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**House Bill 188-Pharmacist Consult Agreement  
Proponent Testimony  
May 27, 2015**

Chairwoman Gonzales, Vice-Chairman Huffman, Ranking Minority Member Antonio, and members of the House Health & Aging Committee, my name is Lori Weinstein and I am the President and Chief Executive Officer of the Diabetes Partnership of Cleveland. I appear before you today to testify as a proponent on House Bill 188, the pharmacist consult agreement legislation.

The Diabetes Partnership of Cleveland is a local and independent nonprofit organization serving Greater Clevelanders affected by diabetes. Our mission is to ensure that individuals affected by diabetes have the support they need to live well with the disease. The Diabetes Partnership of Cleveland provides tools and education for diabetes self-management and we address the needs of the person as a whole: physical, emotional and social.

While we have several programs to serve individuals afflicted by diabetes, I want to focus on our emergency insulin program and how House Bill 188 is needed to help save lives. Our emergency insulin program is the only program in the Cleveland area to provide emergency insulin for individuals who have a sudden disruption in prescription coverage. Our social worker helps individuals secure their 30-day insulin supply while also assisting them with an array of associated health care and other issues. Our services bridge the clients' needs between the time they run out of their medication source and the time when they can gain entrance into a long-term patient assistance program. The social worker conducts an assessment for new applicants for the program to determine their eligibility for an emergency supply of insulin. We work with ExactCare Pharmacy in Valley View, Ohio to fill the insulin orders and deliver them by mail or in person to the client. Each client will be eligible to have a one time 30-day emergency supply, and they must transition to a medical home or other source for long-term insulin. We utilize grant monies to pay for the insulin through ExactCare Pharmacy.

Our licensed social worker will then contact the client within 3 days after they have been referred to ExactCare Pharmacy to ensure that the individual has received the insulin, understands the importance of dosage and timing, and is actually taking the medication. Clients who come to us through the emergency insulin program will work with their caregiver to have their diabetes control monitored by a baseline hemoglobin A1c level, blood pressure and blood glucose test. Our services include helping them find long-term options to reduce as much as possible their costs for insulin often through assistance programs through pharmaceutical companies.

Unfortunately, we continue to see an increase in the demand for emergency insulin from individuals who lose their jobs and therefore their health and prescription benefits. We also see individuals who have no health insurance and are indigent. In households with few resources, unemployment or other income reversals can lead to disruptions in health care coverage and an inability to secure critical medications. Because of reduced available funding this past year, we have had to turn away weekly an average of ten uninsured individuals who need emergency insulin. They are generally referred to us by physicians or by word of mouth. When we are without funds to assist, we refer those clients to 211 United Way, the Medicine Referral Line, where they are referred to insulin manufacturers that help them at a reduced cost, but this process takes time.

Often our emergency-insulin clients are unskilled in navigating through the complex maze of public assistance (including the ACA) for medical and human services, posing yet another challenge to maintaining their health and wellbeing. We make referrals when necessary including facilitating contacts with ACA Navigators.

When a client needs emergency insulin for 30 days, they invariably need the accompanying testing supplies as well. With the climbing costs of both their prescription and related testing materials, individuals typically require an average of over \$400 (depending on their medical situation and prescription) for a month's supply of insulin. Each client also needs an average of \$100 per month for testing strips, test meters, alcohol swabs, band aids and glucose tablets. Most of our clients come from low-income backgrounds and meeting these expenses is daunting. The reason our clients need urgent supplies of insulin and testing items varies significantly. Some clients are applying for Social Security disability that takes 3 to 4 months. Most clients applying for social security disability are not approved the first time, so they must go back and appeal their decision. This often is successful only after a second try. By then, clients have generally lost their jobs and all insurance coverage

Other clients on Medicare often find themselves in the "doughnut hole". This means that must pay for medicines out-of pocket (including up to \$3000) before they are able to get out of the Medicare doughnut holes. Further, many clients' job assignments are now being converted to part-time hours so they are ineligible for insurance benefits.

We help our clients obtain longer-term, affordable insulin supplies through drug manufacturers' patient assistance programs, but that often takes 6 weeks for approval. Other clients have ACA insurance but those premiums are out of reach with excessively high deductibles and co-pays. In the face of these medical overheads, many clients are also unable to afford basic expenses for rent, utilities, groceries and other necessities.

As you can see, even with our emergency insulin program and dedicated staff with expertise in the subject, it can still be complicated to receive an emergency supply in today's health care system, yet that supply is critical to save lives. House Bill 188 will increase the ability of individuals to receive a one-time emergency 30-day supply of medication. Current law allows for an emergency supply to be dispensed by the pharmacist as long as the dose does not exceed a seventy-two hour supply. Insulin cannot be broken down into a 72-hour dose. House Bill 188 will allow for an emergency prescription to be dispensed by the pharmacist as long as it does not exceed a 30-day supply or the standard unit of dispensing. The patient must be on a consistent drug therapy as demonstrated by pharmacy records and it can only occur one time in a calendar year.

While House Bill 188 will not solve the emergency insulin problem of all the clients we serve, it is an important step in helping those with an existing prescription with a pharmacy in need of an emergency supply but are unable to obtain that prescription authorization from their provider.

On behalf of the Diabetes Partnership of Cleveland, I want to thank you for your time and consideration of this important legislation. While I will not read to you the letters we have received from individuals we have served, I have provided a sample for you in my testimony. I will be happy to attempt to answer any questions you may have.

Actual patient letters:

- "I am a diabetic and due to job layoff I have been unable to obtain a new meter. Mine is broken. Then one day I was riding behind a bus with a sign on the back about the Diabetes Partnership. So I called in to see what services were offered and made an appointment to come into the office. I came into the office and met with a very pleasant diabetes educator. We did with a demo with my new meter which was free of charge. The meter was very nice, and easy to use and accurate. I am so grateful for the services that the Diabetes Partnership offers. Thanks so much for the new meter and the pleasant deposition of the health educator."

*Fel  
icia  
Holmes*

- "Thank you so much for coming out to the Seeds of Literacy and talking with us about diabetes. We appreciate your providing meters and strips to our 5 diabetes clients. It was very helpful to them and to me as well. Getting their diabetes under control will help them pass the GED test."

*Seeds of Literacy organization director, Sharon  
Forstcher*

- “Thank you so much for the materials you sent me last week. I have learned some new things about diabetes. I really appreciate the CD you sent because I am a very auditory learner. I was hoping to be able to hear about diabetes first hand. Thank you again for your services and take care.”

*Rosy Statik: (LEAH Client)*

- “I really thank God for your support and services to the different clients who have diabetes. I also appreciate all your programs and groups that are available to us. Please continue the help and the support. I can say for myself that I am very thankful to you. It is much needed. God Bless You All.”

*Catherine Bryant*

- “I am appreciative of the Emergency Assistance program that the Diabetes Partnership offers because as I get older, it is more difficult to qualify for other programs and pay into affordable health insurance. The meter, test strips, and other resources/references are very helpful and help me live (continue to) a healthy life with Type 1 diabetes. As a former frequent camper of Camp Ho Mita Koda, I have built a 20 year relationship with the Diabetes Partnership of Cleveland and their wonderful staff.”

*Thank you. Fa'Tyma Pope*

- “Thanks to the Diabetes Partnership, I can now be able to check my sugar daily and before and after meals to make sure I am keeping up with my numbers and my health.”

*LEAH Client Cathy King*

- “The Diabetes Partnership of Cleveland has been fantastic to work with. They listen and carefully explain what they do and offer sound advice with a very caring attitude.”

*LEAH client, Frank Dziabiak*

- “Thanks so much. The Diabetes Partnership was kind enough to give me a blood sugar test when I left my monitor at home.\* I had a reading of 173 at breakfast and wanted a noon reading --- good thing because I was at 66! Susan gave me glucose tablets to help raise my blood sugar. So very glad you were there for me!”

*Char Clemson*

*(Ms. Clemson works next door to Diabetes Partnership of Cleveland, and had forgotten her meter. She came to the office over her lunch hour to check her blood sugar because she was very concerned about her morning numbers.)*

- “My name is Denise and I have type 2 diabetes. I have been out of my testing supplies for a while and I could tell that my sugars were off. I was going very low and then they would be very high, but I had no way of knowing which was which, only could tell by what I was feeling. I called 211 call for help and they told me about your program where I could get free testing supplies because I have no health insurance. The Diabetes Partnership of Cleveland responded to my call promptly and gave me free testing supplies and a lot of information concerning my diabetes. I just want to say thank God for programs that help people to help other people. Thank you Diabetes Partnership of Cleveland for being there for me. I plan to come to your support group as well.”

*Denise Jackson*

*Lowell Wessner*  
*5/25/15*