with more pride than I have ever had over anything, If there is one thing this world needs, it is more medical miracles like my sweet "Hope" baby, Nadia.

Please consider protecting access to infertility services, and vote in favor of HB 1477.

Sincerely,

A handwritten signature in black ink, appearing to be 'SE', followed by a long horizontal line that tapers off to the right.

Shauna M. Erickson-Abou Zahr

1/24/25

Beth Anderson, Family Nurse Practitioner
301 Desiree Drive, Grand Forks, ND

Dear Honorable Members of the Legislature,

As a Family Nurse Practitioner, I strongly support HB 1478 and HB 1477, which protect patients' rights to contraception and infertility services. It is critical that patients have the ability to make informed healthcare decisions, without interference from the government. The right to access reproductive healthcare services, including contraception and infertility treatments, is essential for individuals to maintain control over their health, well-being, and future.

Government intrusion into a patient's medical care undermines the trust between providers and patients. Medical decisions should be made by healthcare professionals and patients, not by politicians. By passing HB 1478 and HB 1477, the legislature can ensure that North Dakotans have access to the care they need without unnecessary barriers or restrictions.

I urge you to support these bills and protect the rights of patients to receive essential care.

Sincerely,
Beth Anderson, FNP

Dear Committee Members,

My name is Theresia Peterson, and I am writing to express my strong support for HB1477, which is vital for ensuring access to infertility care and reproductive health services in North Dakota.

Infertility is a medical condition that affects 1 in 8 families, yet accessing care remains a significant challenge for many. The financial burden of treatments, combined with a lack of sufficient insurance coverage and regulatory barriers, leaves many individuals and families without the resources they need to pursue their dream of having children.

HB1477 addresses these challenges by safeguarding access to reproductive healthcare services. This bill ensures that families facing infertility can receive the medical care they need without unnecessary interference or restrictions.

We conceived our son via IUI after three years of infertility treatments. However, he was diagnosed with a rare genetic disease, Niemann Pick type C. Which is a life altering disease that takes away all body functions: ability to talk, walk, eat, organ functions, etc. The only way to ensure our future children don't suffer from this life altering disease is to utilize IVF. I urge you to vote **YES** on this critical bill.

Thank you for your time and consideration.

Sincerely,
Theresia Peterson
Trompson2010@gmail.com
701-403-3099

Dear Chairman and Members of the Committee,

My name is Michelle Nitengale, and I am a North Dakota resident, military spouse, and educator, speaking in support of HB 1477. This bill is critical in protecting the rights of individuals and families seeking fertility healthcare treatment.

In 2018 I married the love of my life. We dreamed of traveling and building our family. Four months later the pregnancy test read positive and we were over the moon. We made our first appointment for 6 weeks and three days before I ended up in the ER where the staff performed my first ultrasound, not in joy but in fear. That day we grieved loss one. In seven years of marriage, we have grieved eleven such losses. We have cried, screamed, raged, and then driven to Fargo for infertility treatment in a blizzard. We have postponed buying a house to pay for treatment. We have changed our lifestyle, learned how to self-administer injections, and have never given up. Every month we are in the doctor's office trying again but access is limited and the costs sky high. While we are blessed to have Tricare, it does not cover non-coital reproduction so everything is out of pocket, thus impacting our financial security.

As someone personally invested in this issue, I have seen firsthand how access to fertility treatments profoundly impacts families in our community. Infertility is a medical condition that affects approximately one in eight couples and one in four military families. Its physical, emotional, and financial toll can be overwhelming. For many, the hope of building a family depends on having access to affordable and comprehensive fertility care.

Unfortunately, the lack of guaranteed access to fertility treatments leaves many North Dakota families facing impossible decisions—choosing between pursuing treatment or facing insurmountable financial strain. By passing HB 1477, you will ensure that individuals and couples across the state have the legal protection and resources needed to make these deeply personal decisions without fear of discrimination or financial ruin.

This legislation is not just about access to care; it's about equity. As a state, we must prioritize the well-being of all residents by supporting their right to pursue fertility healthcare. It is a matter of fairness and compassion.

In conclusion, I urge you to vote in favor of HB 1477. This bill is a vital step toward ensuring that all North Dakotans have the right to access fertility healthcare and to build the families they dream of. Thank you for your time, consideration, and commitment to supporting the people of our state.



Michelle Nitengale

I urge you to vote for reproductive freedom and access to reproductive health care. Specifically DO PASS HB 1477 to protect access to fertility treatments. I've lived in North Dakota my whole life and throughout the past 10 years I've seeked medical reproductive treatments with the intent of getting pregnant.

With infertility disease increasing, I want North Dakota to be supportive of couples wanting to grow their families, more young families is good for North Dakota. It's strenuous enough facing infertility mentally, physically and financially, lets insure that fertility treatments are protected in North Dakota. Infertility is not just a medical condition it affects North Dakotans daily and impacts our future. Keep access to fertility treatments within our state so it is accessible with up to date techniques and technology to our North Dakota citizens.

IVF and reproductive services are good things; supporting the birth of babies, growing families, creating communities, making women moms and men dads. I dream of the day I get to become a mom. I feel grateful that I've had supportive doctors throughout my infertility journey with my fertility treatments including multiple IVFs. Though we still haven't had a successful full term pregnancy yet, I fully believe IVF is good, and have seen so many miracles born from IVF. It's important to protect access to reproductive medical care in North Dakota. We want great medical providers in North Dakota. Vote Do Pass for HB 1477.

Thanks,
Robin Holt
Grafton, ND

January 25, 2025

Support HB 1477 – Protecting Access to Infertility and Reproductive Care

Dear Committee Members,

My name is Casie Davis, and I am writing to express my strong support for HB 1477, which is vital for ensuring access to infertility care and reproductive health services in North Dakota.

Infertility is a medical condition that affects 1 in 6 families, yet accessing care remains a significant challenge for many. The financial burden of treatments, combined with a lack of sufficient insurance coverage and regulatory barriers, leaves many individuals and families without the resources they need to pursue their dream of having children.

My own family was only able to expand thanks to access to IVF and the wonderful doctors and health care professionals in the field. There are no words to express the impact my daughter has had on the lives of my husband and myself. But she is only here because of IVF. It is paramount that other families continue to have the opportunity to expand their families regardless of any possible legislation that might purposefully or inadvertently threaten it.

In an ideal world, a bill like HB 1477 wouldn't even be necessary. Unfortunately, it is becoming abundantly clear that reproductive healthcare **MUST** be legislatively protected. North Dakota families should not have to worry year after year if their access to family building care, like IVF, will be taken from them. HB 1477 addresses these challenges by safeguarding access to reproductive healthcare services. This bill ensures that families facing infertility can receive the medical care they need without unnecessary interference or restrictions.

By supporting HB1477, North Dakota can set an example of compassion and fairness in healthcare, giving hope to countless families who dream of growing their families. I urge you to vote YES on this critical bill.

Thank you for your time and consideration.

Sincerely,

Casie Davis
District 30
Bismarck

Re: HB 1477

Erin Lee, 6207 17th St N, Fargo, ND 58102

Human Services Committee Members:

Hi, my name is Erin Lee. I live in Fargo and work as a nurse practitioner at Sanford Health in the OB/GYN clinic. I will soon also be working at Sanford Reproductive Medicine (I did in the past from 2008-2015 and will be doing so 1 day/week again). I'd like to convey my support for HB 1477—protection for infertility services.

No couple wants to experience infertility. It affects somewhere around 15% of couples. Sometimes it is from a medical condition. Sometimes it is female factor; sometimes it is male factor. Or occasionally it is both. Some need help with ovulation medications, some need IUI (intrauterine insemination where sperm is placed into the uterus with a small catheter). And then, occasionally couples need IVF (in vitro fertilization where an egg is joined with a sperm in lab, to see if an embryo will grow (which doesn't always happen)).

I feel couples should have the opportunity to pursue infertility treatments and access to this. If they didn't have access in our state, they would possibly have to travel very far to receive services. Some might say, why don't they just adopt? Have you checked the price of adoption lately and how hard the process is? Some couples wait YEARS and never are asked. We need protections for infertility services so they can try on their own or with donor egg or donor sperm if needed.

I'm not going to list all of the reasons that people might need to pursue these treatments, just know that there are many. Living in an agricultural state, where many are farmers, one of the most common causes for low sperm counts is chemical use (farmers can often have lower sperm counts due to spraying their crops and the fertilizer that is applied). Why would you not consider letting them have access to insemination or IVF where some assistance could be provided so that person could have a biological child of their own? Or if they couldn't, that they could use a donor?

This is basic health care, and I believe it should be a personal right.

Please consider supporting HB 1477. I would also be happy to answer questions you have. You can email me at erinlee79@outlook.com or erin.lee@sanfordhealth.org.

Thank you for your time!

RE: Support of House Bill 1477

My name is Emily Lindquist. I am a North Dakota resident and intended parent through IVF. I am writing in support of House Bill 1477 written by Karl Hanson.

I am in support of HB 1477 because I believe everyone has the right to parenthood, regardless of how their baby is conceived or comes into the world. Below is my personal journey.

In 2021, we started trying to grow our family. We were naive to loss and assumed two pink lines meant we'd bring a baby home in about 8 months. We had our first two miscarriages that year. Doctors told us to just keep trying and that loss is more common than people think.

Early 2022, we lost our third baby. Doctors realized something wasn't right and began running a series of tests. From blood panels to screening for clotting factors to countless ultrasounds, nearly one hundred tests were conducted but nothing was uncovered as to why we can't stay pregnant. Our third baby was genetically tested as well, we learned she was perfectly healthy and there was no explanation for her death. We were told to try again.

In the fall of 2022, we lost our fourth baby. Genetic testing on him showed he didn't have any abnormalities that caused his death either. We completed genetic testing on my husband and me just in case there is something wrong with us that led to our miscarriages but still, we had no answers. So we tried again.

Spring of 2023, we lost our fifth baby. My doctor was out of ideas and referred me to another hospital, Sanford Reproductive Medicine, where we found the amazing team who I see now. Reproductive Endocrinologist Dr. Christina Broadwell and her team make my husband and me feel seen after everything we've been through. In my first round of tests at Sanford Reproductive Medicine, we found that I have Adenomyosis and Hashimoto's Disease—both of which increase the likelihood of miscarriage.

After my autoimmune diagnosis, I saw a functional medicine doctor to learn how I can put the disease into remission. I entirely changed my diet, balanced my hormones, and did everything thinkable to see if it would make the difference needed inside my body.

The summer of 2024, we tried again and were sure our sixth pregnancy would last. But it didn't. We miscarried again.

At that point, Dr. Broadwell at Sanford Reproductive Medicine recommended we try IVF utilizing a Gestational Carrier for the most likely chance of having a living baby.

I was heartbroken by the idea of another woman carrying our baby and "giving up" on myself. But after realizing that it ultimately doesn't matter how our baby joins the world as long as they are here, I am at peace with it and excited about our decision to proceed this way.

We began our IVF journey in October of 2024 and we have 8 healthy embryos.

Three weeks ago, we matched with a Gestational Carrier. We are honored and humbled that a selfless woman in Minot is willing to carry our baby so they can live. We are hoping to transfer one of our frozen embryos within the next six months, and there is finally a light at the end of the dark tunnel we've been in for four years.

Four years ago, we never thought we would lose a baby. We certainly never imagined IVF would be part of our journey to parenthood. Since it has to be, we are incredibly grateful for the team at Sanford Reproductive Medicine—the only remaining IVF clinic in North Dakota. Without them and their dedication to creating life, we wouldn't have any hope or direction for our future family.

Thank you for taking the time to read my story and consider my support for HB 1477. I hope our journey provides insight on why reproductive and fertility treatments are necessary for growing families in North Dakota and worth protecting.

Emily Lindquist
1117 8th Street NW
Minot ND 58703

RE: Support for House Bill 1477

My name is Braden Lindquist and I support House Bill 1477.

My wife and I have experienced 6 unexplained miscarriages since we started growing our family in 2021.

I have been witness to the physical and emotional pain she has suffered undergoing tests, procedures, and repeated loss as we've been told to just keep trying. As a man, you feel helpless watching your wife endure this and feel like she isn't meant to be a mother.

There have been many times where we wanted to stop trying. We wanted to give up to prevent any further heartache, but our desire to have a living child has kept us fighting for answers.

Since we started doctoring at Sanford Reproductive Medicine in Fargo, we have hope again. We are in the middle of the IVF process and we're confident this is the right path for us. Through fertility treatments, we will have a baby in our arms.

I fully support HB 1477 to protect fertility treatments in the state of North Dakota so everyone can experience their right of parenthood.

Thank you for your time and for voting yes on HB 1477.

Braden Lindquist

Birgit Pruess, Ph.D. Biology
3696 Harrison St. S
Fargo, ND

January 26, 2025

RE: HB1477

Dear members of the 69th Legislative Assembly of North Dakota,

I am a resident of Fargo, ND. Please, accept the below as my testimony IN FAVOR of HB1477, relating to 'fertility health care treatment rights'. I testify as a private citizen not as a representative of a group.

I would like to offer some insights into how access to assisted reproduction can help or even build families. In fact, 42% of families either have used fertility treatment themselves or know someone who has. I fall into the second of these categories. Of course, not everybody who does *in vitro* fertilization will give birth to a healthy baby. The percentage of americans that were born as a result of fertility treatment is much lower at 2.4%. That is still six to seven millions of people. Keep in mind that one cycle in a healthy woman really only delivers results at a 15% chance of success. Except repeated attempts are much cheaper and quite a bit more enjoyable for most than fertility treatments, which can easily end up with 10 or 20 k per attempt. And be quite stressful to the body of the woman from a health perspective. Women would never request fertility treatment, if frequent attempts to get pregnant the natural way had not failed. Do we really want to deprive couples this chance of building families? Do we want our society to live with six or seven millions of people fewer in our already depleted workforce? We are complaining about our low birth rate. Well, this is one way to get it up.

Personally, the female members of my family have been plagued with endometriosis, which is a major source of infertility in women. I was member of the Endometriosis Association for several years and have heard many talks by high reputation fertility Doctors, as well as some 30 women who really suffered because of their inability to conceive. The stories were most often heart breaking and we always had a box of Kleenex on the table. *In vitro* fertilization gives these women and their partners hope, sometimes joy, other times despair. Either way, it is one other chance of starting the much desired family. And what about the baby that would not have been born without treatment? Would you have wanted to be that baby that never was conceived because a fertility treatment was not available to your parents? Obviously, you can't answer that question because you would not be here. Neither would be several millions other citizens that would have never been conceived, much less born.

It is unfortunate that the desire to have a baby and the ability to have a baby so often don't align. But this is not anybody's personal failure, just the way biology works. I think our families and our society deserve this opportunity to allow birth of a baby in a health situation that they could not control.

Altogether, I support HB1477 and recommend a PASS vote.

As in all my testimonies, I much appreciate the hard work and dedication that each member of my state legislative assembly puts into our state. Thank you.

Sincerely and respectfully
Birgit Pruess, Ph.D. Biology

January 27, 2025

I am strongly in favor of both bills 1477 and 1478 as they relate to the right to make personal choices for reproductive care. Due to the constant attacks and attempts at religious freedom that I often see from the ND Legislators, I find bills like these to be not only refreshing, but absolutely necessary.

It should never be up to a governing body to make choices for people, especially women, when it comes to making decisions for their bodies. There are multiple reasons women make the choices they do with reproductive care, and they are all very personal. Oftentimes, access to some of these options is also medically necessary and government should never be allowed to implement laws to restrict medical care. I'm so tired of people trying to force their religious beliefs on others by attempting to take away choice or medical care options. I am thankful these the sponsors of these bills are attempting to protect the rights of everyone, regardless of religious beliefs.

RaNae Jochim

South Bismarck Resident

House Human Services Committee
Chairman Matt Ruby
Jan. 24, 2025
HB 1477

Chairman Ruby and members of the House Human Services Committee,

My name is Brooke Maatz, and I am a board-certified nurse practitioner who has lived in Grand Forks for three years. Prior to that, I spent twelve years in Fargo. Thank you for the opportunity to testify in favor of HB 1477.

As a healthcare professional, I am acutely aware of the importance of access to comprehensive reproductive care. However, I come before you today not only as a provider but as a mother. My husband and I married in 2021 with the hope of starting a family right away. But our journey to parenthood was fraught with heartbreak, including two early pregnancy losses and a diagnosis of recurrent pregnancy loss and unexplained infertility.

Our path eventually led us to Sanford's Reproductive Clinic in Fargo, where we sought treatments ranging from intrauterine insemination (IUI) to in vitro fertilization (IVF). After many setbacks—including another pregnancy loss of a genetically normal embryo—we were finally blessed with a healthy, beautiful son through IVF. Without the specialized care and support of the clinic, our story would have been very different. We are incredibly fortunate to have had access to such crucial services right here in North Dakota.

I support HB 1477 because it will protect and ensure continued access to these vital fertility services for North Dakota families. One in six couples struggles with infertility, and for many, IVF is the only path to parenthood. This bill will protect healthcare providers who offer these services and ensure families have the freedom to pursue their dream of having children.

In conclusion, I strongly urge the committee to vote yes on HB 1477. It's not just a matter of healthcare—it's about ensuring North Dakota families have the same opportunities to grow and thrive.

Thank you for your time and consideration. I appreciate your service, and I am happy to answer any questions you may have.

Sincerely,

Brooke Maatz, DNP, NP-C
3989 Diamond Drive Grand Forks, ND 58201
Email: brookieb42@hotmail.com
Phone: 218-230-5049

House Human Services Committee
HB 1477
January 29, 2025

Chair Ruby and members of the Committee,

I am writing as both a concerned mother and aunt to urge you to protect access to fertility services including in-vitro fertilization (IVF) by **supporting HB 1477**. My niece was able to build her beautiful family thanks to IVF, a medical advancement that has given hope to so many who face challenges in conceiving.

Families currently relying on IVF or who may need it in the future deserve the same opportunity. Restrictions on reproductive healthcare threaten this essential pathway to parenthood for countless individuals.

Please ensure that IVF remains accessible and protected for North Dakotans now and in the future. Supporting this life-changing care reflects a commitment to compassion and care.

Please give HB 1477 a “Do Pass” recommendation.

Thank you for your attention to this critical issue.

Sincerely,

Cora Turner
3202 1st St N
Fargo, ND 58102

Subject Line: Support HB1477 – Protecting Access to Infertility and Reproductive Care

Dear Committee Members,

My name is Megan Moderow, and I am writing to express my strong support for HB1477, which is vital for ensuring access to infertility care and reproductive health services in North Dakota. As someone who is deeply invested in the well-being of families, I am passionate about ensuring that those who face infertility have the opportunity to pursue their dream of having children.

Infertility is a medical condition that affects 1 in 8 families, yet accessing care remains a significant challenge for many. The financial burden of treatments, combined with a lack of sufficient insurance coverage and regulatory barriers, leaves many individuals and families without the resources they need to pursue their dream of having children.

HB1477 addresses these challenges by safeguarding access to reproductive healthcare services. This bill ensures that families facing infertility can receive the medical care they need without unnecessary interference or restrictions.

By supporting HB1477, North Dakota can set an example of compassion and fairness in healthcare, giving hope to countless families who dream of growing their families. I urge you to vote YES on this critical bill.

Thank you for your attention to this matter.

Sincerely,

Megan Moderow

meganA.buchmann@gmail.com 701-403-6411

Testimony in support of HB 1478 and HB 1477

Dear Chairman and Members of the Committee,

It should be not be controversial that reproductive healthcare should be easily available to the men and women of this state. The decision to prevent pregnancy, or the decision to attempt IVF are deeply personal and should not be intruded on by our government.

Reproductive healthcare should include easy access to ALL types of contraception. Not only to prevent unintended pregnancies and thus limit the need for abortion, but also to treat a wide range of sometimes debilitating medical conditions (e.g. Polycystic Ovarian Disease, endometriosis). Access to condoms is not enough. Male condoms are an inexpensive contraceptive, but condoms don't begin to address the varied situations people find themselves in. Condoms can not treat PCOD. Condoms don't regulate painful cycles. Condoms don't treat endometriosis. Condoms don't treat bad acne. Men may refuse to wear condoms etc. Again, we need easy access to all types of contraception as determined by the patient and their healthcare provider, without government intrusion.

Reproductive healthcare should also include assisted reproductive techniques. The government should not prevent the only means by which some families can conceive a much-wanted child. And no, for many families, adoption or foster care are not substitutes for having their own biological child.

Sadly, these bills are needed because of the consequences of "fetal personhood" legislation that is again proposed in this session and other attacks on reproductive healthcare.

Sincerely,

Alex Deufel – District 40

North Dakota House of Representatives
Human Services Committee
North Dakota Legislative Assembly
600 E Boulevard
Bismarck, ND 58505

January 27, 2025

Dear Chair Ruby and Members of the House Human Services Committee:

My name is Anastassiya Andrianova. I am a 43-year old woman and the mother of a school-aged daughter. I write **in support of HB 1477** – a bill to create and enact a new chapter to title 14 of the North Dakota Century Code, relating to fertility health care treatment rights. Just as HB 1478, which relates to contraception, HB 1477 affirms that decisions about reproductive care should be left to the patient and their medical provider, not subject to political influencing or governmental intrusion.

Many women, myself included, have experienced infertility issues and have benefited from individualized reproductive and fertility health care. For the prospective parents and their families, it is difficult enough to have to experience such medical conditions and the psychological burdens they carry. To let governments meddle in such personal affairs is just gross and obscene.

Please leave the decision-making to the patient and their medical provider.

It's a basic individual liberty.

Vote DO PASS on HB 1477.

Thank you for your time and consideration.

Sincerely,
Anastassiya Andrianova, teacher, woman, mother, and concerned ND citizen
Fargo, ND

I am writing to express my strong support HB1477 protecting IVF treatment in the state of North Dakota, and to emphasize the importance of ensuring that fertility treatments remain accessible and affordable for those who need them. I am currently a reproductive endocrinologist currently practicing at the one IVF center available in the state of North Dakota, Sanford Reproductive Medicine Institute. I have been practicing in the field for 13 years, of which the last 5 have been within the state of North Dakota. I was born, raised and educated in this state and consider it a privilege to give back and provide this essential care to people and communities within North Dakota and surrounding states.

As we know, modern fertility treatments like in vitro fertilization (IVF) have revolutionized the ability for many couples and individuals to build their families. The opportunity to pursue parenthood through IVF is a benefit that was largely unavailable for most of history, and in many parts of the world, it is still not accessible. It is crucial that we protect and preserve access to this life-changing treatment within the state of North Dakota.

1 in 6 people experience the disease of infertility. Although, not every couple requires IVF therapy to conceive and build their families, over 3% of all babies born in the United States each year are conceived with the use of IVF. This results in ~100,000 births / year and over 8 million individuals have benefited from this amazing technology since its inception. Everyday there are dedicated and highly trained people that deliver this care throughout the country. We are lucky to have these skilled individuals within the state to provide this for our population.

That 1 in 6 does not include those facing cancer and other medical illness that require life saving treatments that can cause unintended negative impacts on their fertility. It does not include individuals / couples carrying genetic inheritable diseases that use our treatments to reduce the risk of passing genetic disorders to their children. These numbers also do not reflect those individuals within the LGBTQ communities that depend on these treatments to build their families.

Unfortunately, IVF and other fertility treatments are often vulnerable to being excluded or restricted by changes in legislation, whether due to misunderstandings about the medical process or broader political agendas. Protecting the right to IVF coverage is not only about preserving access to an important medical treatment—it is about safeguarding the ability to have a family. For many individuals and couples, the ability to access IVF is their only path to parenthood, and it is a right that should be protected.

I have the privilege to see the profound impact this treatment can have on individuals and families. I share the heartache and the joy with them, and strive to be the best physician I can to provide this care in an ethical and successful way. I urge you to support this important bill, so that the opportunity to create a family is one that is available to all within the state of North Dakota.

Christina Broadwell, MD

January 27, 2025

Testimony in Support of HB 1477 – Protecting Access to Infertility and Reproductive Care

Honorable Chair and Members of the Committee,

My name is Katie Richter, and I am writing in strong support of HB 1477, which seeks to protect access to infertility and reproductive care. Infertility is a medical condition that deserves the same care and attention as any other health issue, and this bill is crucial for ensuring individuals can access the treatment they need without unnecessary barriers.

Infertility already takes an immense emotional and financial toll on individuals and families. Treatments like IVF are often out of reach due to high costs or lack of insurance coverage, and HB 1477 helps address these disparities. By removing barriers to access, this bill provides hope and relief to those navigating the challenges of infertility. It is essential that everyone, regardless of background, has equal access to the care they need.

Supporting this bill is a step toward building a more equitable healthcare system, where people's rights to reproductive autonomy and family-building are respected. I urge you to vote in favor of HB 1477 to ensure that infertility and reproductive healthcare remain accessible and affordable for all.

Thank you for your time and consideration.

Sincerely,

Katie Richter



District 31

Mandan

Dear Committee Members,

My name is McKenzie Sapa, and I am writing to express my strong support for HB1477, which is vital for ensuring access to infertility care and reproductive health services in North Dakota.

Infertility is a medical condition that affects 1 in 8 families, yet accessing care remains a significant challenge for many. The financial burden of treatments, combined with a lack of sufficient insurance coverage and regulatory barriers, leaves many individuals and families without the resources they need to pursue their dream of having children.

HB1477 addresses these challenges by safeguarding access to reproductive healthcare services. This bill ensures that families facing infertility can receive the medical care they need without unnecessary interference or restrictions.

By supporting HB1477, North Dakota can set an example of compassion and fairness in healthcare, giving hope to countless families who dream of growing their families. I urge you to vote **YES** on this critical bill.

Thank you for your time and consideration.

Chairman Ruby and Members of the Committee,

I am writing this testimony as support for HB 1477.

I am a woman that was born and raised in North Dakota. I received my Bachelor's degree in nursing at the University of North Dakota. I worked in Women's Health as a labor and delivery nurse for 5 years before returning to graduate school to get my Master's Degree and board certification as a Women's Health Nurse Practitioner. I returned to North Dakota to continue my career as a woman taking care of other women. A health care provider called to help treat people with a medical diagnosis.

I have had the honor of providing care to women and men who suffer from infertility for close to 10 years now. Every single day is filled with highs and lows, happiness and sorrow, and an unexplainable feeling that only a woman who wants to become a mom can explain. And for those of us sitting across from the patients each and every day in that exam room, an unexplainable passion for helping them achieve this dream.

Fertility treatments rarely are covered by insurance. The patients we see get second jobs, spend their life savings, or take out loans with the goal of being able to achieve their dreams of becoming parents.

Other patients receive heartbreaking cancer diagnoses and are given days to determine if they are able to preserve their fertility before starting life saving treatments like chemotherapy and radiation, both of which can prevent the ability to conceive after treatments.

Every single person has the right to be able to receive TREATMENT for a MEDICAL DIAGNOSIS. Infertility is a medical diagnosis that impacts 1 in 6 people. North Dakota has ONE clinic that provides fertility services like IVF. This clinic has faced personhood bills and bills to abolish these treatments based on political and religious beliefs. Now more than ever, protection for the ability to not only provide fertility treatments but also receive fertility treatments is essential.

I strongly urge you to place yourselves in the shoes of others--what would your best friend, your daughter, your brother, your niece, or your son say if they knew that their ability to have a child with the assistance of infertility treatments in North Dakota was abolished because of lack of support to pass this bill? Now picture yourself in their shoes again--your family member or friend having the ability to receive the medical treatments that they need in order to create the family they dreamed of. All because of your support of this bill. You have the ability to make these scenarios a reality.

Let's put ourselves on the right side of history. Let's move forward, not backward. Let's be good humans and keep politics out of the doctor's office.

Respectfully,

Alli Harrison

I am writing to express my strong support for HB 1477, which seeks to protect access to fertility treatments in our state. As someone who has personally navigated the emotional and physical challenges of infertility, I believe that this bill is crucial to ensuring that individuals and couples who face similar struggles have the support and resources they need to build their families.

For over four and a half years, my husband and I went through a wide range of fertility treatments in hopes of achieving pregnancy. We underwent seven cycles of IUIs, and during that time, I gained an intimate understanding of how essential access to affordable and comprehensive fertility care is.

According to the Centers for Disease Control and Prevention (CDC), approximately 12% of women aged 15-44 years in the United States experience infertility, which translates to about 1 in 8 women in this age group. These statistics highlight how common infertility is and underscore the importance of making sure that individuals have access to the care and treatments they need. For many, fertility treatments are not a choice – they are a medical necessity.

I deeply appreciate the opportunity that I had to access fertility treatments and am grateful for the advancements in medical science that make it possible for people to become parents. By supporting HB 1477, you are standing up for countless families like mine who rely on these critical services.

Please know that I am in full support of this bill and encourage you to vote in favor of its passage. Protecting access to fertility treatments is not just about medical care – it's about giving families the opportunity to grow and thrive.

Thank you for your time and attention to this important matter.

Erin Price
Bismarck, ND

Chairman Ruby and Members of the Committee,

I am writing this testimony in support of House Bill 1477.

My name is Margaret Prozinski and I am a wife, a daughter, a friend, but most importantly a mother. I have two beautiful twin girls Eden and Estella who were conceived through IVF. For those of you who are reading today and have children of your own, I want you to imagine for a second what life would be like without your children. The words that come to my mind as someone who has children but yearned for much time to hold them in my arms, are empty and grief. That sense of longing is an unbearable weight and an ache that I won't forget and continue to feel. For many families like mine, assisted reproductive technologies like IVF offer the chance to bring children into the world and experience the joy, laughter, and love that is parenthood.

House Bill 1477 is crucial because it ensures that fertility treatments remain accessible and are not subjected to legal or political barriers that could jeopardize the futures of countless families. Without the security of reliable access to these treatments, individuals and couples who desperately want to become parents could see their dreams and hopes dashed.

It is important to recognize that fertility treatments are not just medical procedures; they are an emotional journey. The physical, emotional, and financial toll that families endure during this process cannot be overstated. The decision to undergo IVF is often not made lightly—it involves deeply personal choices and the courage to confront the uncertainty of the future.

In 2024, my family embarked on another attempt to grow. Over the past year, we underwent three IVF transfers. Two of them ended in heartbreaking loss, and one simply did not take. Each loss brings its own wave of grief, with its own challenges, but with the unwavering support of my team at Sanford Reproductive in Fargo, we have found the strength to keep going. Sanford Reproductive is the only IVF clinic in North Dakota, and despite the constant threat of parenthood bills and efforts to abolish the very treatments they provide, often fueled by religious and political beliefs, this clinic continues to operate, offering families like mine the chance to pursue their dreams of parenthood. Without their help, we would not have the courage to keep going down this difficult road in the hopes of giving our daughters a sibling.

But without the protection of House Bill 1477, families like mine—who are already fighting so hard to achieve our dreams of parenthood—would face even greater hurdles. We would not only have to contend with the emotional and physical costs of IVF, but also the very real fear of legal or financial barriers, based on religious or political ideologies, that could prevent us from continuing our journey altogether.

Please support this bill to protect families and ensure that fertility treatments remain an accessible, compassionate option for those who need it. As I mentioned at the beginning of my testimony, I am a wife, a daughter, a friend, but most importantly, I am a mother. And I know that every one of us knows someone, whether a family member, a close friend, or a colleague who is walking this difficult path. This bill is not just for my family, but for countless others who are trying, just as I did and continue to do, to fulfill their dreams of becoming parents.

Sincerely,
Margaret Prozinski

To whom it may concern: I am writing in support of HB1477, to protect fertility health care treatments for our state. I found out as a minor that I have polycystic ovarian syndrome; I also learned this may impact my ability to naturally get pregnant. Even as a minor, I knew I wanted a family one day, and felt fine with alternative options (i.e. adoption) if I was not able to naturally have my own. I, however, was not yet in the life state to be actually making those decisions. As an adult, I've worked in the child welfare system for nearly 2 decades, as well as raised stepchildren. During this time, it became more and more important to me to be able to have children of my own. I, however, did not have a menstrual cycle at all, so fertility treatments were my only option. My husband and I have been blessed with two beautiful children as a result of IVF. IVF became the only viable option for us due to the reactions my body was having to the hormone medications, in addition to one of my fallopian tubes questionably being blocked. IVF was the responsible and safe choice for my healthcare. The decisions, failed treatments, and miscarriage along the way were all too stressful in themselves. Worrying about if we would even have access to appropriate healthcare, or if we would need to add traveling to get said healthcare out of state, is not additional stress any family needs during this time. Fertility health care treatments, as outlined in this bill, should remain a protected option for all persons in our state. I will also add, it was easy to say "adoption is an option" even myself before I was directly in the scenario, but you do not understand until you are in it. I firmly believe if you feel you have the right to tell someone else that adoption should be THEIR only option, you should also be signing up to foster and adopt and be fine with the government deciding for you what is YOUR only option for having a family and your healthcare. I sincerely hope you vote in favor of protecting access to infertility services and a family's ability to choose what is best for them. Sincerely, Jill Perez 1.28.25

Chairman Ruby and Members of the Committee,

I am writing this testimony as support for HB 1477.

I am a patient access representative at the only IVF fertility clinic in North Dakota. I directly work with patients who are working to create a family. As someone with day-to-day interactions with patients, I strongly encourage you to support HB1477 so that we can continue to provide care to our patients. Infertility is a medical diagnosis, and North Dakotans should have access to treatment of this medical disease. We care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility. Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

Sincerely,

Arlene Luptak

Chairman Ruby and Members of the Committee,

I am writing this testimony as support for HB 1477.

I am an Andrologist at the only IVF fertility clinic in North Dakota. I directly work with patients who are working to create a family. As someone with firsthand knowledge and working with our patients every day, I strongly encourage you to support HB1477 so that we can continue to provide care to our patients. Infertility is a medical diagnosis, and North Dakotans should have access to treatment of this medical disease. We care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility. Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

From a personal perspective this is also a very important topic to me. My daughter is 23 and has two very serious autoimmune disorders. Because of these disorders she will never be able to carry her own child of her own. Our clinic would give her to still have her biological children even if she can't carry them. She would use a carrier to carry her embryo to birth. In order to do this she would have to go through the IVF procedure and utilize all that this amazing options this clinic would offer her.

The really amazing thing about what we do is we give people the option to have a family. More times than not, they didn't choose to have their family in the nontraditional sense. They still get to be amazing parents and have amazing children.

Sincerely,

Joie Thompson

I am writing this testimony as support for HB 1477.

I am a nurse practitioner at the only IVF fertility clinic in North Dakota. The patients I care for require fertility treatment to make their dreams of having children come true. Without the ability to access this care in ND, many of our patients would be forced to seek care outside of our state, adding additional burdens such as time, travel, and cost into an already stressful process. As someone who has worked in this field for nearly a decade, I strongly encourage you to support HB1477 so that we can continue to provide care to our patients. Infertility is a medical diagnosis, and North Dakotans should have access to treatment of this medical disease. We care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility. Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

Sincerely,

Amanda Helmer

Chairman and Members of the Committee, I am part of 1 in 9 diagnosed with endometriosis, which contributes to 1 in 6 adults who experience infertility. In 2018, after trying to conceive our first child for 9 months, and after 15 plus years of excruciating menstrual cycles, I sought out answers to ensure we were on the right track to start our family. In February 2019, I had my first laparoscopic surgery where they discovered and removed endometriosis. Finally, after years of pain I had a true answer and diagnoses. Shortly after experiencing the positive effects of the surgery, I was able to conceive my first child.

Two years later, when we decided to expand our family, I anticipated challenges given my history with endometriosis. After a year of unsuccessful attempts and worsening pain, I underwent another laparoscopic surgery. The surgery revealed that my endometriosis had progressed significantly in just 2.5 years. Roughly 3 months later, we became pregnant which unfortunately ended in a devastating miscarriage. Research indicates that those with endometriosis face a 75% increased risk of miscarriage, a reality we came to understand all too well.

As our journey to conceive continued, my daughter started asking about when she would get a sibling. It broke my heart to share with her how hard mom and dad were trying to grow our family. Watching her care for me after my second surgery and after our miscarriage just like I knew she planned to care for her future sibling. These moments highlighted that infertility doesn't just affect the parents trying, it impacts the whole family, including those excitedly waiting for the new addition.

After two years of trying naturally, we turned to IVF. For someone with endometriosis, IVF offers key benefits—it reduces the risk of endometriosis affecting the sperm and egg, increases the chance of successful implantation, and helps regulate the hormones critical for sustaining a pregnancy. We were fortunate to have a successful IVF cycle and have welcomed our second daughter this past November. She is everything we have dreamed of and more.

However, I can't help but feel deeply concerned for the future. Anti-abortion Republican politicians feel emboldened, so I'm worried that they will next try to limit access to other reproductive health care like IVF and birth control. The hope and joy that IVF has brought to our family is something I want to be available to all families facing similar fertility challenges. Everyone should have the right to pursue fertility treatments if they need them. This bill is about making sure that families who want to grow have the opportunity to do so, despite the challenges they may face. It's about providing hope and the chance to build the family they've dreamed of, just as we've been fortunate enough to do.

Please support this bill and protect IVF in North Dakota by giving it a DO PASS recommendation. Thanks for hearing my story, I'm happy to take any questions.



Written Testimony of Diana Slivensky PhD, LP

Chairman Ruby and Members of the Committee,

I am writing this testimony as support for HB 1477.

I am a psychologist at the only IVF fertility clinic in North Dakota. I have lived in Fargo, ND for 7 years and lived in Grand Forks, ND while pursuing my doctorate at the University of North Dakota. I directly work with patients who are working to create a family. As someone with firsthand experience and specialized training in reproductive psychology, I strongly encourage you to support HB1477 so that we can continue to provide care to our patients. Infertility is a medical diagnosis, and North Dakotans should have access to treatment of this medical disease. We care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility.

I not only offer my support as a healthcare professional, but also as a mother. As an individual who decided to pursue an advanced degree (PhD) and delay family building, my husband and I struggled with infertility. We had to seek out reproductive medical care to aid in our family building. We cannot imagine what our lives would be like without our sweet son, Robbie.

Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

Sincerely,
Diana R. Slivensky
Licensed Psychologist
Sanford Health

Dear Members of the Committee,

I am writing to show my support for HB 1477, protecting infertility treatments for those in the state of North Dakota.

I have always grown up with the dream of becoming a parent since I was a little girl myself. I never knew what I wanted to do in my professional life, but one thing was certain- I wanted to be a mom. I knew becoming pregnant wasn't always easy, but what I didn't expect was the long journey that led me to IVF.

I tried for years. Tracking cycles, trying, testing, and ultimately failing were becoming a norm in my life and it was weighing heavily on me. I felt like an utter failure as a woman. I found out that I was 1 in 6, a statistic that I didn't want to be a part of. I am 1 of 6 who experience infertility.

Without Sanford Reproductive Medicine, the only IVF clinic in the state of North Dakota, I would not have my daughter today. They gave me hope when I had none left to spare. They gave me the chance to fulfill my dream of becoming a parent. They gave me the most precious gift I could ever ask for. This is what protecting the rights for fertility treatments means to not only myself, but so many others in the state. It means patients who are facing infertility have the chance to become parents, grow their families, and experience the unconditional love of being a parent that I've been given myself.

People don't talk about infertility enough. We all know somebody in our lives who has had difficulties conceiving whether we know it or not. It could be our sister, brother, mother, cousin, neighbor, coworker, or friend. Voting yes on HB 1477 would allow those who are so desperately trying to become parents the protection to seek the help they need. It maintains the last shred of hope that so many, myself included, have.

Thank you for your consideration,

Lindsey Olander

Fargo, ND

WRITTEN TESTIMONY IN SUPPORT OF HOUSE BILLS 1477 and 1478

House Human Services Committee on House Bills 1477 and 1478

Date of Hearing: January 29, 2025

Debra L. Hoffarth, 1320 11th Street SW, Minot, ND 58701

This written testimony is presented in support of House Bills 1477 and 1478, which safeguards access to fertility health care treatment, such vitro fertilization (IVF), and contraception.

Reproductive healthcare is fundamental to the well-being and autonomy of individuals and families. IVF and contraception are essential components of this care, empowering people to make informed decisions about when and how to grow their families.

For individuals facing infertility, fertility health care treatment, such IVF, provides a pathway to parenthood that might otherwise be inaccessible. Infertility is a deeply personal and often devastating experience. IVF offers hope and an opportunity for those who wish to have children but face medical barriers.

Similarly, access to contraception is important to public health and individual freedom. Contraceptives allow individuals to plan pregnancies and protect against certain health conditions. Research shows that access to contraception reduces unintended pregnancies, improves maternal and child health outcomes, and contributes to economic stability for families and communities.

Assisted reproduction and contraception are essential and protecting them is critical to ensuring equitable and comprehensive reproductive healthcare for all.

This legislation affirms the basic principle that everyone deserves the right to access the healthcare they need without fear or interference from the government. It upholds the values of compassion, science, and respect for individual autonomy.

Please support House Bills 1477 and 1478.



Chairman Ruby and Members of the Committee,

My name is Amanda Pieters, and I am a trained birth doula, an Evidence Based Birth Instructor Emeritus, and business owner in Fargo, North Dakota.

I write today to urge you to SUPPORT the bill HB 1477.

As a birth doula I have had the honor of supporting over 40 families welcome their new baby into the world. *Many* of these families were able to start, or grow, their family because of IVF.

Walking alongside a family through their pregnancy and labor is an honor. Families who utilize IVF are families who are looking for *any way* to help their dream of becoming parents (or growing their family) become a reality. North Dakotans deserve to have access to high quality reproductive healthcare including IVF treatments and care.

It's not often that we get to experience dreams coming true in real time, but I get to every time I'm with a family who had their child through IVF. Please support bill HB 1477.

Sincerely,

Amanda Pieters
Avocado Doula, LLC



**House Human Services Committee
HB 1477
January 29, 2025**

Chairman Ruby and Committee Members, I am Courtney Koebele, the Executive Director of the North Dakota Medical Association. The North Dakota Medical Association is a professional membership organization for North Dakota physicians, residents, and medical students.

NDMA supports HB 1477 to protect access to fertility freedoms.

The right to fertility services is the legal right of individuals to access fertility treatments and make reproductive decisions without interference.

This bill ensures patients have the right to receive infertility healthcare and that medical professionals have the right to provide that care without restrictions from state and local governments.

Our physicians see every day how the disease of infertility devastates families emotionally for those wanting families. This bill provides a pathway to secure the right to receive the necessary reproductive service from healthcare professionals.

NDMA requests your support for HB 1477. Thank you.

Courtney Koebele
Executive Director
North Dakota Medical Association

HB 1477 - Protecting access to infertility services

Rep. Karla Rose Hanson
House Human Services Committee - 1/29/25

Chair Ruby and members of the House Human Services Committee,

I'm Rep. Karla Rose Hanson from District 44. Today I bring you HB 1477, which aims to protect fertility health care. You'll see several parallels to the bill we just discussed.

These protections are important for the 1 in 6 couples who experience infertility and need medical assistance to build their families and realize their dream of having children.

In short, this bill defines fertility health care in state law and says that patients have the right to receive, and health care professionals have the right to provide, infertility health care without interference from state or local government entities.

The bottom line is: let's keep the government out of your doctor's office.

Definitions:

The first page of the bill provides definitions for the terms commonly used in infertility health care, including assisted reproduction, assisted reproductive technology, and fertility treatment. You might be familiar with in vitro fertilization (IVF), which is one of several ways people can build their families using assistance from a health care provider.

Like the bill we just discussed, I urge the committee to at a minimum add definitions to state law to provide clarity on these commonly used terms.

Rights:

The next section of HB 1477 outlines the rights related to infertility health care.

The bill says that patients have the right to receive infertility health care, health care professionals have the right to provide infertility health care, insurance providers have the right to cover infertility health care, and manufacturers have the right to create and distribute products related to infertility health care -- all without restrictions from state and local governments.

That means that the state legislature could not pass a state law that creates barriers for patients, doctors, insurance providers or manufacturers related to infertility health care.

It also means that state agencies could not implement administrative rules that have the force of law that interfere with these rights.

And it means that political subdivisions like city and county commissions could not implement a policy that impedes these rights.

An example of a government restriction could be an outright ban on specific infertility services like IVF.

Another potential restriction would be a so-called "personhood" law. These laws redefine "human being" to begin at conception or fertilization rather than birth, or they say that we must protect human beings "at every stage of development". While the intention of such laws is to prohibit abortion, they have the additional consequence of impacting IVF.

Further examples would be restrictions on specific aspects of infertility care that are considered standard, evidence-based medical practice. This might include a prohibition on freezing of embryos, which is commonly done especially in fertility preservation for young cancer patients. Or it might be a requirement that patients and providers can only create as many embryos as you plan to transfer into the uterus so that none are discarded.

This bill does NOT require health insurance companies to cover infertility services. Rather, it says that the government can't prohibit insurance companies from offering coverage.

Penalties/Exceptions:

The next section of the bill outlines what happens if the government does violate these rights. It says that the state attorney general or the person adversely affected by the policy, including a patient or a health care provider, can bring a civil lawsuit to restore those rights. This is a civil process, not a criminal one.

Amendments

Similar to the last bill, I have two small amendments to clarify the intent and scope of this bill related to Medicaid. In the copy I distributed, these are on Page 3, lines 1 and 25.

Why is this needed?

This bill is necessary because of past and current efforts to limit IVF in other states and in North Dakota.

Last year, Alabama's supreme court ruled that embryos created through IVF are people in the case of wrongful death suits. That decision shut down all the IVF clinics in the state. The Alabama state legislature tried to fix the situation with [legislation](#), but families were devastated when their IVF cycles were cancelled. As someone who went through the physical, emotional and financial stress of IVF, I don't want that to happen to families here.

North Dakota also has its own history. You might remember the personhood ballot measure in 2014. That would have amended the ND constitution to say that the inalienable right to life of every human being at every stage of development must be recognized and

protected. At the time, [North Dakota's IVF doctors said the personhood measure would put an end to the practice of IVF in our state](#). Voters defeated the measure by a 2:1 margin.

Fast forward to 2025. Your committee will consider [HB 1373](#) in the near future. This bill changes the murder and assault criminal statutes and the wrongful death civil statutes to redefine person as beginning at fertilization. As with the personhood ballot measure in 2014, HB 1373 would put an end to the practice of IVF.

As I mentioned in the previous hearing, after Roe v Wade was overturned in 2022, abortion laws in ND have been considered by the legislature and the courts. During this time, many of my constituents have expressed deep concern about their ability to access other types of reproductive health care, including contraception and infertility care. North Dakotans want assurance that they'll be able to access these critical health care services without interference from the government.

Chair Ruby and members of the committee, I ask that you make those two small amendments and give HB 1477 a do-pass recommendation. Let's keep the government out of our doctors' offices, protect infertility services, and allow families to realize their dreams of building a family.

25.0342.02001
Title.

Prepared by the Legislative Council
staff for Representative Hanson
January 27, 2025

Sixty-ninth
Legislative Assembly
of North Dakota

PROPOSED AMENDMENTS TO

HOUSE BILL NO. 1477

Introduced by

Representatives Hanson, Christy, Brandenburg, Grindberg

Senators Hogan, Roers

- 1 A BILL for an Act to create and enact a new chapter to title 14 of the North Dakota Century
2 Code, relating to fertility health care treatment rights; and to provide a penalty.

3 **BE IT ENACTED BY THE LEGISLATIVE ASSEMBLY OF NORTH DAKOTA:**

- 4 **SECTION 1.** A new chapter to title 14 of the North Dakota Century Code is created and
5 enacted as follows:

6 **Definitions.**

7 As used in this chapter:

- 8 1. "Assisted reproduction" means a method of causing pregnancy other than by sexual
9 intercourse. The term includes:
10 a. Intrauterine insemination;
11 b. Donation of eggs;
12 c. Donation of embryos;
13 d. In vitro fertilization and transfer of embryos; and
14 e. Intracytoplasmic sperm injection.
15 2. "Assisted reproductive technology" means in vitro fertilization and any other treatment
16 or procedure in which reproductive genetic material is handled when clinically
17 appropriate.
18 3. "Fertility treatment" means a health care service, procedure, testing, medication,
19 monitoring, treatment, or product, including genetic testing and assisted reproductive
20 technologies.

- 1 4. "Health care provider" means any person licensed to provide health care services in
2 this state.
- 3 5. "Health carrier" means any entity providing a plan of health insurance or health
4 benefits subject to state insurance regulation.
- 5 6. "Manufacturer" means the maker of a drug or device approved, cleared, or authorized
6 by the United States food and drug administration or otherwise legally marketed.
- 7 7. "Reproductive genetic material" includes oocytes, sperm, and embryos.
- 8 8. "Widely accepted and evidence-based medical standards of care" means any medical
9 service, procedure, or practice consistent with the guidelines of the American society
10 for reproductive medicine and the American college of obstetricians and gynecologists.

11 **Rights.**

- 12 1. The state or any political subdivision of the state may not implement, administer, or
13 enforce any law, rule, or policy that has the effect of prohibiting, limiting, delaying, or
14 impeding access to assisted reproduction services or fertility treatment, or otherwise
15 violate the rights provided for in this section.
- 16 2. In accordance with widely accepted and evidence-based medical standards of care:
 - 17 a. An individual has the right to:
 - 18 (1) Receive fertility treatment from a health care provider;
 - 19 (2) Make decisions and arrangements regarding the donation, testing, use,
20 storage, or disposition of reproductive genetic material; and
 - 21 (3) Enter a contract with a health care provider relating to the provider's
22 services in handling, testing, storing, shipping, and disposing of the
23 individual's reproductive genetic material.
 - 24 b. A health care provider has the right to:
 - 25 (1) Provide or assist with fertility treatment;
 - 26 (2) Provide or assist with the testing, use, storage, or disposition of reproductive
27 genetic material; and
 - 28 (3) Enter a contract with an individual or a manufacturer relating to the health
29 care provider's services in handling, testing, storing, shipping, and disposing
30 of an individual's reproductive genetic material.

c. A health carrier or medical assistance has the right to cover health care services related to fertility treatment and assisted reproduction.

d. A manufacturer has the right to manufacture, import, sell, or distribute any drug or device related to fertility treatment, assisted reproduction, or the handling of reproductive genetic material.

Penalties - Exception.

1. If a state agency or political subdivision, or any individual, employee, official, contractor, or organization on behalf of a state agency or political subdivision, enacts or enforces a policy that restricts any right provided under this chapter, a civil action may be commenced against that state agency, political subdivision, or agent of the state agency or political subdivision by:

a. The attorney general; or

b. Any person adversely affected by the policy, including a health care provider.

2. If the court finds a violation of this section occurred, the court shall hold the policy unlawful and set aside the requirement or limitation. The court may award appropriate equitable relief, including injunctive relief. The court shall award court costs and reasonable attorney's fees to a prevailing plaintiff. A plaintiff may not be held liable to a defendant for any costs resulting from nonfrivolous litigation under this section.

3. The enforcement of state health and safety law regarding a medical facility or a health care provider is not a violation of this section if:

a. The regulation is in accordance with widely accepted and evidence-based standards of care for providing fertility treatment; and

b. The health or safety objective cannot be accomplished by a less restrictive means consistent with this chapter.

4. This chapter does not mandate medical assistance coverage under chapter 50-24.1.

Testimony in Support - HB 1477 - Rachel Richter Lordemann

January 28, 2025

Chairman Ruby and Members of the House Human Services Committee,

Please accept this testimony in support of a DO PASS recommendation on HB 1477 to protect access to fertility treatment and reproductive healthcare in North Dakota.

Throughout this Legislative Session, I have listened to Legislators discuss protecting family values on a variety of topics, from gambling to business hours and more. There is no better opportunity to protect family values than by ensuring that North Dakotans have the right to access the care necessary to create their families - in whatever form that takes.

I spent more than three years attempting to become pregnant, however due to a condition called Polycystic Ovarian Syndrome, I was unable to conceive without medical intervention. Thankfully, my husband and I had the opportunity to receive care at Sanford Reproductive Medicine Clinic in Fargo - North Dakota's only reproductive medicine provider. After many attempts to conceive, increasing the level of treatment with each attempt, I became pregnant through an IUI treatment in January of 2024, and my husband and I welcomed our son in October 2024.

Simply put, I would not have a child without this treatment, and I most certainly will never become pregnant again without the use of IUI or IVF.

Unfortunately, my story is not unique. In fact, I would feel confident in assuming that someone you know or love has also required fertility treatment in some form to create their families. 1 in 6 women experience infertility and require medical intervention to become pregnant.

Throughout this three-year journey, I was consistently concerned that political or legal decisions could impact my access to care. I worried that I could run out of time and that necessary treatments would no longer be allowed by law, the clinic could be closed, or my doctors barred from practicing. No one who is already dealing with the physical and mental toll of infertility should also have to be concerned that someone is going to rip away their only path to conceiving children.

This bill ensures that no one will have to face that reality. Protecting fertility treatment and reproductive healthcare can only make North Dakota families stronger.

For me, my family, and the thousands of North Dakota parents who have fertility treatments to thank for their beloved children - I thank you for your consideration and ask for a Do Pass Recommendation.

Sincerely,

Rachel Richter Lordemann, District 45, West Fargo

Regarding House Bill 1477
01/28/2025

My name is Shayna Wacha. I am writing in support of House Bill 1477. The proposed bill seeks to protect access to fertility treatments in our state. As someone who believes deeply in the right to build a family, regardless of the challenges posed by fertility issues, I urge you to stand with families by supporting this bill and ensuring that individuals have the freedom to pursue assisted reproduction without interference.

A close friend of mine is currently in the process of accessing in vitro fertilization (IVF) in North Dakota. Without this care, she would not have the opportunity to start her family in the way that she envisions. Like many others, she faces significant emotional, physical, and financial challenges while trying to build a family. Limiting access to fertility services would be an unfair hardship for those already struggling with infertility, and it would prevent many from fulfilling their dreams of parenthood.

Currently, our state has only one clinic that provides in vitro fertilization services, and many residents face travel hardships, or financial burdens just to access this care. If this bill were not passed, the consequences could be dire for countless families who already struggle with infertility, as well as access to fertility treatment and care. The right to access assisted reproduction services must not be left to chance or political maneuvering. It is essential that the state not implement any law, rule, or policy that limits, delays, or impedes access to fertility treatments. For individuals and couples who are trying to conceive, this is not a "luxury" but a necessary option to fulfill their desire to build a family.

By supporting this bill, we uphold the right of individuals and families to access fertility services, make informed choices about their reproductive health, and build the families they desire. It is a matter of human dignity and the right to make personal decisions about one's future. This bill fosters a family-minded approach that aligns with the values of equality and compassion.

I urge you to support this bill and protect the reproductive rights and family-building opportunities for the people of our state.

Thank you for your time and consideration. I hope you will stand with families in supporting this important legislation.

Sincerely,
Shayna Wacha

I am writing to support hb1477. Protecting the right to have access to reproductive care is incredibly important. There are so many families and people who have been affected by infertility struggles and just like with any other kind of reproductive health this kind of care needs to be preserved and should be left up to a person and their healthcare professionals and doctor.

House Bill No. 1477

I am writing to support House Bill No. 1477 which aims to protect access to fertility treatments. I am a genetic counselor at Sanford Reproductive Medicine, the only IVF clinic in the state of North Dakota. I have worked with countless individuals and couples who have been impacted by genetic disease, either with a personal diagnosis, a family history, or a previously affected child. Fertility treatments may be the only way for these individuals or couples to have biological children, or the only way to reduce the risk of passing a genetic disease on to future generations.

Infertility is a common medical diagnosis that affects 1 in 6 couples. For some of these couples, infertility can be caused by a genetic disease. Without access to fertility treatments these individuals and couples may have no path to biologic parenthood without the aid of fertility treatments provided at clinics like ours.

I have worked with families who have suffered tremendous loss, such as couples with recurrent pregnancy loss due to parental chromosome rearrangements; parents of children with severe, life-limiting genetic diseases; patients who have watched diseases like Huntington's disease affect entire generations of their families. With treatment options like in vitro fertilization with genetic screening of embryos these risks can be reduced if not entirely avoided. North Dakotans deserve access to these options.

HB1477 aims to support and protect North Dakotans who want nothing more than the opportunity to be parents. Please take this opportunity to advocate for your friends, families, and neighbors to help protect this access.

Ellen Johnson
Senior Genetic Counselor
Sanford Health Reproductive Medicine, Fargo, ND

Good morning,

I am writing this testimony in support of HB 1477.

My wife has spent her entire career caring for women and families. She sits face to face every single day working with patients that suffer from infertility. North Dakota has one IVF fertility clinic in the state and the work they do each day to help people reach their goal of becoming parents is incredible. Access to treatment for a medical diagnosis is a right that should be protected for all. Please support HB1477 to allow patients to continue to receive the care they need and to protect the providers that work tirelessly to provide safe and essential treatments for infertility.

The single greatest joy of my life has been the privilege of raising two boys and being a father. Everyone deserves the opportunity to experience this joy and fulfillment in their life, without exception.

Respectfully, Shaun Harrison

Dear Committee Members,

I am writing to express my strong support for HB 1477, protecting IVF treatment in the state of North Dakota. I am an OB/GYN in Fargo and provide fertility services for patients in this region. When the families I care for are not successful with intrauterine insemination they are referred on for IVF. My patients and I share the same concerns that reproductive restrictions in our state will negatively impact their care. If IVF is not protected, it will force families to travel out of the state for medical care. This places an unnecessary burden on North Dakota citizens requiring this essential service to build families.

Not only is maintaining fertility services in our state important for the 1 in 6 families affected by infertility, but it's also important for our economy. Young families are deterred from moving back to our state when faced with reproductive restrictions. Protecting access to fertility care is critical for growing a family and growing our communities.

Thank you for your consideration.

Sincerely,

Caitlin Pandolfo, MD

HB 1477
House Human Services Committee
January 29, 2025

Chair Ruby and members of the House Human Services Committee,

My name is Dr Ana Tobiasz. I would like to express my support for HB 1477, protecting access to infertility services. I reside in the Bismarck/Mandan area and have been a physician practicing obstetrics and gynecology and maternal fetal medicine in Bismarck since 2017. I am additionally the ND Section Chair representing the American College of Obstetricians and Gynecologists. I refer patients for infertility evaluation and treatment services and have cared for numerous pregnancies achieved via infertility services, including in vitro fertilization (IVF).

Infertility is a health condition not unlike other health conditions such as diabetes or hypertension. Individuals and families affected by infertility experience several barriers to care already, including access to physicians and other health care professionals who can provide these services, insurance coverage for infertility services is generally minimal to non-existent, not to mention the social stigma of having infertility. It takes an extreme toll on their mental, physical, financial, and emotional health.

Previous and currently proposed legislation targeting reproductive health care is adding an additional stressor to individuals and families experiencing infertility. Individuals who require assisted reproductive technology in order to achieve pregnancy and become parents need reassurance that future legislative efforts in the state will not place their ability to achieve pregnancy through IVF at risk.

There is precedent indicating that this access may be legislatively at risk. This includes other legislation introduced this session in the state (HB 1373 as an example) as well as prior ballot initiatives related to definitions of personhood. In 2014, ND voters overwhelmingly voted NO to this measure. This type of legislation would end the practice of IVF in our state, further creating barriers to this essential component of healthcare.

We need to proactively protect access to this necessary healthcare. For these reasons, I ask that you provide a DO PASS recommendation for HB 1477.

Dr Ana Tobiasz, MD
American College of Obstetricians and Gynecologists, ND Section Chair
Maternal Fetal Medicine Physician

Chairperson Ruby and members of the Human Services Committee.

I am asking you to vote yes and support House Bill 1477. As someone who has been standing in front of you since 2019 repeating myself and fighting for North Dakota families experiencing infertility, we need to protect access to care. One in six North Dakota Residents has trouble getting pregnant or sustaining a pregnancy, this includes those experiencing a miscarriage, male factor infertility, and those who have a diagnosis of cancer.

Infertility affects a significant portion of our population, and the advancements in assisted reproductive technologies have provided hope to many aspiring parents. By enacting HB 1477, North Dakota will affirm the rights of individuals to receive fertility treatments, make informed decisions regarding their reproductive genetic material, and enter into necessary agreements with health care providers. This bill also protects healthcare providers, health carriers, and manufacturers, allowing them to offer services and products related to fertility treatments without undue restrictions.

Furthermore, HB 1477 prohibits any state agency or political subdivision from implementing policies that impede access to assisted reproduction services or fertility treatments. This protection is vital to ensure that personal reproductive decisions remain free from governmental interference.

I urge the committee to support HB 1477 and advance it through the legislative process. Focus must remain on advancing policies that ensure access to essential medical care, support reproductive health, and uphold the rights of North Dakotans to build their families without unnecessary barriers. This bill represents a significant step forward in promoting reproductive health rights and supporting individuals and families in North Dakota.

Dr. Tara Harding

Catherine Benton

HB 1477 & HB 1478

January 28, 2025

This written testimony is provided in support of House Bills 1477 and 1478, which ensure access to fertility healthcare treatments such as in vitro fertilization (IVF) and contraception.

Reproductive healthcare is a cornerstone of individuals' and families' well-being and autonomy. IVF and contraception are vital components of this care, empowering people to make informed choices about when and how to expand their families.

For those experiencing infertility, fertility treatments like IVF offer a pathway to parenthood that may otherwise be out of reach. Infertility is a profoundly personal and often heart-wrenching experience. IVF brings hope and an opportunity to those facing medical barriers to having children.

Similarly, access to contraception is crucial for public health and individual freedom. Contraceptives allow individuals to plan pregnancies and protect against specific health conditions. Research indicates that access to contraception reduces unintended pregnancies, enhances maternal and child health outcomes, and contributes to economic stability for families and communities. It's also important to note that birth control is prescribed for numerous health reasons unrelated to preventing pregnancy, such as managing menstrual disorders, controlling acne, and addressing endometriosis.

Protecting access to assisted reproduction and contraception is essential for ensuring equitable and comprehensive reproductive healthcare for all.

This legislation upholds the fundamental principle that everyone deserves the right to access the healthcare they need without fear or government interference. It embodies the values of compassion, scientific integrity, and respect for individual autonomy.

Please support House Bills 1477 and 1478.

Thank you for your time,

Catherine Benton

Clbenton@hotmail.cim

Dear Committee Members,

My name is Tara Herrmann, and I am writing to express my strong support for HB 1477, which is vital for ensuring access to infertility care and reproductive health services in North Dakota.

Infertility is a disease that affects many people around you and the access to care in our state is laughable. No one should have to travel out of state and/or the country to be provided care for a disease that affects 1 in 8 families

The financial burden of treatments, combined with a lack of sufficient insurance coverage and regulatory barriers, leaves many individuals and families without the resources they need to pursue their dream of having children.

HB1477 addresses these challenges by safeguarding access to reproductive healthcare services.

This bill ensures that families facing infertility can receive the medical care they need without unnecessary interference or restrictions.

By supporting HB1477, North Dakota can set an example of compassion and fairness in healthcare, giving hope to countless families who dream of growing their families. I urge you to vote YES on this critical bill.

Thank you for your time and consideration.

Tara Herrmann
tarahimmelspace@hotmail.com

Testimony in Support of HB 1477 and 1478

House Human Services Committee

Christina Sambor, Gender Justice

January 29, 2025

Chairman Ruby and Members of the Committee:

I am submitting testimony on behalf of my organization, Gender Justice, in support of HB 1477 and HB 1478. Gender Justice works in North Dakota and Minnesota to advance gender equity through the law. Gender Justice envisions a world in which everyone can thrive regardless of their gender, gender expression, or sexual orientation. Over the years, Gender Justice has advanced reproductive rights in the upper Midwest, advocating for pregnant people's right to exercise personal autonomy and choice.

HB 1477: North Dakotans have long established our support for reproductive rights and assisted reproductive technology ("ART"), including in vitro fertilization ("IVF"). North Dakotans voted down previous attempts to pass laws that would have the effect of limiting or banning access to ART. There is a current bill before the legislature that if passed, would have the effect of banning IVF. This is not the will of the people of the State of North Dakota. 1 in 6 people experience infertility. For some LGBTQ+ families, ART provides their pathway to having a family. This committee should carefully consider the experience of the many constituents who have voiced support for this bill and provided their experiences of the necessity of ART in their lives or in the lives of their patients, and recommend a do pass on HB 1477, in line with the will of the citizens of North Dakota.

HB 1478: Unimpeded access to contraception has been an vital medical advancement and a critical part of ensuring that women have basic control over their lives. Women in North Dakota should be assured that their continued access to contraception is respected and protected. This is a simple

bill that states an important policy. This legislative body should affirm its support for and commitment to the right of women in North Dakota to exercise this most basic and fundamental aspect of their freedom - control over their bodies, and self-determination over reproduction.

Please recommend a do pass on HB 1478.

Dear Chairman Ruby and Members of the Committee,

I am writing to express my support of HB1477 protecting IVF treatment. I am the Vice President of Operations at Sanford Health overseeing the Women's Service Line in Fargo, North Dakota. We offer reproductive services at the only IVF fertility clinic in North Dakota. Our teams care for thousands of patients each year and ensuring that fertility treatments remain accessible and affordable for those who need these services in North Dakota is important. One in six people experience the disease of infertility and although not every individual requires IVF treatment to conceive, over 3% of all babies born in the United States each year are conceived with the use of IVF. I was born and raised in rural North Dakota and recently moved back two years ago to raise my children in this great state. As a leader in the healthcare industry and someone who has personally struggled with fertility challenges, I strongly encourage you to support HB1477 to allow families who live in North Dakota to receive care in North Dakota.

Thank you for your time and consideration.

Respectfully,

Ashley Erickson

My name is Alexa Swanston and I am a concerned North Dakota resident and mother of two beautiful children that are here today because of the diligent efforts of the staff at Sanford Reproductive Clinic. I am writing today in support of HB1477.

HB1477 necessarily protects the ability to access necessary IVF services to countless residents aiming to grow or start their families.

Seven and a half years ago, in July 2017, I first walked in to the Sanford Reproductive Clinic in Fargo and asked for help. Like many, I had a deep and persistent desire to be a mother. I came from a large family and as the eldest child, knew that I wanted as many children as possible. What I didn't know was that it would take another 4 years, 17 assisted attempts, and profound loss, from the moment I asked for help, for my first child, a son we named William, to be born. May 3, 2021 became the happiest day of my life. It would not have been possible without the knowledge and resources of my medical team. Two years later, I was fortunate enough again to experience unbridled, overwhelming joy and gratitude as we welcomed our second son, Finley, into the world. It is a miracle that he is here today; that miracle was IVF, and the subsequent care it provided.

As all who are lucky enough to be parents know, kids can be a handful more often than not. But I am a person that is defined by my motherhood. Over the last seven and a half years, I have been astounded by the number of people in my life I have come to find have utilized IVF to help grow and create their families. Colleagues and friends, those with multiple children and some still praying for one. There is no one that cares more for an embryo than an IVF patient. However, no one understands more than IVF patients, that an embryo is not a child.

Much of the proposed legislation this term centers on protecting life- and that is what I am asking you to do by supporting HB1477. Please see the lives of my two sons that do not exist without reproductive services. Please see and protect the lives of my future children by keeping these services accessible so that all North Dakota families have the ability to grow.

Thank you for taking the time to read my testimony and consider it in relation to the bills before you.

House Human Services Committee

HB 1477

Wednesday January 29, 2025

Chair Ruby and Committee Members, I am Dr Collette Lessard, a board-certified physician in Obstetrics and Gynecology practicing in Grand Forks, North Dakota. I have been practicing as an OBGYN physician for nearly 12 years. I am also writing as the Legislative Chair for the North Dakota section of the American College of Obstetricians and Gynecologists.

I am writing in support of HB 1477. Infertility evaluation and treatment is a substantial part of my practice as a general OBGYN physician. Approximately 1 in 6 couples are affected by infertility. There are many different causes of infertility, therefore, the treatment options for couples can vary. Infertility treatment can range from ovulation medications to artificial insemination and in vitro fertilization. Sometimes donor sperm and donor eggs are the best option for a couple. There are also cases where fertility preservation is necessary for patients.

The infertility journey is deeply personal and emotional for couples. In the past couple decades, medicine has made immense progress in helping these families conceive. I have been able to care for hundreds of patients in their pregnancies as a direct result of in vitro fertilization. Having a family is a lifelong dream for many women. For some couples, IVF is the only way they can conceive and experience the joy of carrying a pregnancy and growing their family. The state we live in should not impact the options available for families struggling with infertility. The need for protection of infertility treatment options is crucial. The proposed personhood legislation (HB 1373) is a clear example of why we need protection in our state for ensuring access to full spectrum infertility treatment options. A personhood bill would take away the option of IVF for these patients.

Infertility affects more families than most realize. These couples deserve to have all the options available to help grow their families when they are struggling to conceive on their own. Like with HB 1478, I was able to help with expert medical guidance when this bill was drafted. I urge you to give a "do pass" and support HB 1477 so that every couple has continued access to all infertility treatment options in North Dakota.

Respectfully,

Collette Lessard, MD, FACOG

Hello, my name is Cheyenne Ketterling. I currently reside outside of Wishek with my husband, Taylor, where we farm and ranch. I also teach ag education in Edgeley. I grew up being a fixer. In a family of three older girls and one younger brother, I remember helping my dad fix tractors or other equipment, and of course, fixing fence. These days, I spend time helping students fix their projects, figure out how to solve the problem on a worksheet, and how to find their passions for a future career. If theres a problem, I fix it, Im a fixer. What I cannot fix, is my ability to have children. After my husband and I got married at 22, it was a very typical if we have kids right away, great, and if not, thats fine too. After two years of marriage, we tried to conceive to have children. After a few months of negative results, I reached out to Tara Harding to figure out if there was something wrong. After a few more months of supplements, medications, tests, and other appointments, there was still no baby to be seen. We were referred to Balance Medical in Bismarck. Once again, tests were done, appointments were made, different dosages of medication, and still it seemed like everyone in the world was having babies but us. Next we had two options that were relatively close to us. We could go to Minneapolis for treatments, or we could go to Fargo for treatments. With our location and careers, we chose Fargo. We started with IUI which stands for intrauterine insemination. We were told everywhere we had been to that we are a young, healthy couple. We should have easily gotten pregnant without any treatments, yet here we were. We had 3 failed IUIs. The possibility of each one producing a baby made us so hopeful, instead, each one ended in more heartbreak. We then made the decision to do IVF. Egg retrieval and FET were words I didnt think I would ever have to know so intimately. Shots in the stomach, medications, bloating, ultrasounds, traveling to appointments, and pain were something I was getting used to during egg retrieval, but it would all be worth it right? We were able to have 4 good embryos frozen. FET, or fetal embryo transfer, would allow us to finally see a baby of our own. Now, after close to \$40,000 of our own money spent trying to have a child of our own, we still dont have one. Unexplained infertility is what weve been diagnosed with. Our only hope of babies of our own is with science. Science God created for couples who struggle with infertility.

If you have children of your own, I want you to think about all of the good times, laughs, or great memories youve had with them through their lifetime. If you have grandchildren, think about the joy they bring you. Now think about the times youve argued, disagreed, or were angry with them. And finally, take away all of it. Every memory, good time, or bad time. What does your life look like now? It feels pretty empty right?

This is how so many families feel. 1 in 6 families are affected with infertility, and its the only medical condition that insurance routinely excludes from coverage. Infertility isnt something I can fix. I cant fix unexplained infertility. Infertility is not a choice its a medical condition, and it should be treated like one. I encourage you to vote YES on house bills 1282, 1284, and 1477 to help us couples like many of you to have families.

Also, please vote NO on house bill 1373, which is trying to redefine the definition of a human being and unborn child, once again restricting IVF access and going against couples starting families.

Thank you for listening and your time and consideration today.

Sincerely,
Cheyenne Ketterling
Cell: 701-320-6180

Chairman Ruby and Members of the Committee,

I am writing this testimony as support for HB 1477.

I am an embryologist at the only IVF fertility clinic in North Dakota. I directly work with patients who are working to create a family. As someone with (first hand experience/day to day interactions/specialized training as an embryologist), I strongly encourage you to support HB1477 so that we can continue to provide care to our patients. Infertility is a medical diagnosis, and North Dakotans should have access to treatment of this medical disease. We care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility. Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

Sincerely,

Amber Hoekstra

Chairman Ruby and Members of the Committee:

I am writing this testimony in support for HB 1477.

I am an embryologist at the only IVF fertility clinic in North Dakota. I work with all types of patients who are working to create a family. As someone with specialized training in these IVF laboratory procedures, I strongly encourage you to support HB1477 so that we can continue to provide exceptional care to our patients.

Infertility is a medical diagnosis and should be treated as such. North Dakotans should have access to treatment of this medical disease. I care strongly for the women and men of our state, and for the 1 in 6 couples that battle infertility. Please take this opportunity to show your support for your friends, family, coworkers and the citizens of your state to access these services by passing HB1477.

Sincerely,
Jennifer Wadeson, MT(ASCP)^{CM}

My name is Meagan McDougall, and I usually introduce myself as a proud North Dakotan. My family has been in North Dakota for generations, and I chose to stay in North Dakota to work, live, and hopefully build my family. You can ask any of my friends and they'll affirm that I am always pitching the value of living in North Dakota – kind people, affordable living, job opportunities – the American dream.

Part of making this dream a reality for my family and for countless others is providing access to fertility treatments. This is why I am writing today in support of HB 1477. HB 1477 protects the ability to access necessary IVF services to ND residents aiming to start or grow their families.

For my family, and many people in my network, treatment from facilities like Sanford Reproductive Clinic in Fargo, where I receive my care, is a medical necessity in order to have children. I fear for what losing fertility protections would mean for families, communities, and our state. Without protecting this access, we risk families losing their ability to expand, and being forced to make the awful choice to let go of that dream, seek care in other states, or potentially move their families closer to where they can receive necessary treatments. We risk families not considering North Dakota as a place to seek employment opportunities due to not having access to necessary care, which will impact all North Dakota businesses. We risk facilities like Sanford Reproductive Clinic's ability to operate in North Dakota and be forced to shutter their doors.

I want to continue to introduce myself as a proud North Dakotan. Please support families like mine and across the state by supporting HB 1477. Please protect the lives of our future children by keeping fertility services accessible to all North Dakota families so they have the ability to grow and build lives in my beautiful state.

Thank you for taking the time to read this testimony.

2025 HOUSE STANDING COMMITTEE MINUTES

Human Services Committee Pioneer Room, State Capitol

HB 1477
2/10/2025

Relating to fertility health care treatment rights; and to provide a penalty.

2:48 p.m. Chairman M. Ruby opened the meeting.

Members Present: Chairman M. Ruby, Vice-Chairman Frelich, Representatives Anderson, Beltz, Bolinske, Davis, Dobervich, Fegley, Hendrix, Holle, Kiefert, Rios, Rohr

Discussion Topics:

- Committee action

2:49 p.m. Representative K. Anderson moved a Do Not Pass.

2:49 p.m. Representative Rohr seconded the motion.

Representatives	Vote
Representative Matthew Ruby	Y
Representative Kathy Frelich	Y
Representative Karen Anderson	Y
Representative Mike Beltz	N
Representative Macy Bolinske	Y
Representative Jayme Davis	N
Representative Gretchen Dobervich	N
Representative Cleyton Fegley	Y
Representative Jared Hendrix	Y
Representative Dawson Holle	Y
Representative Dwight Kiefert	Y
Representative Nico Rios	Y
Representative Karen Rohr	Y

2:50 p.m. Motion passed 10-3-0.

Representative Hendrix will carry the bill.

2:51 p.m. Chairman M. Ruby closed the meeting.

Jackson Toman, Committee Clerk

REPORT OF STANDING COMMITTEE
HB 1477 ([25.0342.02000](#))

Human Services Committee (Rep. M. Ruby, Chairman) recommends **DO NOT PASS** (10 YEAS, 3 NAYS, 0 ABSENT AND NOT VOTING). HB 1477 was placed on the Eleventh order on the calendar.