

Testimony— SB 1 An act concerning diabetics and high-deductible insurance plans

July 20, 2020

Mary Glynn
41 Winter St
Plainville CT 06062

Thank you committee for taking the time to hear my testimony in this special legislative session. My name is Mary Glynn & i am a constituent from Plainville CT & also a member of Connecticu#insulin4all. We are a volunteer group working tirelessly to raise awareness about the insulin price crisis & the need for improved access to fairly-priced diabetes management tools for CT diabetics— which account for nearly 12 percent of the CT population. SB 1 has strong bipartisan support & i urge you to act to save lives & improve diabetic outcomes.

When my 15-year old daughter told me she “might be diabetic” on a cold February Tuesday night as we prepared to head to the gym together , I was beyond speechless. She had just had a completely normal physical exam with her Dr, swam competitively on her high school swim team, was a 4.0 student who had also suffered the sudden loss of her dad a year before. Less than 24 hours later, our family was in the ER of Ct Childrens Medical Center learning all about type 1 insulin-dependent diabetes, hearing how her pancreas had just stopped making insulin through no fault of her own, learning another new normal.

Type 1 insulin-dependent diabetes aka juvenile diabetes can actually strike at any age. Type 2 diabetes can do the same & can mean someone may or may not be insulin dependent or simply take a pill or alter their diet. Insulin is like water or oxygen to type 1 diabetic. Without insulin my daughter will die within about 2 days. She wears a pump which drips insulin like a faucet— like a working pancreas. She also gives herself injections for food intake or high blood sugars which strike for no reason— just to make life more challenging. Access to costly insulin— humalog is priced around \$280 a tiny vial— and all her other supplies are not controlled or reasonable or something a T1 can forego. Over 40 percent of young adults ration insulin due to cost — and they die from doing so which is why we need SB 1. Or they incur a very costly ER visit to obtain insulin or supplies at someone else’s expense.

Insulin cost has risen 1200 percent since the 90’s. It used to be sold over the counter near aspirin in the 1960’s. Pump supplies, test strips to monitor blood sugar, needles, insulin pens & all other supplies are randomly priced by big pharma & pharmacy benefit managers whose job function is top secret. Most insurance plans - especially high deductible- have confusing formularies and unknown out of pocket expenses as they are still tied to insecure or changing jobs— a broken model as seen with covid 19 outcomes.

Diabetics need access to emergency supplies—insulin vials break, pumps fail, dr’s offices close or don’t call back for days, pharmacies run out— diabetes doesn’t wait. We need a cap on high deductible plan outlays. My daughter wonders how she will afford insulin & her testing &

pump supplies if these prices continue to rise with no control. She actually just yesterday got word she has become a new RN passing her NCLEX exam & has a job lined up with benefits—for now.

Pass SB 1. Be brave like my daughter. Like me coming before you to uncover old wounds & share my mothers pain. Be brave for this great state.

Thank you very much for your ear & your time

Mary Glynnn