

House Health & Insurance
 05/19/2021 01:30 PM
 HB21-1307 Prescription Insulin Pricing & Access
 Typed Text of Testimony Submitted

Name, Position, Representing	Typed Text of Testimony
Erika Armani For Self	<p>My name is Erika Armani and I have lived with Type 1 Diabetes for over 30 years. I have seen the cost of insulin rise first hand from the \$10/month my mom paid in the 1990s to over \$150/month I pay today even with health insurance. Access to affordable insulin is a human right and the current price of insulin has people with diabetes living in a major crisis. We like all humans need insulin to live. Many people with diabetes literally need to decide if they will pay for their insulin or for their housing and food. For people with type 1 diabetes, there are not any other options to survive. This bill must be passed so that Coloradans with diabetes will not have to put their health and safety in jeopardy just because they cannot afford the high cost of insulin. Please pass this bill.</p>
Beth Utton For Self	<p>Insulin is a critical, life-saving medication. If a person has been prescribed insulin, it is not a viable option to go without that medication. Those that, due to financial hardship, do not take the medication or try to make do on smaller doses than prescribed pay a high price in their health – and sometimes with their very life.</p> <p>Creating an insulin affordability program that caps the cost for eligible participants to \$50/month is a measure that can save lives.</p> <p>Nobody should be faced with severe health consequences, or even death, for inability to afford to purchase a medication that has been available for a long time and for which there is no valid reason to charge the unreasonable rates that are now seen in this country for insulin.</p> <p>Vote YES on HB21-1307.</p>
Faith Riddell-Harding For Self	<p>Insulin is a life saving drug, I want everyone who reads this to think about what it would be like to depend on a drug in order to live. Now what if that prescription is outrageously expensive for your income? How would you feel, or how would you react? The first reaction you should have is panic, because you're going to have the biggest cloud hanging over your head when trying to obtain your perception to survive. Maybe not for you but what about your child or loved one, what if you don't have good benefits? Many families have to decide between affording food or insulin for the month? What kind of society do we live in that our citizens cannot afford their prescriptions? Insulin costs \$3 to make and I'm sure you'll hear this plenty of times, but it costs \$3 to make and Americans are charged over \$100 a month for insulin out of pocket in some situations. "America, land of the free and home of the brave" this is America's catch phrase if you will, yet insulin is not accessible for everyone in need. How is that free? It states in our</p>

	<p>Declaration of Independence that we have three very important unalienable rights, life, liberty and the pursuit of happiness. Insulin to a diabetic is life, it is what continues our life and the fact that it isn't accessible to everyone because of the price deprives us of that one important unalienable right that's stated in our Declaration of Independence. So I leave you with this, from a 19 year old college student that's been a type one diabetic for 6 years with a full life in-front of her, please make me proud to be from the state that is willing to fight for their citizens health and well being. Think about the future generations, possibly your grandchildren and great grandchildren that may be diabetic dependent on insulin, think about what this would mean for them. Think about the thousands of humans just trying to get their prescription to live their life.</p>
<p>Judy Greenfield For Self</p>	<p>I am writing in support of HB21-1307, to provide access to vital insulin for people who cannot afford it or readily obtain it. The tragic death of a young man with Type 1 diabetes in Minnesota, who died because he couldn't obtain insulin one weekend in 2020, was the impetus for this potentially lifesaving bill.</p> <p>As someone with Type 1 diabetes, insulin has kept me alive for 27 years since diagnosis. Quite simply, diabetics die without insulin via diabetic ketoacidosis (DKA). To say that access to insulin is critical is an understatement. One could miss a dose of most medications without great repercussions; not so for diabetics.</p> <p>No one with diabetes should have to worry about being able to afford or obtain insulin. Honestly, we have enough to worry about every minute, every day of our lives just trying to keep our blood sugars in control and complications and death at bay.</p> <p>Therefore, I hope that the Committee will support HB21-1307.</p> <p>Thank you for your time and consideration.</p>
<p>Ian Fleming For Self</p>	<p>My name is Ian Fleming and I have been living with type 1 diabetes since December of 2016, allowing me to personally discover the outrageous cost for insulin. Insulin is a life saving hormone that allows glucose to enter the cells of the body, thus allowing the body to create energy and function. People living with type 1 diabetes are unable to create their own insulin, therefore, they are unable to create energy and become hyperglycemic, which can lead to diabetic ketoacidosis, a condition that is fatal if not treated. People living with diabetes do not choose to become diabetic, but instead are forced to become their own pancreas and take insulin from outside the body.</p> <p>For those who are under or uninsured, insulin can cost over \$300 per vial. On average, a person living with diabetes will use 2-6 vials per month, thus creating a substantial financial burden on that person. I am</p>

	<p>currently a sophomore in college at the University of Colorado Boulder and I plan on attending graduate school to earn an MD/PhD, which will allow me to fulfill my dreams of attempting to find a cure for diabetes. I am fortunate to be on my parents insurance plan which significantly reduces the cost of my insulin, which would surpass \$10,000 per year if I were uninsured; however, when I turn 26, I will be unable to participate in my parents insurance plan which presents the possibility for me to be uninsured, especially since I plan on continuing my education into my late 20's. With bills like HB21-1307, I am able to have some assurance that I will not have to pay over \$10,000 per year for my insulin in addition to all my other diabetes supplies.</p> <p>When insulin was created in 1922 by Sir Frederick G Banting, "he refused to put his name on the patent. He felt it was unethical for a doctor to profit from a discovery that would save lives. Banting's co-inventors, James Collip and Charles Best, sold the insulin patent to the University of Toronto for a mere \$1." Insulin was intended to save the lives of those who were diagnosed with diabetes, whom before the invention of insulin had a few weeks to live before they died. Although insulin will never be sold for a dollar again, it is important that we maintain the foundation for why the hormone was artificially created, to save lives. With this bill, we are allowing those who are under or uninsured to have the opportunity to afford this life saving hormone, and to live. Because without this hormone, people with diabetes die.</p>
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In Re: Support of HB:21-1307

Thank you all in advance for reading and considering this testimony. I specifically would like to thank Senator Kerry Donovan, Dylan Roberts, and Larry Liston for bringing this matter to hearing. I will begin with a brief background on myself, a discussion of the insulin marketplace as a whole and then voice my support to HB21-1307.

On September 19, 1999 I was diagnosed with Type One Diabetes at the age of six. Despite the many literal and figurative highs and lows that I have experienced with my diabetes since a young age, I ultimately believe that diabetes has been one of my life's biggest blessings because it has allowed me to meet so many wonderful people and develop stronger emotional empathy than many of my peers. Without the connections I made through my diabetes, I would have never gotten involved with the American Diabetes Association, graduated with a political science degree from the University Colorado at Boulder, received my juris doctor from Creighton University School of Law, or focused research on the many antitrust violations that I believe insulin producers engage in. Despite my belief that my diabetes is one my life's biggest blessings, one of the major concerns that exists at both the state and national level has been the rising price of insulin despite no serious advances in the underlying cost to produce the biologic product and no serious scientific advances in the formulary production of the product in the past twenty plus years.

In an ordinary marketplace, one would expect the cost of a good to decline if the product did not change over the years. However, the cost of insulin has skyrocketed, and profits made by stakeholders has increased year over year. Antitrust violations in the insulin marketplace seem facially apparent. The cost of the most common insulins has tripled from 2007 to 2017. There are only three major producers in the insulin marketplace: Eli Lilly, Novo Nordisk, and Sanofi (hereinafter the "Big-Three" producers). The Big-Three producers make billions each year off of insulin alone. Insulin users in the United States make up only 15% of the world's insulin users, but over half of insulin producers' profits from insulin come from the United States market. Production model research presented by the American Diabetes Association demonstrates that the cost of commonly used insulins should not have increased over time.

The amount of stress related to insulin pricing is constant. When I recently graduated from law school, at age 26, I entered a world where I did not have my school insurance and still desperately needed insulin as I started studying for the bar exam. That season of life reminded me of different recessions where my parents had lost jobs and were worried about affording insulin for two diabetic children. Ultimately, no person, in any season of life should ever have to worry about the cost of a product that is necessary for survival. HB21-1307 helps fix this concern by capping the monthly cost of insulin in the state of Colorado to \$100.00 regardless of the amount or number of prescriptions a diabetic patient may need. Capping insulin costs regardless of the number of prescriptions needed monthly will save lives. Currently, I know of several diabetics that have (a) rationed insulin and (b) had adverse mental health because of their diabetes. Rationing insulin refers to the process of a diabetic taking less insulin than they actually need to manage their diabetes effectively in order to prolong the underlying supply of insulin. Adverse mental effects refers to diabetic patients that have suffered depression, anxiety or stress as a result of a limited insulin supply.

In fact, I have had negative mental health as a result of stress over the amount of insulin that I currently could afford. I have had seasons in college where I was concerned about the amount of insulin that I could afford despite having what would be considered good health insurance. School and life in general can be tough enough without a concern over a limited supply of insulin that all type one diabetics need for survival. Even in a season of life where I currently have a good job where insulin is covered, there is a constant concern that if I were to lose my job, I would not be able to afford insulin. The fear of not being able to afford insulin is constant. Therefore, HB21-1307 is a massive step in the right direction and I voice my full support for the bill, without reservations. Thank you.

Best,

Austin Davis, Esq
Type One Diabetic for 21 years.



May 18, 2021

The Honorable Susan Lontine, Chair
House Health & Insurance Committee
State Capitol, 200 E Colfax
Denver, CO 80203

Dear Representative Lontine and Members of the Committee:

The Biotechnology Innovation Organization (BIO) respectfully opposes HB21-1307, which would create the Colorado Insulin Affordability Program and require manufacturers to provide insulin for free to pharmacies for distribution to qualified patients. BIO acknowledges the efforts of this bill's sponsors to improve access and affordability to prescription medications, a goal that we wholeheartedly support. However, we cannot support a mandate to provide insulin to pharmacies without compensation. Such a requirement violates the U.S. Constitution's Takings Clause and duplicates programs manufacturers already have in place to provide patients with insulin at low or no cost.

This bill violates the Takings Clause of the U.S. Constitution. The *Takings Clause of the Fifth Amendment* prohibits the state from taking private property for public use without providing just compensation for such property. Thus, the State of Colorado cannot simply mandate a company give away its product to address a public policy concern, as HB21-1307 would require.

Manufacturers have provided drugs, including insulin, to uninsured and underinsured patients in need for decades. Three biopharmaceutical manufacturers collectively make most of the insulin in the United States.¹ All three of these companies have patient assistance programs for their insulin products in all 50-states. These programs provide discounts, copayment assistance or free product for those who cannot afford it, either directly or through charitable organizations.² In some cases, uninsured patients can already receive insulin for less than the \$50 "copayment" HB21-1307 allows pharmacies to charge patients. The American Diabetes Association clearly and readily provides details about patient assistance programs and how to access them at www.insulinhelp.org.

For these reasons, we respectfully urge your no vote on HB21-1307. If you have any questions, please do not hesitate to contact me to discuss this further.

Sincerely,

A handwritten signature in blue ink, appearing to read "Brian Warren", is written over a light blue horizontal line.

Brian Warren
Director, State Government Affairs

¹ PhRMA Brief asking for declaratory and injunctive relief, *PhRMA vs. MN Board of Pharmacy and Board of MNSure*, 2020.

² Ibid.