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February 25, 2025

Maryland General Assembly

Re: Support for HB970 - Insulin: Prohibition on Step Therapy or Fail-First Protocols

Dear Members of the Committee,

My name is Dr. Paola Acevedo, and I am an Ambulatory/Primary Care Clinical Pharmacist and Certified Diabetes Care and Education Specialist (CDCES) with over a decade of experience in diabetes management and medication therapy optimization. I provide direct patient care and collaborate with healthcare providers to ensure safe, effective, and timely access to diabetes medications. I am writing in strong support of HB970, which seeks to prohibit insurers from imposing step therapy or fail-first protocols for insulin and similar diabetes medications.

Step therapy, also known as a "fail-first" protocol, requires patients to try and fail on insurerpreferred medications before being granted access to the prescribed therapy. While intended as a cost-control measure, this practice can result in serious delays in optimal diabetes management, potentially leading to avoidable complications such as severe hyperglycemia, diabetic ketoacidosis, and long-term organ damage (such as chronic kidney disease, heart disease, stroke, amputations, diabetic eye disease, etc.).

Diabetes management is highly individualized. The selection of an insulin or other medication therapy regimen is based on multiple patient-specific factors, including glucose patterns, lifestyle, comorbidities, and risk of adverse effects such as hypoglycemia. When step therapy policies interfere with evidence-based prescribing, they not only disrupt treatment plans but can also increase overall healthcare costs due to emergency room visits, hospitalizations, and worsening disease progression. In addition, step therapy policies can further worsen therapeutic inertia, which is a lack of timely adjustments or intensification of diabetes therapy. It is widely known that early blood glucose management leads to better health outcomes for people with diabetes.

Please also consider that the economic burden of diabetes is substantial. In 2022, the total cost of diabetes, and its complications, in the United States was estimated at \$413 billion, with \$307 billion attributed to direct medical costs and \$106 billion to reduced productivity. In Maryland, diabetes and prediabetes cost an estimated \$7.01 billion annually, with serious complications including heart disease, stroke, amputation, end-stage kidney disease, blindness, and death.

Furthermore, adherence to insulin therapy is already a significant challenge due to cost, complexity, and patient burden. Adding unnecessary road blocks in the form of step therapy exacerbates these barriers and places patients at risk of poor glycemic control. As a pharmacist specializing in diabetes, I have witnessed firsthand the frustration and harm these policies cause, particularly for individuals requiring rapid insulin/medication adjustments to prevent dangerous complications.

HB970 is a critical step in protecting the health and safety of Maryland residents living with diabetes. By eliminating step therapy restrictions for insulin and similar medications, the General Assembly can ensure that healthcare providers can make timely, evidence-based decisions without unnecessary administrative burdens, ultimately leading to improved patient outcomes and reduced healthcare expenditures.

If I may add a suggestion to amend the following statement on page 2, line 32 "Used to treat the insured's or enrollees type 1, type 2, or gestational diabetes ...". As there are additional types of diabetes this statement as this may exclude patients with latent autoimmune diabetes in adults (LADA), type 3c diabetes, maturity onset diabetes of the young (MODY), etc.

I propose the following or similar change which will be inclusive of additional types of diabetes: "Used to treat the insured's or enrollee's diabetes including but not limited to type 1, type 2, or gestational diabetes...".

I respectfully urge you to support HB970 and prioritize patient-centered care in diabetes management.

Thank you for your time and consideration. Please feel free to reach out for further comment or testimony.

Sincerely,

Dr. Paola Acevedo, PharmD, CDCES Ambulatory/Primary Care Clinical Pharmacist Certified Diabetes Care and Education Specialist