



Hawaii Women's Coalition

To: Hawai'i State Senate Committees on Government Operations and Commerce and Consumer Protection

Hearing Date/Time: Wed., Mar. 23, 2021, 9:30 am

Place: Hawai'i State Capitol, Rm. 229

Re: Testimony of Hawai'i Women's Coalition in strong support of SCR 143

Dear Chairs Moriwaki and Baker and Members of the Committees,

All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

Thousands of people in Hawai'i still lack access to the full range of health services.

Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security.

- While state law requires insurance plans to pay for the full range of FDA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services.
- RHEA would fill these coverage gaps – it would strengthen state law by requiring a wide range of sexual and reproductive health care services with no out-of-pocket costs.
- Hawai'i needs RHEA: forcing people to pay out-of-pocket for sexual and reproductive health care negatively impacts health, particularly for those who already face significant barriers to care. Forcing people to delay or forego preventive care would only serve to create new public health crises and strain emergency services during a global pandemic.
- Transgender and gender non-conforming people often face barriers when accessing services categorized as "women's" health care, including gender-specific cancer screenings and the full range of reproductive health services. RHEA would help transgender and gender non-conforming people access these necessary and life-saving services.

Hawaii needs SCR 143 to pass RHEA and fill gaps in sexual and reproductive health coverage.

RHEA will ensure that people in Hawai'i have coverage for crucial preventive sexual and reproductive health services at zero out-of-pocket cost and prohibit discrimination by:

- Requiring insurers to cover essential sexual and reproductive health services without cost-sharing, including abortion, the full range of contraceptive methods, and vasectomy;
- Prohibiting insurance companies from discriminating in insurance coverage, including coverage of reproductive health services, based on gender or gender identity.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family.

Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

Sincerely,

Laurie Field
Hawai'i Women's Coalition Community Co-Chair



March 21, 2021

Senate's Committees on Government Operations, & Commerce and Consumer Protection
Hawai'i State Capitol
415 South Beretania Street
Honolulu, HI 96813

RE: **Senate Concurrent Resolution 143**

Aloha Chairs Moriwaki & Baker, and Committee Members,

I am writing in support for Senate Concurrent Resolution 143 on behalf of the LGBT Caucus of the Democratic Party of Hawai'i, Hawaii's oldest and largest policy and political LGBTQIA+ focused organization. SCR 142 calls for REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED MANDATORY HEALTH INSURANCE COVERAGE.

The LGBT Caucus has been informed that the end result for SCR 143 is to support the goals laid out in Senate Bill 623. The LGBT Caucus fully supports SB 623 which calls for requiring health insurance coverage for various sexual and reproductive health care services.

We understand the need for the Auditor to conduct the "sunrise audit" called for in SCR 143 to be in compliance with Hawai'i Revised Statute (HRS) section 23-51 as well as HRS section 23-52.

Mahalo nui loa for your time and consideration,

Michael Golojuch, Jr.
Chair
LGBT Caucus of the Democratic Party of Hawai'i

SCR-143

Submitted on: 3/22/2021 8:05:47 AM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Nikki-Ann Yee	Testifying for Ma'i Movement Hawai'i	Support	No

Comments:

I support SCR 143 requesting the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

Thousands of people in Hawai'i still lack access to the full range of health services. Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security. Hawaii needs SCR 143 to pass RHEA and fill gaps in sexual and reproductive health coverage.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

To: Hawai'i State Senate Committees on Government Operations and Commerce and Consumer Protection

Hearing Date/Time: Tues., Mar. 23, 2021, 9:30 am

Place: Hawai'i State Capitol, Rm. 229

Re: Testimony of Planned Parenthood Votes Northwest and Hawai'i in strong support of SCR 143

Dear Chairs Moriwaki and Baker and Members of the Committees,

All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act (“ACA”) and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act (“RHEA”), if required pursuant to H.R.S. §23-51.

We need RHEA, which requires insurance coverage of the full range of sexual and reproductive health care. While state law requires insurance plans to pay the full range of FSA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services. Without action, people in Hawai'i will continue to delay care or forego care altogether due to these out-of-pocket costs, risking their health and economic security. We are already seeing the consequences of Hawaii's coverage gaps: for example, Hawaii's sexually transmitted infections (STIs) rates are the highest they have been in 30 years, with the STI rates more than doubling over the last ten years. The Trump Administration's top priority was enacting restrictions on health care access and undermining consumer protections; they targeted the rights of women and LGBTQ people with attacks on non-discrimination protections and access to abortion and birth control, even finalizing a rule designed to make it much more difficult for private health insurance plans to cover abortion care. While the Administration is no longer in office, many of these harmful policies remain in place, threatening the well-being of people in Hawai'i. With the Supreme Court poised to gut abortion access and the ACA, insurers will most certainly consider discontinuing this important coverage.

Given these federal attacks on basic rights and health care, it is more important than ever that our state legislature act to ensure that nobody loses access to the health care and protections they depend on. RHEA will do just that. We need legislation to codify the Affordable Care Act (ACA) preventive service coverage requirements in state law, ensuring that people in Hawai'i don't lose their access to no-cost preventive services such as birth control, well-person exams, and life-saving cancer screenings. RHEA would also strengthen and expand these coverage requirements by requiring coverage of the full range of sexual and reproductive health care services, including abortion and vasectomy. And it would make sure that all people in Hawai'i can access these important services, regardless of gender, gender identity, or sexual orientation.

SCR 143 will help us enact a cost-effective solution through RHEA. Protecting and expanding access to sexual and reproductive health is not only the right thing to do, it's also cost-effective for consumers and health plans alike. The services included in this legislation are basic components of comprehensive sexual

and reproductive health care and are all associated with significant potential cost savings. That's because providing basic preventive care avoids the need for more expensive treatment and management down the road; for example, preventing unplanned pregnancies creates significant cost-savings. Therefore, even if some services are determined to be new mandated benefits, in the long term, covering these services would likely be either cost-neutral or even create cost savings for health plans, which is critical given Hawai'i's ongoing budget crisis. Because of this cost-effectiveness, requiring coverage of these services would likely have a minimal impact on premiums, which in turn means that there would be minimal additional cost to the state to offset any potential premium increases.

RHEA is similar to coverage requirements in other states. Many other states have already implemented requirements found in RHEA, including the comprehensive sexual and reproductive health requirements. For example:

In 2018, the Washington Legislature passed Substitute Senate Bill 6219, also known as the Reproductive Parity Act.¹ This legislation required that state-regulated health plans that cover maternity care provide substantially equivalent coverage for abortion care. It also expanded contraceptive coverage requirements beyond those in the ACA, including gender-neutral coverage of sterilization services for all enrollees and coverage of over-the-counter contraception. None of the requirements in this legislation was determined to be a new mandate that would trigger section 1311(d)(3) of the ACA.

In 2017, the Oregon Legislature passed House Bill 3391, also known as the Reproductive Health Equity Act.² This bill required comprehensive, non-discriminatory coverage of sexual and reproductive health care services. This included coverage of abortion and a wide range of other sexual and reproductive health care services at no out-of-pocket cost to the patient.

In 2019, the Illinois Legislature passed the Illinois Reproductive Health Act, which required public and private insurance plans that provide pregnancy benefits to also cover abortions services – any deductible, coinsurance, waiting period, or other cost-sharing limit that applies to abortion cannot be higher than what the policy requires for other pregnancy care.³

Several states have also put in place laws that codify existing requirements from the ACA to ensure that those important protections stay in place at the state level, no matter what happens at the federal level. For example, in 2017, Washington State enacted legislation requiring state-regulated health plans to cover all preventive services required to be covered under federal law as of December 31, 2016, without cost sharing.⁴ The requirements of this legislation are broader than Hawai'i's RHEA, but the reproductive preventive health services are nearly identical to the coverage required in §431:10A-A(a)(1). In the fiscal note for Washington's legislation, the Washington Office of the Insurance Commissioner (OIC) noted that “[t]his bill does not have a direct fiscal impact on the OIC because the bill maintains coverage of preventive services with zero cost-sharing as they currently exist in Federal law and are currently being enforced by the OIC.”⁵ As OIC rightly stated, these are not new requirements: RHEA and similar legislation in other states

¹ Washington State Legislature, *Senate Bill 6219*, 2018. Accessed at <https://app.leg.wa.gov/billssummary?BillNumber=6219&Initiative=false&Year=2017>

² Oregon State Legislature, *Senate Bill 3391*, 2017. Accessed at <https://olis.leg.state.or.us/liz/2017R1/Downloads/MeasureDocument/HB3391>

³ Illinois State Legislature, *House bill 2495*, 2019. Accessed at <http://www.ilga.gov/legislation/billstatus.asp?DocNum=2495&GAID=15&GA=101&DocTypeID=HB&LegID=118530&SessionID=108>

⁴ Washington State Legislature, *Engrossed Substitute House Bill 1523*, 2018. Accessed at <https://app.leg.wa.gov/billssummary?BillNumber=1523&Year=2017&Initiative=false>

⁵ Washington State Office of Financial Management, *Multi-Agency Fiscal Note Summary for ESHB 1523*, 2018. Accessed at <https://fortress.wa.gov/ofm/fnspublic/FNSPublicSearch/Search/1523/65>

simply require health plans to continue covering the basic health care that the ACA already requires them to cover. For example, states must already comply with coverage for any additional preventive women's services under 42 U.S. Code section 300gg-13 of the ACA. These federal coverage requirements are already in place across the country and have already been well-defined.

Other states that have passed coverage requirements have found that continuing to require health plans to cover existing mandates in the ACA is simple and minimally burdensome. And other states have also determined that passing legislation that includes broader coverage requirements than those included in the ACA does not necessarily create new mandates, because in some cases these coverage requirements simply clarify and codify the state's existing commitment to covering comprehensive, non-discriminatory sexual and reproductive health care. ACA requirements also continue to expand and evolve, making the impact of RHEA on Hawai'i minimal – for example, all plans that have an effective date of June 11, 2020 or later are now required to cover PrEP medication without cost sharing. This RHEA resolution will help Hawai'i look to the example of other states, learn from their experiences and successes, and better understand the benefits of coverage under RHEA.

We need a RHEA to protect confidentiality. The HIPAA Privacy Rule requires providers and insurers to protect patients' Personal Health Information (PHI). However, a provision allowing for some disclosures in connection with billing and payment can and does lead to the disclosure of patients' PHI, sometimes without their understanding or permission. Without strong protections to prevent such disclosure, teens and young adults insured on their parents' health plan may be deterred from seeking care, particularly sensitive services like reproductive health care and mental health services. Victims of domestic and sexual assault may also be prevented from safely accessing care such as contraception and STI testing without their abuser finding out. And if individuals with confidentiality concerns do seek care, they may not be able to use their insurance, forcing them to pay out-of-pocket or turn to already-strained safety net programs.

A number of other states have also taken steps to improve health care access and protect confidentiality for individuals insured as dependents by requiring that health plans communicate directly with the individual receiving care. Planned Parenthood strongly supports putting in place similar confidentiality protections in Hawai'i.

Thousands of people in Hawai'i still lack access to the full range of reproductive health services.

Access to comprehensive sexual and reproductive health care, without discrimination, is critical for the health and economic security of people in Hawai'i. RHEA will give more people in Hawai'i the ability to decide if and when they have children based on what's best for them and their family's circumstances. Hawai'i must continue its leadership in promoting all peoples' ability to access the health care they need and deserve, no matter what happens at the federal level. Please give Hawai'i families access to the health care they need to thrive by supporting SCR 143 and giving us the ability to pass RHEA in the future.

Thank you for your consideration and support for this important resolution.

Sincerely,

Laurie Field
Hawai'i State Director
Planned Parenthood Votes Northwest and Hawai'i

LATE

SCR-143

Submitted on: 3/22/2021 9:32:04 AM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Mandy Fernandes	Testifying for ACLU of Hawaii	Support	No

Comments:

The ACLU of Hawai'i supports this resolution.

LATE

SCR-143

Submitted on: 3/22/2021 5:55:23 PM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
amy agbayani	Testifying for Hawai'i Friends of Civil Rights	Support	No

Comments:

While state law requires insurance plans to pay for the full range of FDA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services. RHEA would fill these coverage gaps – it would strengthen state law by requiring a wide range of sexual and reproductive health care services with no out-of-pocket costs.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

Amy Agbayani, co-chair Hawai'i Friends of Civil Rights

LATE

Statement Before The
**SENATE COMMITTEE ON GOVERNMENT OPERATIONS
AND
SENATE COMMITTEE ON COMMERCE AND CONSUMER PROTECTION**
Tuesday, March 23, 2021
9:30 AM
Conference Room 229 and Videoconference

in consideration of
SCR 143
**REQUESTING THE AUDITOR TO CONDUCT A SOCIAL AND FINANCIAL ASSESSMENT OF PROPOSED
MANDATORY HEALTH INSURANCE COVERAGE.**

Chairs MORIWAKI and BAKER, Vice Chairs DELA CRUZ and CHANG, and Members of the Senate Government Operations and Commerce and Consumer Protection Committees

Common Cause Hawaii provides comments in support of SCR 126 / SR 85, which requests the Auditor to conduct a social and financial assessment of proposed mandatory health insurance coverage.

Common Cause Hawaii is a nonprofit, nonpartisan, grassroots organization dedicated to strengthening democracy.

Common Cause Hawaii understands that when the people of Hawaii have access, without discrimination, to the full range of sexual and reproductive health care services, benefits, and protections, without cost-sharing, their health and, in turn, economic security will flourish. This will mean security and stability for their families, communities, and our state as a whole. Expanding access to comprehensive sexual and reproductive health care for residents of Hawaii will ensure a healthy, vibrant democracy and should be studied.

Thank you for the opportunity to comment in support of SCR 143. If you have further questions of me, please contact me at sma@commoncause.org.

Very respectfully yours,

Sandy Ma
Executive Director, Common Cause Hawaii

SCR-143

Submitted on: 3/22/2021 7:57:32 AM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Emma Ishihara	Individual	Support	No

Comments:

Chair, Vice Chair, and esteemed members of the committee,

My name is Emma and I as a lifelong resident of KÄ• ne'ohe, would like to submit my strong support for SCR 143, which would address vital health disparities among access to necessary services that should be covered by health insurance.

Mahalo nui for this opportunity to testify in strong support of SCR 143,

Emma Ishihara.

SCR-143

Submitted on: 3/22/2021 9:22:35 AM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Melissa Martinez	Individual	Support	No

Comments:

All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

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Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security.

- While state law requires insurance plans to pay for the full range of FDA-approved contraceptives without cost-sharing, thousands of people must pay out-of-pocket for other basic, preventive health services.
- RHEA would fill these coverage gaps – it would strengthen state law by requiring a wide range of sexual and reproductive health care services with no out-of-pocket costs.
- Hawai'i needs RHEA: forcing people to pay out-of-pocket for sexual and reproductive health care negatively impacts health, particularly for those who already face significant barriers to care. Forcing people to delay or forego preventive care would only serve to create new public health crises and strain emergency services during a global pandemic.

- Transgender and gender non-conforming people often face barriers when accessing services categorized as “women’s” health care, including gender-specific cancer screenings and the full range of reproductive health services. RHEA would help transgender and gender non-conforming people access these necessary and life-saving services.

Hawaii needs SCR 143 to pass RHEA and fill gaps in sexual and reproductive health coverage.

RHEA will ensure that people in Hawai'i have coverage for crucial preventive sexual and reproductive health services at zero out-of-pocket cost and prohibit discrimination by:

- Requiring insurers to cover essential sexual and reproductive health services without cost-sharing, including abortion, the full range of contraceptive methods, and vasectomy;
- Prohibiting insurance companies from discriminating in insurance coverage, including coverage of reproductive health services, based on gender or gender identity.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

LATE

SCR-143

Submitted on: 3/22/2021 9:34:20 AM
Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Barbara J. Service	Individual	Support	No

Comments:

Plase support an assessment of the social and financial aspects of mandatory health coverage.mandatory health coverage. T

Far too many individuals do not have necessary coverage due to income, social status, etc. Access is especially dire in rural areas.

Thank you for allowing me to testify.

Barbara J. Service MSW (ret.)

Senior advocate

LATE

SCR-143

Submitted on: 3/22/2021 11:13:45 AM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Alani Bagcal	Individual	Support	No

Comments:

Aloha e Chairs, Vice-Chairs and Members of the Committees,

My name is Alani Bagcal and I am testifying today in strong support of SCR143. All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

Thousands of people in Hawai'i still lack access to the full range of health services. Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security.

Thank you for the opportunity to testify in support of this bill.

Alani Bagcal

96815

LATE

SCR-143

Submitted on: 3/22/2021 1:22:05 PM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Anna Chua	Individual	Support	No

Comments:

All people in Hawai'i – regardless of income, gender identity, or type of insurance – should have access to the full range of preventive sexual and reproductive health services at no cost, especially in the wake of COVID-19 and widespread job loss. With the Affordable Care Act and abortion access under threat at the Supreme Court, Hawai'i should pass legislation to solidify ACA health benefits, safeguard access to abortion, and save money in the budget down the road.

Now is the time to take action to ensure all people in Hawai'i have access to the full range of preventive sexual and reproductive health services with no out-of-pocket costs. SCR 143 will request the Auditor to conduct a social and financial assessment of the mandatory health insurance coverage proposed under S.B. 623, the Reproductive Health Equity Act ("RHEA"), if required pursuant to H.R.S. §23-51.

Thousands of people in Hawai'i still lack access to the full range of health services and are forced to pay out-of-pocket for other basic, preventive health services. Without action, people in Hawai'i will continue to be forced to pay high costs and delay care or forego care altogether, risking their health and economic security. Transgender and gender non-conforming people often face barriers when accessing services categorized as "women's" health care, including gender-specific cancer screenings and the full range of reproductive health services. RHEA would help transgender and gender non-conforming people access these necessary and life-saving services. It is imperative to eliminate discrimination to accessing coverage of reproductive health services, based on gender or gender identity.

All people deserve equal access to health care and the freedom to decide whether or not to become a parent or grow a family. Please pass SCR 143 to ensure that RHEA can provide people in Hawai'i with access to the care they need.

Thank you for your consideration and support for this important resolution.

Anna Chua

96826

LATE

SCR-143

Submitted on: 3/22/2021 9:02:51 PM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Mikaila Samsen	Individual	Support	No

Comments:

Dear Chairs Moriwaki and Baker and Members of the Committees,

Considering the immense need for equitable healthcare access during the Covid-19 Pandemic, I stand in strong support of SCR 143.

I am a student of Social Work at the University of Hawai'i at Manoa, and I believe that the people in my community should be able to have equal access to necessary healthcare regardless of what insurance they have. Reproductive healthcare is vital. SCR 143 will allow for an auditor to conduct an assessment of the mandatory health insurance proposed under S.B. 623. It is important that all people are able to get the full range of coverage. At this time, there are many people who are having to pay out-of-pocket for their reproductive healthcare. SCR 143 can help the progression of our state adopting the RHEA or Reproductive Health Equity Act. Washington, Oregon, and Illinois are examples of states who have adopted similar laws to improve equitable access to reproductive healthcare. I believe that all people should be able to make their own decisions regarding their body and when they want to start a family, and this decision should not have a price tag.

Thank you for your consideration of this important resolution.

Sincerely,

Mikaila Samsen

SCR-143

Submitted on: 3/22/2021 10:41:39 PM

Testimony for GVO on 3/23/2021 9:30:00 AM

Submitted By	Organization	Testifier Position	Present at Hearing
Anastasia Sanft	Individual	Support	No

Comments:

Senate Committee on Government Operations

Senate Committee on Commerce and Consumer Protection

Dear Chairs, Vice-Chairs and members of the committee,

My name is Anastasia, and I am writing today in **support** of SCR 143.

Forcing people to pay out-of-pocket for sexual and reproductive health care negatively impacts health, particularly for those who already face significant barriers to care. Forcing people to delay or forego preventive care would only serve to create new public health crises and strain emergency services during a global pandemic.

Thank you for the opportunity to testify in support of this bill,

Anastasia Sanft

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