Senate Commerce and Consumer Protection Committee

Testimony in Support of SF 1961 for 3/5 Senate Commerce and Consumer Protection Committee

My name is Charles Nettell, and I live in Eden Prairie, Minnesota. I am a volunteer Patient Advocate Leader for FORCE. FORCE is a leading nonprofit for people at risk for hereditary cancer, providing trusted information, support and advocacy. Most of FORCE's constituents carry an inherited genetic mutation, like a BRCA mutation or Lynch Syndrome, that significantly increases their risk of cancers, including breast, colorectal, endometrial, ovarian, prostate, pancreatic and gastric cancers.

Individuals with a genetic mutation associated with hereditary cancer and/or those diagnosed with cancer often must make surgical or treatment decisions that leave them infertile or sterile. Fertility preservation and the associated services may not be covered by health insurers. I have genetic mutation that puts me at high risk for certain cancers. I have passed this genetic mutation on to both of my children, neither of whom have started a family. I do not want them to have to choose between the treatments they need and having a family due to lack of coverage for fertility preservation and treatments.

National medical guidelines for individuals at high risk of cancer may include risk reducing/preventive surgery. Individuals with an inherited genetic mutation causing a high risk of ovarian cancer are advised to undergo surgery to remove their ovaries and fallopian tubes to avoid this deadly disease. My daughter, who had a double mastectomy last year due to high risk of breast cancer, will need to consider having her ovaries removed when she hits her mid to late 30s. For people undergoing this type of surgery, fertility preservation and treatments are the only means available to protect their future reproductive capability.

Individuals with hereditary cancer genetic mutations often learn about their mutation as young adults before they have built a family. Young adults diagnosed with cancer have very high survival rates (approx. 85%) and deserve a chance to have children after cancer; this bill is *pro-family.* People diagnosed with cancer urgently need access to timely, affordable fertility preservation before they undergo surgery and/or begin treatments that may leave them infertile or sterile. Without insurance coverage, many individuals cannot afford fertility services, curtailing their dream of having biological children.

There are 24 other states that have already passed similar laws, and Minnesota should do the same. I ask the committee to vote in favor of SF 1961.

Thank you for your consideration,
Charles Nettell
FORCE volunteer Patient Advocate Leader Eden
Prairie, Minnesota