

1/19/2021

TO: House Human Services Committee

DATE: 1/20/2021

RE: HB 1288

I am writing this letter of support for House Bill No 1288, relating to Medicaid coverage of continuous glucose monitoring devices.

My name is Sara Wiedrich and I am a family nurse practitioner who specializes in diabetes management. I provide care for patients with type 1 and type 2 diabetes all day, every day. I am strongly supporting this bill to provide access to and coverage for continuous glucose monitor (CGM) systems for patients with ND Medicaid coverage. My colleagues Amy Samples, PAC and Dr Eric Johnson also support the statements included in this letter as well as the passing of HB 1288.

I feel strongly that CGM systems are medically necessary for patients with both type 1 and type 2 diabetes who utilize insulin therapy, especially those that have hypoglycemia unawareness. CGM therapy has been proven to reduce incidence of and even prevent severe or life-threatening hypoglycemia. By limiting hypoglycemia, CGM systems can reduce ambulance calls, visits to emergency rooms and hospital admissions. In addition, use of CGM system with reduction in hypoglycemia can prevent falls with fractures, head injuries, motor vehicle accidents, etc, also leading to costly treatment and care and increased number of insurance claims.

Prevention and reduction of hyperglycemic events due to CGM use has been associated with limiting the development of long-term complications related to uncontrolled diabetes, including but not limited to retinopathy, nephropathy and neuropathy. This significantly reduces the cost of caring for and insuring patients with diabetes due to reduced frequency of office visits for diabetes management, reduced visits to emergency rooms or hospital admissions for hyperglycemia or diabetic ketoacidosis (DKA).

Patients with diabetes, who use insulin therapy, who have a CGM system are significantly less likely to acquire additional treatment costs due to hypoglycemia or prolonged hyperglycemia and will require fewer resources in the long-term, which associates with less cost to the system. In addition to reducing health complications, patients who use CGM therapy are more likely to report a higher quality of life and also have less work absenteeism.

Additionally, having access to a CGM system that integrates with an insulin pump provides life-changing therapeutic benefits by changing insulin delivery based on CGM readings, leading to significantly less hypoglycemia and hyperglycemia. Once again, more time spent in goal glycemic range limits complications and overall cost of caring for and insuring patients with diabetes.

We feel that patients should have a choice when it comes to utilizing technology to improve their diabetes control and would like to continue a conversation on how we can provide better coverage and access for CGM technology. Due to the importance of pump and CGM integration

for some patients, I would like to request an addendum to this bill to include the language “coverage of a continuous glucose monitoring device that has the capability to integrate with an insulin pump at the patient and providers discretion.”

Lastly, having state Medicaid coverage for CGM devices is not new. As of December 2019, approximately 36 states have CGM coverage under their Medicaid programs with 13 states providing coverage for patients with both type 1 and type 2 diabetes. Minnesota and South Dakota are surrounding states with CGM coverage by Medicaid programs. Additionally, patients with Medicare are also able to access CGM coverage.

Thank you for your time and consideration of this testimony. Please feel free to reach out with any questions or comments.

Respectfully,

Sara Wiedrich, FNP-C, CDE

Diabetes Management Specialist
CHI St. Alexius Heart and Lung Clinic
310 N 10th Street, Bismarck, ND 58502
P 701.530.7500 | F 701.530.7435
slwiedrich@primecare.org

Amy Samples, PAc

Diabetes Management Specialist
CHI St. Alexius Heart and Lung Clinic
310 N 10th Street, Bismarck, ND 58502
P 701.530.7500 | F 701.530.7435
alsamples@primecare.org

Eric Johnson, MD

Family Medicine Physician; Diabetes Specialist
Altru Family Medicine Center
1380 S Columbia Rd, Grand Forks, ND 58201
P 701.795.2000 | F 701.795.2260
eric.l.johnson@UND.edu