PROONENT TESTIMONY

for

Ohio HB 37

134th General Assembly

Senate Health Committee

Dear Chairman Huffman, Vice Chair Antani, Ranking Member Antonio, and members of the Senate Health Committee.

My name is Mirna Funkhouser, I am a mother of a type 1 diabetic. I myself also have type 1 diabetes and asthma along with long term complications from both. We live in Sandusky, OH. and a proponent of this bill.

My son Justin was diagnosed at the age of 10. For several YEARS prior I kept asking doctors about the issues we had with him. The sweet smell on his breath. Leaving class to take a nap. Then started the meltdowns. On November 11, 2013, Veterans Day we got our answer. He had the norovirus and I kept him home from school that day to take him to urgent care. Our PCP was too far in North Ridgeville and were not able to run tests. NOMS said he needed fluids and sent us to Firelands Hospital. While waiting for the tests to come back, Justin slowly was falling asleep and later found out going into a coma, caused by DKA. This was approximately 6:30 in the evening, at 8pm the resident on staff came and said to me that we needed to life flight him he was dying, and told us what changed our lives forever; that he had type 1 diabetes and HE WAS DYING!

I am telling you his story so you understand our kids NEVER want to be back in the hospital after a trauma like that. We spent 4 days in PICU , after 21 missed IV's the first 12 hours Justin at age 10 decided to do an Art Line. This allowed them to draw blood and give fluids and medication to stabilize him from one arm and did not have to change it again during his stay. I counted at one point and attached a picture almost 14 bags connected going into him.

Justin just turned 18. Right before his senior graduation he did a clinical trial, we did NOT know it would be in the hospital , UH Rainbow Babies downtown Cleveland, as he slowly walked in he collapsed through the doors. TOTAL PANIC ATTACK. Everything came back to him. I could go on with more details, but the only important one you need to respect is that our children are our future, and these kids like my son do Not want to be without insulin.

They fear turning 18, right now we are 1 month behind in supplies, and he is away at John Carrol University without enough supplies since they have not shipped yet. He has insulin at least. He is studying Psychology in Family and Children with trauma and chronic disease. He is also getting 6 Broadcasting certifications to be able to help more kids. When our kids graduate they cannot have student loans, pay for living , be without insurance for a day, and pay for insulin. We work very hard with The Be A Part of It Foundation to support these kids, they are our future and are taking up the torch to make a difference.

As Dan Houdeshell outlined, there is amazing support for this bill. But I want to address for everyone that the OSMA has an issue with the 3 refills, and cannot see why a T1D would need more. I personally think there should be no limit. So to educate everyone I have listed 23 reasons, that took 15 minutes and more time to type on this testimony.

1. No insurance
2. Insurance changes so down one month during coordination of new benefits
3. New job 60 day holding many going to 1 year before benefits
4. High Out Of Pockets for the formulary
5. A reduced insulin prescription
6. Broken insulin vial
7. Stolen insulin and emergency pack and pump (this is a big bully thing in schools and a federal crime since the value is over $15000 of equipment they wear on their body)
8. Travel forget at home on counter
9. Needing to keep one vial and 2 pens at school per your 504 plan, in cases of lockdown or you pump stops working or you forgot the pack, Backups are everywhere in the house, school, all cars and the bag on the back of the child.

Some also on boats and in second homes they may frequents like grandparents for overnight.
10. Split families require supplies at each house
11. Homelessness
12. Death in jail because the insulin is in the car and the jail houses do not carry and are not trained.
13. Your luggage is lost for days when travelling
14. Forgetting at home before going for visitation to your other parent who has no supplies.
15. Sudden increase in insulin needs you run out sooner, usually because of growth spurts or being sick or special occasions.
16. You forget to refill, and need immediately but cannot afford the $380+ for one vial.
17. Insulin goes bad because of heat/storage and you must throw away a full vial or pen.
18. You forget to put the refill in the refrigerator and only can use for 28 days.
19. Bad insulin not as effective, so must throw away and get replaced.
20. Seniors and type 2 diabetics cannot afford the new one shot weekly insulins, Medicare ad Part D do not cover either.
21 Pharmacy give you a portion so 3 out of the 5 pens in a box, yet you pay for 5 pens, they pull your3 and are 2 pens short from the box now. This is not allowed never accept a ziplock of insulin from a pharmacy,
22. Insulin pump inset goes bad must throw away the 3ml cartridge that was full.
23. Bad insulin pens and nano needles. Must throw away.

…there are many more,

These are valid reasons for this bill, and these can happen monthly. Just a job change can put them out for 3 months because of no insurance. I know the crafting of this bill is very important. There are 2 other bills capping insulin at $35 instead of $100 and increasing the age for BCMH to 26. All 3 bills are important but we need HB 37 passed now. This bill saves lives. It could save your child or parents life. This disease and others do not discriminate, the are vicious, and deadly. Emergency access is needed by all to save lives. We do not need anyone dying like Kevin did alone.

Thank you for your time.

Mirna (Malinar) Funkhouser

The Art Line:

Justin (Age 17)