

**House Bill 1397  
Proponent Testimony**

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House Health and Government Operations Committee  
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Madam Chairwoman and Members of the House Health and Government Operations Committee:

My name is Lynette Tolson Somers and I am the Director of State Government Relations for the Mid-Atlantic Region for the American Diabetes Association (ADA). I am pleased to provide this written testimony in support of House Bill 1397 (Insulin Cost Reduction Act).

People with diabetes are facing a crisis.

According to the Maryland Department of Health, over 10% of adults in Maryland have diabetes and approximately 34% of adults have prediabetes. Many people with diabetes need insulin to live and to avoid devastating complications that include blindness, kidney failure, lower limb amputation, heart attack, stroke, and even death. For them, the cost has spiraled out of control and is beyond the reach of many.

Insulin prices have tripled between 2002 and 2013<sup>1</sup> and have doubled since then<sup>2</sup> - for a medicine discovered 100 years ago. Without insulin, people with diabetes are at risk for death and scaling back on insulin can lead to costly and sometimes deadly complications. People with diabetes typically require two to more vials of insulin per month. So, when deductibles are high, people (with insurance!) end up paying upwards of \$600 per month simply to live or they're rationing their insulin, either taking less than the dose they have been prescribed or skipping doses altogether, which can lead to complications and possibly death. ADA research has shown that, for one in four insulin users, cost has impacted their use.<sup>3</sup>

HB 1397 would help people in state-regulated health plans by capping the cost they are paying for their insulin. By ensuring that insulin is affordable, people with diabetes are then in a position to stay healthy and productive. Proper management of their diabetes in turn reduces costly complications. The Association estimated that the cost of diabetes in Maryland in 2017 was more than \$7 billion<sup>4</sup>. By keeping insulin affordable, we can help keep people with diabetes



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out of the ER and the hospital, and away from expensive and potentially disabling or deadly complications.

It's time to reduce the financial burden on people with diabetes who need insulin to preserve their health and their life. They should not be forced to choose between insulin and rent or between insulin and food to survive.

The American Diabetes Association believes that no individual in need of life-saving medications should ever go without due to prohibitive costs or accessibility issues.

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<sup>1</sup> Diabetes Care 2018;41:1299–1311 | <https://doi.org/10.2337/dci18-0019>

<sup>2</sup> "Spending on Individuals with Type 1 Diabetes and the Role of Rapidly Increasing Insulin Prices," Health Care Cost Institute, January 2019 - <https://healthcostinstitute.org/research/publications/entry/spending-on-individuals-with-type-1-diabetes-and-the-role-of-rapidly-increasing-insulin-prices>

<sup>3</sup> American Diabetes Association, Insulin Affordability Survey, 2018, available at <http://main.diabetes.org/dorg/PDFs/2018-insulin-affordability-survey.pdf>

<sup>4</sup>Cost: American Diabetes Association, "Economic Costs of Diabetes in the U.S. in 2017", Diabetes Care, May 2018.

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