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Dear Members of the Legislative Commission on Surrogacy,

We are writing on behalf of RESOLVE: The National Infertility Association, to provide comments on the draft Commission report released at its Tuesday, November 15th Commission meeting. RESOLVE is a non-profit charitable organization dedicated to helping the 1 in 8 women and men in America who are struggling with infertility. We appreciate this opportunity to share our comments on several of the most significant draft recommendations.

1) RESOLVE strongly supports the recommendation that gestational carrier surrogacy arrangements meet national standards that provide that the carrier not be the genetic mother of the child she is carrying, independent legal representation of all parties is provided, mental health evaluations of all parties is provided and the gestational surrogacy candidate is medically capable of carrying a child to term. RESOLVE also supports a requirement that insurance coverage be provided to the gestational carrier.

2) The draft proposes that surrogacy contracts are void if compensation is provided to the gestational carrier surrogate. We are unaware of any other medical procedure in Minnesota in which prices or compensation for private sector services are set by the government. It is odd to suggest that Minnesota government would intervene in the private negotiations of adults for a service to be provided. This restriction would end gestational surrogacy in Minnesota and deprive Minnesotans the opportunity to have a child. RESOLVE opposes any restrictions on compensation.

3) The draft provides that infertile couples seeking to have a child should be subjected to criminal background checks. Fertile couples are not required to be investigated by the State before having procreative sex. It is most bizarre that Minnesotans with a diagnosed medical condition would have government employees that are not medical professionals licensed by the Board of Medical Practice in their home to assess whether a recognized medical treatment is appropriate for them. No state in the country investigates couples seeking to have children. If it is in the interest of the State to investigate infertile couples seeking to become parents, then it is surely equally in the interest of the State to investigate fertile couples seeking to become parents. RESOLVE opposes any requirement that infertile patients be singled out for government investigations.

4) The draft restricts surrogacy contracts to persons that have resided in

Minnesota for at least one year. Thanks to the Mayo Clinic, Minnesota is an international destination for patients seeking medical care. No patients coming to Minnesota for medical care are currently subject to a one-year residency standard for obvious reasons. RESOLVE opposes rationing recognized medical treatments in Minnesota to certain classes of people and believes any patient seeking medical treatment for infertility should be allowed to receive that treatment without government restrictions.

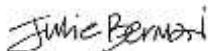
5) The draft requires that one of the intended parents must be genetically related to the child. Surrogacy occurs when a couple is infertile, and oftentimes it is both the male and female who have medical conditions rendering them infertile. In those cases, donor egg and donor sperm, or donor embryo, may be needed to achieve pregnancy, with the donated egg donated from someone other than the gestational carrier. Requiring that one of the intended parents be genetically related discriminates against couples with both male and female factor infertility, and RESOLVE opposes this discriminatory requirement.

6) The draft requires that surrogacy agencies engaged in various administrative services related to surrogacy arrangements and contracts must be formed as non-profit corporations. Other agencies serving infertile Minnesota families, such as infertility clinics, mental health clinics, law firms and hospitals, are allowed to choose whether to incorporate as a non-profit or for-profit corporation. For example, hospitals in Minnesota may incorporate as non-profit or for-profit corporations. Both serve patients and must meet state licensure standards, but it is left to them to determine how to legally structure their business. The same should apply to surrogacy agencies. RESOLVE does not believe the government should be dictating what corporate structures are most appropriate to serve clients. Instead, it should be fostering a regulatory environment that serves the needs of infertile Minnesotans and their offspring.

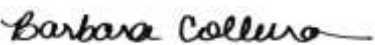
7) The recommendations make multiple references to existing Minnesota requirements for adoptions. There appears to be significant confusion as to the differences between adoption and gestational surrogacy, which is unfortunate, because they are two very different things. Adoption is a process whereby persons assume the parenting of a child from that child's biological or legal parents, who transfer all rights and responsibilities to the adoptive parents. Adoption is about child welfare, and transferring parental rights for a living human being. Gestational Surrogacy occurs when the intended parents care for their own child who was borne by the gestational carrier surrogate solely for the purpose of becoming the child of the intended parents. From planned conception to birth, a child born from surrogacy is the child of the intended parents, which in no way equates to a child that is adopted. They are completely different situations and RESOLVE believes that there should be no references to adoption in any discussion of surrogacy.

RESOLVE appreciates the work the Commission has done to learn about the challenges facing infertile Minnesotans seeking to have a child and how gestational surrogacy can be a solution to these challenges. We encourage you to support a Commission report that recognizes the needs of infertile Minnesotans and allows them to make their dream of having children a reality.

Sincerely,



Julie Berman, Minnesota Resident and Board Chair, RESOLVE: The National Infertility Association



Barbara Collura, President/CEO, RESOLVE: The National Infertility Association