Chairperson Weisz and members of the Human Service committee, my name is Angela Kritzberger and I am from Hillsboro. I am here today to ask for your support of SB2140.

On June 14<sup>th</sup>, 2016 our **youngest daughter, age 7, was diagnosed with Type One diabetes** (T1D). After multiple trips to the doctor, and finally running a thorough blood panel to confirm the diagnosis, the results would change ours and her life forever. Unfortunately, T1D is a genetic game of Russian roulette in our family. We don't know when or who will be diagnosed, male or female, young or old. I have experienced caring for a daughter who lives with this disease; as well as experienced the loss of life to an uncle who could not effectively manage or afford the disease.

At the time of her diagnosis, we were given a three (3) hour crash course and sent home with a glucose meter, test strips, a lancet, ketone strips, needles and a 200-page book as a resource called "Understanding Diabetes"-**the very basic supplies listed in this bill that a Type One diabetic needs to survive this potentially terminal disease.** And finally, the one thing that her body had failed to produce for her to sustain life: insulin. Enough supplies and insulin to keep her alive for three (3) days before we were thrown into the fold of a **complex healthcare system, insurance woes and a crippling financial cost for some that cannot afford to survive it.** Each and every decision made by a person living with or caring for someone with T1D is a piece of the matrix to life that *determines the outcome of a life long lived, a life filled with health complications, or potentially an untimely death*.

Our daughter is a typical 14-year-old who looks forward to a future filled with hopes and dreams. We have relied on her pediatric endocrinologist to prescribe the most appropriate medications and best practices for her care. *We are motivated to discover what the most effective, painless protocols and prescriptions are that will give her the best possible outcomes.* Our daughter wears a continuous glucose monitor (CGM) and an insulin pump. Prescribing the most effective, modern insulin to eliminate elevated and prolonged blood sugars to prevent chronic health conditions like eye, heart and kidney disease is not a luxury item decision. I would go so far to say that if you or a loved one were diagnosed with a terminal disease, if you would settle for a treatment that was decades old? When did we start using shame for people living with diabetes for wanting to have the best outcomes for a healthy life or just to simply live without the fear of dying?

Because my husband and I are self-employed, we bear the full cost of our family's high deductible health insurance plan at a premium level of nearly \$3,000 a month. We pay a \$5,000 family deductible before our co-insurance shares in the cost. To date, we have nearly reached that due to just her CGM and pump supplies for the first three (3) months of this year. Prior to our work on a similar bill in the last legislative session, we had been paying \$1,100 a month for her inslun. Today, we are now paying \$5. As a result of our advocacy work, some insurance plans are starting to adjust their copays. As a result of advocacy work nationwide, 23 states and counting have already successfully passed, supported and sustained this type of legislation. Since the passing of the Alec Smith Insulin Affordability Act in Minnesota in 2021, 465 lives were saved last year. We are not asking for North Dakota to be the first state any longer, but rather we are pleading for North Dakota to not be the last. Let's save lives together.

We know SB2140 will directly affect thousands of lives in our state. During the 2021 legislative

session we learned that almost 700 members filed claims for insulin under the NDPERS system in 2020. Under the current submitted testimony, it is estimated that over 2,000 NDPERS members would receive lower cost insulin and insulin supplies. That is nearly *three (3) times higher in the last two (2) years*. We know that the rate of T1D as well as other insulin dependent diabetes is showing a steep increase in diagoses. In 2022, the average for new diagnoses of children with T1D was one child per week in the Fargo pediatric clinic that we also doctor at. In the first weeks of January 2023, that number had already tripled.

Passing SB2140 is an important first step. I cannot sit idly by watching friends and loved ones ration their insulin while some of us have access to affordable insulin, knowing that one day soon my daughter will be "one of them". I am asking you today – what is it that you choose for thousands of North Dakotans who have been forced to pay the price of a disease they did not choose? If not me, then who? If not them, than you. Lives depend on it.

Angela Kritzberger Hillsboro Mother of a child living with Type One diabetes Diabetes Advocate