

ACCESS TO AFFORDABLE AND ADEQUATE DIABETES SUPPLIES

INTRODUCTION

Diabetes is a life-threatening disease affecting more than 20 million Americans. Individuals with diabetes must manage and treat their condition on a daily basis with the guidance of physicians and other medical professionals. Multiple studies have shown that, in order to successfully manage the disease and stave off complications, people with diabetes must frequently check their blood glucose levels. Unfortunately, many patients do not have affordable and adequate access to blood glucose test strips and other related supplies required to effectively manage their condition on a daily basis. Endocrinologists and other physicians, while able to provide guidance to patients on how to manage the disease, are frequently unable to provide direct assistance to individuals who cannot access or afford these supplies.

BACKGROUND

The Diabetes Control and Complications Trial (DCCT)¹ and the UK Prospective Diabetes Study (UKPDS)² demonstrated that in patients with diabetes, complications of the disease could be avoided or significantly reduced when blood glucose levels are strictly regulated. Complications such as diabetic retinopathy, kidney disease, and nerve disease can result when blood glucose levels remain uncontrolled. With access to the vital and necessary tools a person with diabetes needs to manage their condition, such as blood glucose testing meters and strips, these expensive complications can be avoided.

People with diabetes require medications and supplies on a daily basis, including such things as insulin, oral medications, lancets, syringes, and testing supplies including a blood glucose meter and blood glucose testing strips. Even with generous health coverage, co-pays for such supplies, as well as periodic doctor appointments, and any care required for complications of the disease, can become financially taxing. While generic versions of medications and supplies exist, blood glucose test strips remain one of the costliest aspects of diabetes care. In fact, blood glucose

test strips can cost up to \$.80 - \$1.00 apiece.³ People with diabetes use one test strip every time they check their blood glucose levels, which can occur upwards of 6 times per day or more. For a person with diabetes requiring multiple daily blood glucose checks, this cost, even with adequate health coverage, can become overwhelming.

CONSIDERATIONS

Many pharmaceutical companies offer free or low-cost samples of diabetes medications and insulin to patients who lack health coverage. Additionally, endocrinologists and other medical professionals may have access to some free samples to share with their patients. Unfortunately, very few manufacturers of glucose testing devices and supplies offer free or low-cost blood glucose test strips to individuals who cannot access or afford them. Those that do provide assistance generally offer it only for a limited time. Additionally, the programs that do exist do nothing to assist the many Americans with diabetes who may have health coverage but whose coverage either does not include blood glucose test strips, or whose co-pays are too costly to purchase an adequate supply of test strips each month.

Today, 46 states and the District of Columbia require that state-regulated health plans provide coverage for necessary diabetes supplies and medications, including blood glucose test strips and blood glucose meters, though co-pays still apply. Other health plans, however, including those regulated by the federal government are not bound by such requirements. While many employer-sponsored health plans governed by federal law do provide coverage for diabetes supplies including blood glucose test strips, they are not required to do so. Even when health plans do cover these diabetes supplies, they may impose restrictions on the amount available to a patient in a given month, or impose excessive co-pays. Without the ability to obtain an adequate number of test strips, patients may have trouble maintaining control of their diabetes and may ultimately experience one of the costly complications associated with the disease.

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¹ Diabetes Control and Complications Trial. National Institute of Diabetes, Digestive, and Kidney Diseases. National Institutes of Health. Accessed online at <http://diabetes.niddk.nih.gov/dm/pubs/control/>.

² UK Prospective Diabetes Study. The Oxford Center for Diabetes, Endocrinology, and Metabolism Diabetes Trial Unit. Accessed online at <http://www.dtu.ox.ac.uk/index.php?maindoc=ukpds/>.

³ Georgetown University Health Policy Institute and American Diabetes Association. *Falling Through the Cracks: How Health Insurance Can Fail People With Diabetes*. 2005. Pg. 2. Accessed online at <http://web.diabetes.org/Advocacy/healthresearchreport0505.pdf>.



POSITION STATEMENT

Several employers have experienced cost savings as a result of providing greater coverage for diabetes care needs and reducing employee co-pays. Pitney Bowes⁴ has undertaken a project to provide increased coverage of diabetes supplies including blood glucose meters and test strips for employees with diabetes. The City of Asheville, North Carolina⁵ has also instituted a program for residents with diabetes that provides free diabetes care counseling by pharmacists and provides free blood glucose meters. Pitney Bowes has found that as a result of this initiative, absenteeism has been reduced and the employer's overall health expenditures were lowered. Asheville, NC has also experienced better health outcomes, and decreased health expenditures.

Because diabetes affects each person differently, no one treatment plan or program is appropriate for everyone. Patients must work with their health care providers to determine appropriate medications and care regimens. Patients must also be able to test their blood glucose levels to determine how those medications, as well as exercise, food, and other outside influences affect their blood glucose levels. Because diabetes is managed exclusively by the patient with assistance from his/her physicians, it should be the determination of the patient and doctor, not affordability and adequacy of health coverage that determines a patient's access to needed care and supplies.

POSITIONS

The Endocrine Society strongly supports efforts to ensure the accessibility, affordability, and adequacy of blood glucose test strips and other related supplies for the millions of Americans who require such care. As such:

- Federal and state governments must determine ways to ensure the affordability of blood glucose test strips and related supplies that are not hindered by the high cost of co-pays or deductibles.
- Federal and state governments must ensure that health care coverage options provide access to an adequate number of blood glucose test strips – as determined or prescribed by a physician – to maintain optimal glucose control.
- The Society encourages medical device manufacturers to adopt policies that provide broader access to free or low-cost diabetes supplies such as blood glucose test strips.
- The Society encourages insurers and health plans to classify blood glucose test strips as a pharmaceutical product, not durable medical equipment, so as not to inflict separate and costly deductibles on patients.

⁴ *The American Journal of Managed Care. Reducing Patient Drug Acquisition Costs Can Lower Diabetes Health Claims.* August, 2005. Pg. S-170-S-176. Accessed online at http://www.ajmc.com/files/articlefiles/A128_05augMahoneyS170to176.pdf.

⁵ Pharmacy Times Supplement. *The Asheville Project.* October, 1998. Accessed online at <http://www.pharmacytimes.com/files/articlefiles/TheAsheville>