## PROPONENT TESTIMONY in favor of Connecticut SB 1 2020 General Assembly

Dear respected members of the Connecticut Insurance and Real Estate Committee.

My name is Danny Houdeshell and I represent the Houdeshell family of Avon Lake, Ohio and especially our son Kevin. It is a well publicized story that Kevin died in January of 2014 after not being able to get a supply of insulin from an expired prescription. This began on New Year's Eve 2013 and continued over an extended holiday period when he could not reach his doctor or the office. Kevin died on January 8, 2014 from DKA. DKA official cause of death, however, we believe it is because the state laws governing emergency prescription refills are inefficient and outdated.

After a long period of trying to figure out how and why a person could be sent away from their pharmacy with nothing to help sustain life until a doctor could be seen ended up on Senator Gayle Manning's desk. In 2015 the Ohio legislature passed a new version of the Emergency Prescription Refill Law with HB 188. Since the Ohio law passed in 2015, 17 plus states have changed that very same law to update it and in many cases take it to a higher, more patient friendly, level. 2019 saw 8 states adopt and upgrade Kevin's Law. In total we are at 17 plus states since 2015 and 5 more, at least, in the coming year.

Kevin died at age 36 and except for dealing daily with his diabetes was in excellent shape and healthy. Kevin, worked at TGIFridays for 18 years and was bar manager when he died. He was so well liked and respected. We still hear stories about how he helped people or just made them comfortable and feel welcome. Kevin thought he had a bad flu when they sent him home from work. He had no idea his organs were shutting down from lack of insulin that he needed and he was dying.

In my research, Connecticut's law that was effective in 2018 falls far short of being effective and able to save lives. It only allows for "**Prescriptions may be refilled once pursuant to this subsection for a quantity of drug not to exceed a seventy-two hour supply.**" The issue is that packaging regimes in today's world does not allow a pharmacist to dispense that small of a quantity. For example, insulin comes in pens and vials, COPD meds in puffers, etc. Most states until 5 years ago had these same laws and as I have stated many states have updated their refill laws when a doctor can not be contacted to approve a refill. If the pharmacist extends their professionalism to help a patient under current laws and sells a vial to the patient in need, the pharmacist could lose their license. This law when upgraded helps the pharmacists as well as the patients. Pharmacists are very well educated to do their job and they should be allowed to do their jobs and help their patients.

What happened to Kevin happens more often than people realize. The patients end up in ER or ICU which becomes even more costly than providing an emergency vial of insulin until a prescription can be authorized.

Kevin's Law is a "movement" across the United States and needed in all 50 states. Legislators have called it a common sense law that improves quality of life and saves lives, at NO cost to the states. In the states that have passed this law totally bipartisan and little or no opposition. Several states in 2019 took Kevin's Law to the next level, Kevin's Law 2.0 if you will. Ohio currently has an upgraded version in legislation. That upgrade includes a mandatory requirement for insurance companies to cover, at least, 1 of these refills per 12 months. Very important because of the potential that patients can not afford the out of pocket expenses.

The Houdeshell family while totally in favor of Connecticut SB 1, our testimony is in support of Kevin's Law as proposed.

No person should die because they can not get a refill because their doctor is not available. T1 diabetes waits for no one the effects of lack of insulin are immediate.

Respectfully, The Houdeshell family in memory of their son Kevin who was taken way to early.