



Connected for Life

## **American Diabetes Association Support for Senate Bill 296 to Cap Insulin Costs**

Testimony of 1/24/20 to the Senate Finance Committee

Stephen Habbe, Director, State Government Affairs

Chair Cummings and Members of the Committee - thank you for the opportunity to speak and join you by phone, and special thanks to Senator Hooker for filing Senate Bill 296 to cap insulin costs. My name is Stephen Habbe, and I'm speaking on behalf of the American Diabetes Association to convey our support for the bill with the addition of some clarifying language.

Vermont, like the rest of the country, has experienced a diabetes epidemic. The Association estimates 58,000 people in Vermont have diabetes, or 10% of the adult population. Every year another 2,000 people are diagnosed with diabetes. Many people with diabetes need insulin to live and to avoid devastating complications that include blindness, kidney failure, lower limb amputation, heart attack, stroke, and possibly death.

But too often, people with diabetes are struggling to afford the insulin their doctor has prescribed. A Yale survey found 1 out of 4 insulin users were rationing their insulin – either taking less than the dose they needed or skipping doses. People with diabetes may have trouble paying for insulin at list price before meeting their insurance plan's deductible. They may also struggle with costs after meeting their deductible.

Senate Bill 296 would help people in state-regulated health plans by capping the cost that they are paying for their insulin at \$100 per 30-day supply. By ensuring that insulin is affordable, people with diabetes are then in a position to stay healthy and productive. And by properly managing their diabetes, the costs for complications are reduced. The Association estimated that the cost of diabetes in Vermont in 2017 was more than \$520 million. By keeping insulin affordable, we can help keep people with diabetes out of the ER and the hospital, and away from expensive and potentially disabling or deadly complications.

I have shared my clarifying language changes with Senator Hooker and she is supportive of including them, and I'll pass that language along to the committee. The intent of those changes is to ensure clarity that the cap of \$100 per 30-day supply is for the person with diabetes' total insulin costs for that period of time, and not per prescription as some people with diabetes need more than one type of insulin. In addition, the cap would apply throughout the full year, so would not be subject to a deductible.

On behalf of people with diabetes, the Association urges your support for Senate Bill 296 to help make insulin affordable. Thank you.

Stephen Habbe  
Director, State Government Affairs  
[shabbe@diabetes.org](mailto:shabbe@diabetes.org)  
(703) 549-1500, ext. 3457