

Dear Honorable Committee Members,

The American Diabetes Association believes that no person should ever go without their lifesaving and life-sustaining insulin due to high costs. We support HB2557, and we urge you to as well.

People with diabetes in Kansas are facing a crisis. A vial of insulin in 1996 had a list price of \$21. Today, that same bottle of insulin has a list price of over \$300. Advances in research and development and technology have been life-changing, but the chemical formulary for insulin has not changed in over two decades. People with diabetes are sometimes forced to choose between insulin and rent or insulin and food to survive. For a chronic, autoimmune disease that is not preventable and has no cure, that seems unnecessarily excessive and dangerous.

While more people are insured across the United States than ever before, the rates of high deductible health plans have skyrocketed among adults from 10% in 2007 to nearly 25% in 2017. The CDC has found even higher rates for the entire population, with over 43% of Americans having a high deductible health plan (The American Journal of Managed Care).

High deductible health plans offer people a way to have coverage that costs less per month in their premiums, but have a higher bar to reach before full coverage for medicine, like insulin, kick in. Insulin is a chronic disease management medicine. Without it, people with diabetes die, and very quickly. People with diabetes also require a lot of it: averaging 2-4 vials per month, and sometimes even more. So when deductibles are high, people, even with insurance, end up paying upwards of thousands of dollars per month simply to live, or they're rationing their medicine, which leads to deadly complications and high costs to the state.

This bill would alleviate a lot of strain for people by capping the co-pay of insulin, ensuring access to their life-sustaining medicine while longer-term policy solutions are investigated at both the state and federal level. Studies have shown that capping co-pays on insulin would not increase monthly health insurance premiums at all (Milliman).

We need to help those living with diabetes to achieve better health outcomes in the long term; doing so is in our (and the state's) best interest. We believe that no individual in need of life-sustaining insulin should ever go without due to prohibitive costs. We support HB2257 and urge you to vote yes.

Sincerely,

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The American Diabetes Association

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