

Submitter: Evagelia Kosmas
On Behalf Of:
Committee: Senate Committee On Health Care
Measure: SB491

My name is Evagelia (Eva) Kosmas and I have Diminished Ovarian Reserve, commonly referred to in the medical field as DOR. This means I have less eggs than the average woman, and the eggs I do have are of low quality and more likely to be genetically unviable, which also means a higher likelihood of miscarriage if I do conceive.

This is what happened during my only pregnancy, which ended in a “missed” miscarriage. Basically, the fetus passed away at 6 weeks, but we didn’t find out until my first ultrasound at 11-weeks because my body didn’t register the death and didn’t physically pass the fetus. I had to have a D&C to prevent sepsis.

After that, I went to ORM (Oregon Reproductive Medicine) and over the past year I have had 2 failed IUIs (intrauterine inseminations) and two “failed” IVF cycles. They failed because while they were able to retrieve eggs, none of the eggs were genetically normal. This is consistent with a DOR diagnosis. It will take me many rounds of IVF to be able to get genetically healthy eggs, but unfortunately my husband and I can only afford one more round, so this is our last chance. However, if this bill were to pass, it would allow us to continue down this road.

On the off chance that we are able to conceive naturally, it is very likely it would be another miscarriage because of the DOR diagnosis. When you want a child so desperately, having a miscarriage is indescribably painful. It feels like the world has played the cruelest trick on you. This bill would save hundreds if not thousands of couples battling infertility from the unnecessary grief and pain of miscarriage due to the ability to genetically screen the embryos before implantation.

I am 35, self-employed and pay \$430 a month for health insurance. My husband is 35, self-employed, and pays \$300 a month for health insurance. We get no PTO, no maternity leave, no benefits of any kind. We have spent over \$54,000 out of pocket on infertility treatments over the past year. It is absolutely ridiculous that we have to pay out of pocket for a legitimate diagnosed medical condition when we pay nearly \$9,000 a year in health insurance as two otherwise completely healthy 30-somethings.

While the root of infertility not being covered by health insurance has deep ties to misogyny and an overall lack of care for women’s health in general, the truth is that it obviously does *not* only affect women. My husband has been equally devastated at every stage of our infertility struggle, and men have their own infertility diagnoses, as

well.

The stress that comes with the financial strain of having to pay out of pocket for absolutely everything just makes the emotional, mental, and physical pain worse. 20 other states have passed similar legislature mandating insurance companies to cover infertility treatments, and Oregon needs to stop being behind-the-curve and stand up for the rights of its citizens. Infertility doesn't care what political party you're a part of, it doesn't care about your gender or your orientation. It is a disease and it affects us all indiscriminately. And that also means that a bill like this will help *all* Oregonians.

Please vote in favor of SB 491. Thank you so much.