



March 5, 2026

Minnesota Senate Commerce and Consumer Protection Committee
Minnesota State Capitol
75 Rev Dr Martin Luther King Jr Boulevard
Saint Paul, MN 55155
Re: Vote no on S.F.1961

Chair Klein and Members of the Committee,

Thank you so much for having me today. My name is Rebecca Delahunt, and I work as Director of Public Policy with Minnesota Family Council.

S.F.1961 would mandate all health plans in Minnesota cover assisted reproduction services, including, based on our reading of Subdivision 5, most likely surrogacy contractual arrangements. The language of Subdivision 5 requires that health plans must not limit “any fertility services based on an enrollee’s participation in fertility services provided *by or to a third party*.”¹

The process of surrogacy is complex. Eggs and sperm are sourced either from the person or people who will raise the child, called the “Intended Parents,” or they can be purchased from a seller, otherwise called a “donor.” Eggs and sperm are fertilized into multiple embryonic lives and often graded by quality, viability, and other characteristics. The surrogate or so-called “gestational carrier,” the woman carrying the baby, will hand over the baby immediately upon birth to the IPs.

Most surrogacy arrangements are paid, meaning that the surrogate is paid for renting her body, and she must follow contractual requirements on medication, diet, lifestyle, etc.

Surrogacy always involves intentional stripping of a child from the only mother the baby has known, a serious injustice to those children. Although surrogacy agencies may require a background check of IPs, there is no federal or Minnesota law requiring a background check.

Foreign nationals come to the U.S. for surrogacy arrangements. Upon birth, the child becomes a citizen under the 14th amendment. The Journal of Fertility and Sterility reports that Chinese foreign nationals are the largest proportion of foreign intended parents in the studied period from 2014-2020.² Relative to U.S. IPs, international IPs are more likely to be male and over 42 years old.

A *Wall Street Journal* article in your packets from December 2025 titled “The Chinese Billionaires Having Dozens of U.S.-born Babies via Surrogate,” reports on Chinese foreign national males getting tens and working toward a hundred children via U.S. surrogates.

Surrogacy costs vary – but after compensation, agency fees, IVF embryo creation and transfer, legal fees, and other costs, the cost can be \$100-\$200K dollars. Minnesota taxpayers should not pay for the intentional creation of children *to separate them* from the only mother the baby has known. Surrogacy is not protected in Minnesota statute, and we argue that it should not be. But it is notable that this bill likely mandates insurance coverage of an extra-statutory practice.

Mandating insurance coverage of surrogacy is not good public policy for Minnesota. Please vote no on S.F.1961. Thank you.

¹ S.F. 1961 (2025)

² Alexandra, H., MD, MPH, & et. al. (2023, July). *International gestational surrogacy in the United States, 2014–2020 - fertility and sterility*. Fertility and Sterility Journal. [https://www.fertstert.org/article/S0015-0282\(23\)02142-8/fulltext](https://www.fertstert.org/article/S0015-0282(23)02142-8/fulltext)