



May 1, 2023

House Health Care Committee
Vermont State House
115 State Street
Montpelier, VT 05633-5301

Dear Chair Houghton, Vice Chair McFaun, and Health Care committee members,

On behalf of PPNNE, I am writing to express our strong support for **H.369, “An act relating to health insurance and Medicaid coverage for fertility-related services”** and respectfully ask that the committee advance this bill next year. H. 369 would require private health insurance plans and Vermont Medicaid to provide coverage for fertility care.

PPNNE is the largest reproductive health care and sexuality education provider and advocate in northern New England with health centers in Vermont, New Hampshire, and Maine. There are seven PPNNE health centers in Vermont, and last year we served 16,000 patients in our state.

Our services include:

Abortion services; birth control; cervical, breast, colorectal, and other cancer screenings; erectile dysfunction treatment; follow up services for abnormal Pap tests and HPV; initial infertility work-up; miscarriage care; trans-inclusive health care, including gender-affirming hormone therapy; STD testing and treatment, and prevention services; and well-person checkups, and more.

Reproductive autonomy is a core Vermont value as we heard loud and clear in November with Vermonters resounding support of adding Proposal 5 to our state constitution. Health insurance policies in Vermont should provide coverage for fertility diagnostic care, fertility treatment, and medically necessary fertility preservation. We support this bill because it is essential that all Vermonters have the ability to determine their reproductive futures.

Thank you for your consideration.

Sincerely,

Lucy Leriche

Lucy Leriche (She/Her/Hers)

Vice President, Public Affairs, Vermont

Planned Parenthood of Northern New England

Planned Parenthood Vermont Action Fund

784 Hercules Drive, Ste 110 | Colchester, VT 05446

C: (802) 598-4182

www.ppnne.org | Lucy.Leriche@ppnne.org

Lucy Leriche testimony on S.37, “An act relating to access to legally protected health care activity and regulation of health care providers.” April 12, 2023. House Committee on Health Care.

Thank you for having me here today.

My name is Lucy Leriche and I’m the Vice President of Vermont Public Affairs at Planned Parenthood of Northern New England, or PPNNE.

I want to express my gratitude to Chair Houghton and to this committee for taking up bill S.37, and for your leadership in doing all that you can to protect patients and health care providers in accessing and providing health care in Vermont.

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For the second year in a row, PPNNE was named a **2022 Human Experience Guardian of Excellence Award® winner** by Press Ganey. PPNNE partners with Press Ganey to measure patient satisfaction through after-visit surveys. Annually, Press Ganey ranks the top hospitals and health systems across the country and recognized PPNNE for our outstanding performance in the category of patient experience. PPNNE was in the top 5 percent for patient experience out of more than 41,000 health care facilities that Press Ganey evaluates. PPNNE is the only Planned Parenthood affiliate across the country to be recognized in this category and is just one of three health care providers of any kind to be recognized from Maine, New Hampshire, or Vermont.

PPNNE health center clinicians include physicians, physician assistants, nurses and nurse practitioners. All clinical staff in our health centers practice compassionate, non-judgmental, patient-centered, evidenced based health care within their scopes of practice and according to their license to practice in the state of Vermont.

PPNNE Physicians and Physicians Assistants are regulated by the Board of Medical Practice within the Vermont Department of Health. The Board of Nursing oversees anyone with a nursing license such as Nurses and Nurse Practitioners.

To assure patient safety and the highest standard of care, Planned Parenthood performs credentialing at hire to validate applicant credentials including license and other qualifications provided in their applications for employment. We recredential all clinicians annually thereafter.

Regarding ultrasound specifically, within our medical protocols, PPNNE has an internal quality assurance program and privileging process that is overseen by the Program Director of Ultrasound. It consists of guidelines, training and sign off process and annual performance proficiency for ultrasound. Ultrasounds can be performed by any health center staff but only mid-level or higher clinicians are authorized to interpret ultrasounds.

PPNNE adheres to all relevant federal laws. A Patient Bill of Rights is posted prominently at the entrance to all of our health centers. Any health care facility that bills insurance must comply with HIPPA for patient data protection and confidentiality. Because they do not bill insurance, crisis pregnancy centers are not subject to HIPPA regulations. That means patient data and privacy could be at risk without a patient's knowledge.

PPNNE maintains CLIA certification. CLIA certifies compliance with all federal laboratory regulations. We are formally reassessed every two years.

As a recipient of federal Title X funding for family planning services, PPNNE counsels patients on the full range of options regarding a pregnancy. PPNNE provides mandatory training on how to provide this education in an unbiased manor.

Our required operating procedure requires patient education and informed consent from all patients for all health care services.

PPNNE advertises on several different channels to reach established and potential patients. These include Google search and display, social media like Instagram, Snapchat and Facebook, digital placements on relevant news sites such as Seven Days, streaming services like Spotify, and at times more traditional advertising platforms such as radio or television, depending on the patients we are trying to reach and the services we are promoting.

With regard to advertising, ensuring medical accuracy in our advertisements is our top priority. Long before we get to the point of placing an ad, our proposed design and language is sent to a clinically trained staff member who reviews it for accuracy and approves the ad before it is placed. They also review the landing page on our website for medical accuracy.

Each advertising platform we advertise on also has its own set of rules about advertising health services. Google Ads, for example, makes advertisers like PPNNE go through a certification process in order to advertise abortion. We had to apply for this certification and be approved by Google. Our ads on Google now display a mandatory ad disclosure that says, "Provides abortion."

Crisis pregnancy centers and other facilities that do not provide abortions are supposed to go through the same process with Google and have an ad disclosure that says “Does not provide abortions.” We have seen that this is not always the case and sometimes their ads are approved without the disclaimer, creating further confusion among patients.

We must also adhere to Google’s strict pharmaceutical advertising policies in order to run ads about birth control, emergency contraception, and even antibiotics that treat sexually transmitted infections and UTIs.

When it comes to Facebook and Instagram, although we were trying to advertise our health services, the group deemed PPNNE a political organization and therefore we had to go through a special approval process normally reserved for politicians and legislative campaigns. Staff members trying to place the ads had to be personally vetted by Facebook, which included submitting a copy of their driver’s license, as well as receiving a letter to their home address to verify their identity.

Despite having the highest of advertising standards and following the rules set forth by these advertising companies, PPNNE continues to face discrimination in advertising because of who we are. We’ve been denied the right to advertise a medicine to prevent HIV through bus companies; told by a social media platform that we’re too controversial to place ads; and have had our ads on Facebook and Instagram denied over and over again, even with the identity approval in place. It takes our staff an incredible amount of time to appeal these denials and set up even the simplest of advertising campaigns in order to get this much needed sexual and reproductive information out to our patients.