

March 27, 2023

The Honorable Rob Nosse  
Oregon House Committee on Behavioral Health and Health Care  
900 Court Street, SE  
Salem, OR 97301



**Re: HB 3380 – Support**

Dear Chairman Nosse:

I write on behalf of the Diabetes Patient Advocacy Coalition (DPAC), to express our support for HB 3380 which will ensure access to continuous glucose monitoring (CGM) products for Oregonians with diabetes of all ages, who use insulin to manage their disease, enrolled in the Oregon Health Plan. DPAC is uniquely qualified to provide commentary on the necessity of CGM coverage for all as we are co-founded and run by people with diabetes who understand, that like managing diabetes, fixing inequities in America's health system requires a long-view and long-term commitment. We work to provide a real-world patient voice on policy matters that is too often missing from important policy conversations in Congress and state capitols.

HB 3380 directs the Oregon Health Authority to cover CGM products for adults who use insulin in the Oregon Health Plan consistent with similar coverage available to those under age 21 today. Oregon today is the sole state in the Pacific NW to limit CGM coverage to those under 21 who use insulin and exclude adults who use insulin from having the ability to use this life altering technology. The legislation also allows the state to cover CGM products via a patient's pharmacy benefit as opposed to current practice of fulfilling CGM orders via durable medical equipment (DME) providers. Accessing CGM through the pharmacy is more convenient for patients and importantly removes a barrier to access and use of this important technology.

DPAC believes as a core principle that CGM coverage should reflect product labeling and evidence-based guidelines that associate CGM use with improved HbA1c, increased time in range, and reduced hypoglycemic events. Further clinical studies show when patients go off CGM devices, their HbA1c numbers increase and complications may arise, creating clinical and financial troubles for families. Each of these truths document the necessity of providing CGM coverage to Medicaid enrollees with diabetes of all ages who need a CGM to manage their disease.

It may also prove worthwhile for legislators and regulators to consider a recent announcement from the Centers for Medicare and Medicaid Services (CMS) that finalized its local coverage determination (LCD) rule governing CGM coverage within the Medicare program. This new [LCD rule](#), effective April 16, 2023, allows CGM coverage for all Medicare beneficiaries taking any type of insulin, regardless of amount, as well as other key criteria consistent with the American Diabetes Association's nationally recognized Standards of Care.

We are pleased to support HB 3380 and believe it will go a long way towards improving accessibility to CGM products for patients and families enrolled in the Oregon Health Plan. Thank you for your time and consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "George Huntley".

George Huntley  
Chief Executive Officer