



Increasing Access to and Affordability of Insulin

Insulin is a lifesaving medication, and ADCES believes that all entities must work to provide accessible and affordable insulin to all people with diabetes. In the United States alone more than 100 million adults are now living with diabetes or prediabetes.¹ For many with diabetes, insulin therapy is not an optional treatment but rather necessary for survival. Despite the increasing rate of diabetes in this country, and the critical importance of insulin for individuals diagnosed with diabetes, the cost of insulin has nearly tripled in the past fifteen years making it difficult for people with diabetes to afford the medication that they need to live. The drivers that determine the cost of insulin are complex and involve multiple stakeholders. ADCES advocates for a comprehensive assessment of the entire supply chain to identify ways to ensure people with diabetes have access to insulin.

ADCES has identified the following principles to guide our efforts to advocate for improved access to insulin for people with diabetes:

- All people with diabetes must have affordable access to the insulin they need to live and have the best quality of life.
- Greater transparency is required across the supply chain to allow for the complete understanding of how insulin prices are determined.
- Insulin therapy is not a one size fits all approach. Care decisions must be made between the person with diabetes and his/her healthcare provider(s), and not driven by external factors such as cost management, formulary changes, or lack of access.
- All entities including providers, health systems, pharmaceutical companies, pharmacy benefit managers (PBMs), and payers must always put the person with diabetes first in their decision-making process.
- Cost-savings must be passed on to the person with diabetes at the point-of-sale.
- Out-of-pocket expenses for people with diabetes must be reduced significantly. Cost-sharing could be limited to a co-pay only to help people with diabetes anticipate and plan for their healthcare costs.
- People with diabetes and healthcare consumers must have easy access to up-to-date pricing information.
- People with diabetes and providers need access to the most updated formulary and pricing information in electronic medical records (EMR) and when accessing health plan information.
- People with diabetes and providers must be informed about cost-savings programs, like Patient Assistance Programs (PAPs) and low-income assistance programs, like Extra Help or State Pharmaceutical Assistance Programs (SPAPs). ADCES has prepared a hub of resources on PAPs

¹ Centers for Disease Control and Prevention. National Diabetes Statistics Report. <https://www.cdc.gov/diabetes/pdfs/data/statistics/national-diabetes-statistics-report.pdf> . Accessed March 21, 2019.

and affordability initiatives available to people with diabetes. Learn more at DiabetesEducator.org/Affordability.

- PAPs must continue to work with stakeholders in the diabetes community to simplify, streamline, and communicate eligibility requirements and application processes. These programs must also be expanded and made more inclusive.
- Policymakers must address coverage gaps and improve access and affordability for Medicare beneficiaries and those covered by other federal programs, especially those with limited or no access to PAPs.
- Policymakers must continue to eliminate policies and rules, like gag clauses, which prevent pharmacists from discussing less expensive options for purchasing medications with consumers and patients.
- The Federal government and other policymakers must promote the development and implementation of programs that reduce costs, improve care, and foster innovation.

Resources:

- [ADCES Access & Affordability Resources for Diabetes](#)
- [Increasing Insulin Affordability: An Endocrine Society Position Statement](#)
- [DPAC's Affordable Insulin Project](#)