



Consumers for Affordable Health Care

*Advocating the right to quality, affordable
health care for all Mainers.*

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To the Joint Standing Committee On Health Coverage, Insurance, and Financial Services

Testimony in Support of:

LD 1793, An Act to Ensure Access to and Coverage of Low Cost Insulin

February 13, 2024

Senator Bailey, Representative Perry, and Members of the Joint Standing Committee On Health Coverage, Insurance, and Financial Services, thank you for the opportunity to submit these comments in support of LD 1793, An Act to Ensure Access to and Coverage of Low Cost Insulin.

My name is Kate Ende and I am a policy director at Consumers for Affordable Health Care, a nonpartisan, nonprofit organization that advocates the right to quality, affordable health care for every person in Maine. As designated by Maine's Attorney General, CAHC serves as Maine's Health Insurance Consumer Assistance Program (CAP), which operates a toll-free HelpLine. Our HelpLine, fields approximately 6,000 calls and emails every year from people across Maine who need help obtaining, keeping, using, or fixing problems with private health insurance or with accessing or affording health care services. Through this work, we often hear from people who have difficulty affording the prescription drug medicine they need.

We know that the experiences of our HelpLine callers are not unique, many Mainers continue to struggle with the cost of prescription drugs, including insulin. Insulin has been around for nearly 100 years. The researchers who developed it sold the first patent of insulin to the University of Toronto for \$1, hoping that the drug would be made available as a public good. Today, there are multiple insulin formulations available on the market. Consumers have some alternatives, but for many people with diabetes there is no substitute for insulin. And although this drug has been around in some form for the past century, insulin prices have still seen massive increases over the last 20 years, particularly here in the United States.¹

According to polling we released last year, one in four Mainers have delayed filling a prescription, cut pills in half, skipped doses of medicine, or did not fill a prescription due to costs.² I don't need to tell you that medications are typically prescribed for a reason: we think it is unconscionable that Mainers are being forced to abandon medicine at the pharmacy because of the sticker shock of their unaffordable prescription drugs.

Insulin dependent diabetics who aren't able to take their medication as prescribed may develop serious and life-threatening conditions, including permanent vision loss, seizures, and diabetic

¹ <https://www.cdc.gov/nchs/data/databriefs/db184.htm>

² https://drive.google.com/file/d/14-Ywr3GM8FdKP5qa9U3Kp6Q3EdlclG_4/view

ketoacidosis. For these reasons, we support this bill to make insulin more affordable to Maine people who need it.

This work builds on legislation passed in the 129th legislature, which capped out of pocket costs for a 30-day supply of insulin to no more than \$35. This bill would further strengthen this by ensuring consumers can access at least one type of insulin within each of the following categories at no cost: rapid acting, short-acting, intermediate-acting, long-acting and premixed insulin. This uses a similar approach to what is currently required for contraceptives under the Affordable Care Act: plans must cover at least one contraceptive within each of the FDA approved contraceptive methods without cost-sharing.

Making insulin more affordable for individuals will benefit the health, quality, and longevity of lives for Maine people. For this reason alone, this is a worthy endeavor. Furthermore, due to the significant costs associated with treating more advanced diabetes and related complications associated with not properly managing insulin levels, the possible savings to be had from avoiding these conditions and the medical costs associated with treating these conditions are significant. Making insulin more affordable may create savings in other areas of our healthcare and economic systems, by enabling people to stay health and continue working, for example. However, it is worth noting that many people with other serious and chronic conditions also struggle with out-of-pocket costs and we urge the Committee to also consider affordability barriers these Mainers also face when trying to pay for the drugs they need, as well as the underlying drivers of high prescription drug costs in Maine.

Thank you and I am happy to answer any questions.