PROPONENT 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, representing The Be A Part Of It Foundation; a charity organization whose sole purpose if to work together with other nonprofit groups to support all aspects for our type 1 diabetic children and young adults. We are based out of Sandusky, Ohio; and are here today to represent our families as proponents of HB 37; the expansion of Kevin's Law.

I have provided 2 other testimonies, one in the House and one read into record here to the Senate each focusing on a specific issue for this bill. Family impact financially and actual real-life reasons why a type 1 diabetic would need an emergency refill where we provided 23 reasons to the Senate. Today I am here to pull many of the questions together which I have heard from both committees to our witnesses.

1. Is 3 emergency refills enough a year? NO. But it is a start.

Example, I have Asthma, COPD, irregular high resting heart rate; and now after COVID (long hauler) I officially Type 1 LADA H-Hypo; which means my blood glucose is very low. Which means I use glucagon and eat a lot of carbs to raise my blood glucose or I could seize.

But the most dangerous is my COPD, I run out of my Combivent every month in 15 days. Insurance says it should last 30 days, yet the manufacturer's recommended dose is 2 puffs every 6 hours. Which means 2 inhalers per month per the recommended meter dose.

A few weeks ago I could not attend I was in the perfect storm. I had run out of my Combivent in 15 days (Again), I could not get a refill for another 2 weeks. I sit and drive with my neubulizer but it is not enough. I need the Bromide/Albuteral mixture in the Combivent to open my airways. This has been going on for 11 months since new insurance limitations have gone into effect. If I do want that second inhaler I have to pay \$487 minimum with using a rebate /discount card from Goodrx scripts. Each inhaler is over \$600. Or I can order a qty of 5 from Cnada for \$160 USD.

I also have the following ongoing maintenance medication and emergency medication added since the age of 7 yrs old. They all fit here in my small black bag. (show Contents) Epi pen (\$623) Glucagon (\$398) QVAR (\$617) Combivent Rescue (\$487) Insulin – Humalog Pen (1 of 5 from box, Box cost \$718) Narcan (FREE) Heart medication Valium too lower heart rate Cholesteral medication.

- 2. What are the emergency supplies for a type one and maintenance supplies for a Type 1 diabetic:
 - a. Fast Acting Insulin, given when high, when they eat and as a drip if on an insulin pump. (Humalog, Novalog)
 - b. Long Acting Insulin(Lantus, Tresiba..)
 Blood Glucose Test Strips
 Blood Ketone Test Strips
 Blood Glucose Meters
 Lancets
 Glucagon, Baqsimi to treat low during seizure
 CGM Sensor (Life Sustaining per insurance)
 CGM Transmitter (Life Sustaining per insurance)
 Insulin Pump
 CGM (Dexcom is most popular-show sensor)
 Insets to get insulin from pump into your body
 Syringes
 Barrier wipes, alcohol swabs and Adhesives.

The total cost dictated by the PBM at Riteaide for test strips and lancets over \$28,000 a YEAR.

- 3. Why and who is to blame for these high prices. As we concentrate on insulin :
 - a. Manufacturers: There are only 3 after 100 years:
 - i. Sanofi
 - ii. Eli Lilly
 - iii. Nova Noradisk
- 4. There are multiple state and federal class action lawsuits against these 3 big insulin for fraud and collusion on price hiking together, with each others knowledge and consent insulin at the same time, See attached links at the end.
- PBM monopolies; CVS Caremark, OptumRX and Express Scripts, all who have robbed and double billed Medicaid and Medicare and the patient. Here is no transparency, and the back-door deals made by these PBM's account for the largest pricing hikes ever.

- 6. You have asked about different insulins there are many, each works differently, yet a PBM or insurance can one year pay for it the next year not. Sending your AC into turmoil.
- 7. Why so different for a type 1. Each person has a different metabolic system, that coupled with their pancreas, liver and kidneys, add on activity, stress, glycemix index of foods, fast acting or fatty foods.

Each person has a different formula, one which common core cannot be used on.

ISF – How much insulin need to drop your BG 1 unit may drop it 50 pts.

I:C Ratio

Everyone has a different one and different for each meal at times

You have 30 g of carbs for your meal then you dose , you carb ratio is 1 unit for every 5 carbs, you give then 6 units of insulin.

BUT, if you are over 100 BG on your meter, let us say 200, you must then CORRECT the high and add the ISF, above 1:50 would be 2 more units (200-100=100/50=2units)

6 units + 2 units = 8 units.

This is a quick example there are many other factors.

- 8. Is the insulin in Canada the same. YES Humalog is made by Eli Lilly, it is the exact same Humalog insulin in the US. But in Canada \$32 in the US \$368 per vial, most need 4 vials a month, the only different is it is in French the packaging.
- 9. This year insulin has reached it's 100th birthday. Interesting to think, why we still only have 3 manufacturers of this life sustaining medication.

10.Why so high cost? GREED

- 11. Extras, let us add on the requirements to get a script. You must see the following every year
 - o PCP
 - Endo every 3 months under 21, once per yr as adult
 - Eye Doctor , 2x medical exam per year
 - Foot Doctor , 2 x per year
 - Dentist, 4 x per year min for cleaning.

- 504 plans (in 1-2th grades)
- SAS plans in college
- Insurance Coordination (New insurance takes 30 days)
- Insurance Appeals
- Insurance Overrides
- Finding a DME who can bill your insurance in the correct order 3 months
- Ordering supplies
- Calling Endo for Scripts
- Add on anything extra like coaches, extracurricular, training, and diabetes camp.

This disease is very hard. It does not discriminate. I hope the additional documentation attached and the links below can further help you understand who is really responsible.

I would like to urge all to consider the long term fallout and what is the price of a life. There are 4 million Ohio residents dependent on insulin, more on other medications like inhalers. They are estimating an increase from 4 to 8% more type 1 diabetic diagnosis post Covid19.

I thank you for listening to us and our children. I can take any questions now.

Links to current articles online and class action lawsuits against Sanofi, Nova Noro disk and Eli Lilly for price fixing and collusion.

https://www.natap.org/2019/newsUpdates/022719_01.htm?fbclid=IwAR1Ujnz17HYjpRpdDzZWUDHby9okn1V66vz-79acOXUgQm2wIZHYe-t_nU

https://www.bloomberg.com/news/articles/2019-02-15/novo-nordisk-lilly-sanofi-must-face-insulin-drugpricing-suit

https://health.usnews.com/health-care/for-better/articles/2018-06-29/whats-behind-the-rising-costs-ofinsulin

<u>https://www.hbsslaw.com/cases/insulin-overpricing/pressrelease/insulin-overpricing-insulin-manufacturers-hit-with-class-action-lawsuit-over-drug-price-inflation-scheme-and-rico-violations-time-to-break-up-the-insulin-racket</u>

https://www.nytimes.com/2017/01/30/health/drugmakers-lawsuit-insulin-drugs.html

https://topclassactions.com/lawsuit-settlements/prescription/1028535-insulin-price-increases-driven-bycollusion-between-major-drug-cos-claims-class-action-lawsuit/

https://endpts.com/house-dems-call-on-the-ftc-to-investigate-potential-collusion-among-top-three-insulinmanufacturers/?fbclid=IwAR1d4cmUBcQLQ4KkwrV7CyxVe2Tw27GeODiQPcr9lLziP7BJ4sw47xS2A6s

https://www.natap.org/2019/newsUpdates/022719_01.htm

https://www.vox.com/2019/4/3/18293950/why-is-insulin-so-expensive

https://www.beckershospitalreview.com/pharmacy/drugmakers-pbms-must-jointly-face-insulin-price-fixinglawsuit-judge-rules.html

https://fox59.com/2019/02/18/eli-lilly-facing-consumer-fraud-allegations-for-soaring-insulin-prices/

U.S. insulin costs per patient nearly doubled from 2012 to 2016, study finds <u>https://www.nbcnews.com/health/diabetes/u-s-insulin-costs-patient-nearly-doubled-2012-2016-study-n961296</u>