



Senate Bill 2140 – Support
January 11, 2023
Senate Human Services
Janelle Moos, AARP ND- jmoos@aarp.org

Chair Lee and Members of the Senate Human Services Committee,

My name is Janelle Moos, Advocacy Director with AARP North Dakota. The high cost of insulin and other prescription drugs is putting life-saving medications out of reach for many North Dakotans.

AARP is a nonpartisan, nonprofit, nationwide organization with nearly 38 million members. 84,000 of those members live in North Dakota – a staggering number when you consider the overall population of our state.

The high cost of prescription drugs hits our members, and frankly all North Dakotans. In AARP's 2020 survey of North Dakota adults, in the past two years, one-quarter reported not filling a prescription that was provided by their doctor- 44 percent of those adults- decided not to fill a prescription that their doctor had given them because of the cost of the drug. As between 2012 and 2017, the average annual cost of prescription drug treatment increased 57.8 percent, while the annual income for North Dakotans only increased 6.7 percent.

We hear stories from North Dakotans trying to manage the high cost of medicine along with paying for other necessities like food and utilities. For example, Dennis, a diabetic, who told us about his concerns he may have to go back to work after retiring to pay for his insulin- his co-pay is about \$100/month- with insurance- without insurance, his co-pay would be about \$400/month.

Even though insulin has been around for almost a century, the cost of the diabetes drug has skyrocketed in recent years, nearly tripling between 2002 and 2013. And Medicare Part D spending on insulin jumped 840 percent between 2007 and 2017, from \$1.4 billion to \$13.3 billion, far outpacing growth in the number of beneficiaries using insulin therapy, according to a Kaiser Family Foundation analysis.

All totaled, Americans with diabetes, the majority of whom are older adults, face insulin prices that average more than \$5,000 per year, some reports show. And these high prices have led a growing number of patients who rely on the lifesaving drug to resort to rationing or skipping doses because they can't afford the medication.

Placing a cap on consumer's out-of-pocket prescription drug expenses is one approach that some states are considering relieving consumer's financial burdens. States have designed out of-pocket caps in a number of ways, including applying spending limits to certain drugs only, or applying the cap to either a consumers' monthly or annual prescription drug expenditures. AARP believes that such efforts should be implemented in conjunction with other policy changes that will help reduce prescription drug prices.

We encourage the legislature to consider this bill along with other broader reforms such as prescription drug reference rate pilot project as part of the conversation to help lower the cost of prescription drugs for North Dakotans.

Thank you again for your thoughtful work on this issue. We wholeheartedly appreciate any effort to make medicine more affordable.