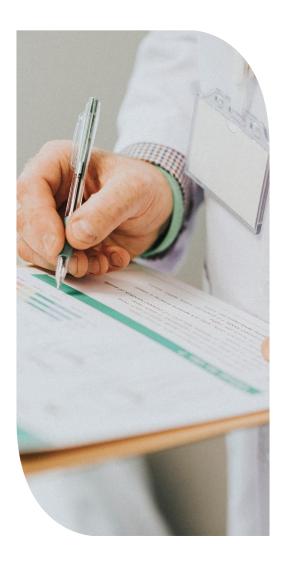
YOUR ONLINE TOOLKIT

Advocate for Private Insurance



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THE BASICS ON PRIVATE INSURANCE

Many people living with type one diabetes (T1D) rely on private insurance to access insulin pumps, advanced glucose monitoring devices, and insulin.

Private insurance is usually funded by an employer, union or association through an employee healthcare plan. Approximately 85% of insurance providers in Canada offer continuous glucose monitor (CGM) systems and flash glucose monitoring (FGM) systems coverage for the majority of their plans.

Your employer, union or association is the plan sponsor who funds the health benefits program. As the payer, they hold the power to give you access to your device, system or drug. Insurance companies provide offerings and packages to plan sponsors. Each health benefits plan is different – a plan sponsor selects one and self-funds or pays premiums for each plan member, for the selected plan. Typically, the more comprehensive the coverage, the more expensive the plan.

ADVOCATE FOR ESSENTIAL MEDICATION AND TECHNOLOGY

Some benefit plans will **not cover** drugs and devices that are normally covered if a doctor has deemed them "medically necessary" for the patient/claimant. Some plans have extended or enhanced benefits which require that all treatments deemed "medically necessary" for the patient/claimant will be covered.

If you don't have coverage for essential medications, insulin pumps or advanced glucose monitoring systems and need them, advocate for it! You can escalate the issue to your employer, association and/or union as well as the insurance company. Write to them to explain the impact these drugs or technologies provide people with T1D and urge them to include them as a standard benefit in your healthcare plan. Make them aware of the risks and challenges that living with insulin use presents each and every day. Tell your compelling personal stories of hyperglycemic and hypoglycemic events, some life-threatening that impact your quality of life. If this is about your child, talk about your fears, and issues that occur day and night. Caring for a loved one with T1D means you need to take time off work. If you are employed, discuss the impact on your performance at work and let them know that optimizing your diabetes management will improve your productivity and reduce the likelihood that you will be absent from work. Provide reasons for why comprehensive coverage is good for you and your family, and the plan sponsor who pays for the health benefits plan. They want to hear from you and understand why this is important to everyone.



ADVOCATE TO YOUR EMPLOYER, UNION OR ASSOCIATION

Does your insurance company cover CGM or FGM systems as a standard benefit but your employer, union or association has not subscribed or opted-out of coverage in your health benefits plan?

Set-up a meeting with your benefits administrator to explain the importance that CGM or FGM systems has on your life or a member of your family.

HELPFUL TIPS





Include a personal story\quote. This makes your letter more compelling and the reader is more likely to be sympathetic to a specific situation.



Include your contact information and ensure you follow up with the person you are contacting 2 weeks after sending your letter.



Remember, change will not happen overnight but with these tools, you have the power to influence decision makers.

GET STARTED

Here's a series of steps to get you started:

1

Review your private insurance. Find out who your insurance provider is, and what is covered by your employer, union, or association benefits plan.

3

If your private insurer does not cover CGM or FGM devices, then you will need to speak to your employer, union, or association to get them to include CGM and FGM coverage. 2

Look up your private insurer to see if they are one of the 15% of insurance providers who do not provide CGM and FGM coverage. If this is the case, then you will need to advocate to the insurance company directly using our letter templates. Be sure to customize your letter by adding a few personal details. It's important to note any additional reasons why you or your loved one who lives with type 1 diabetes would benefit from CGM (such as hypoglycemic unawareness or additional conditions or complications).



To start, reach out to your benefits administrator for your employer, union, or association. If you don't know who this is, reach out to your union representative or HR department for the information. You can use our template letter to help you get started, and again, be sure to customize it to describe your personal story.



Make sure to follow up after sending the letter if you have not heard back. Be persistent and honest, and in your meetings with your either your benefits administrator or insurance company, talk about the effects T1D has on your life/the lives of your loved ones, and the benefits that you would gain from having access to CGM and FGM device coverage.

CONTACT THE MANUFACTURER

Often, the manufacturers of the devices you are interested in getting covered will be willing to assist you in advocating for coverage. Do not hesitate to contact them for help and support:

Dexcom

www.dexcom.com/en-CA

Medtronic

www.medtronicdiabetes.com/treatments/continuous-glucose-monitoring

Abbott

www.ca.abbott/en-ca/products/diabetes-care. html



SAMPLE LETTER TO INSURANCE COMPANY

Dear <insert contact name>,

I am writing to inquire about coverage status of two important diabetes management devices to understand why they are not standard options in your group health plans.

I am person\parent of a child> living with type 1 diabetes (T1D) which is an
autoimmune disease in which a person's pancreas stops producing insulin, the
hormone that enables people to get energy from food. This leads to higher levels
of glucose in the blood and no amount of diet or exercise can prevent it. Patients
with T1D struggle to manage their disease daily, through frequent checking of blood
glucose levels, regular infusions of insulin—by means of multiple daily injections or
with an insulin pump—carefully adjusting each dose to balance against carbohydrate
consumption and activity levels.

Fortunately, new and innovative advanced glucose monitoring technologies, such as Continuous Glucose Monitoring (CGM) and Flash Glucose Monitoring (FGM), are proving extremely effective in helping patients and families with the disease better manage their blood glucose. This means improved health outcomes, fewer emergency room visits, fewer long-term complications, and improved quality of life. These devices are now covered as standard by many of Canada's top insurers including Great West Life, Sun Life, and Desjardins.

This device is life-changing for me and my family. I am urging **<insert company name>** to commit to covering CGM and FGM as a standard inclusion under all eligible healthcare plans.

I would be pleased to set-up a meeting to discuss this issue further if you have any questions or concerns.

Sincerely, <insert name and contact details>

SAMPLE LETTER TO

EMPLOYER

Dear <insert contact name>,

I am writing to you today to express my concern with the current benefit package being offered by **<insert company name>.**

I am <person\parent of a child> living with type 1 diabetes (T1D) which is an autoimmune disease in which a person's pancreas stops producing insulin, the hormone that enables people to get energy from food. This leads to higher levels of glucose in the blood and no amount of diet or exercise can prevent it. Patients with T1D struggle to manage their disease daily, through frequent checking of blood glucose levels, regular infusions of insulin—by means of multiple daily injections or with an insulin pump—carefully adjusting each dose to balance against carbohydrate consumption and activity levels.

Fortunately, new and innovative advanced glucose monitoring technologies, such as Continuous Glucose Monitoring (CGM) and Flash Glucose Monitoring (FGM), are proving extremely effective in helping patients and families with the disease better manage their blood glucose. This means improved health outcomes, fewer emergency room visits, fewer long-term complications, and improved quality of life. In a workplace context, this means fewer absences from work, improved productivity, and happier, healthier employees! In addition, these devices are now covered as standard by many of Canada's top insurers including Great West Life, Sun Life, and Desjardins.

Unfortunately, our current benefits package does not include coverage for these devices. It is my understanding that you have the ability to help add this option to our plan. I am seeking your support for the funding of this equipment for those who, through no personal fault of their own, suffer and cope on a daily basis with type 1 Diabetes.

The time to make this addition is now. Continuous Glucose Monitoring Systems and Flash Glucose Monitoring systems are now considered "Standard of Care" as a basic need for those on insulin therapy. Many benefit packages now include this life changing technology. I recommend that **<insert company name>** join the vast majority of plan sponsors that cover these systems. Better control and optimizing management of type 1 Diabetes is achieved through better monitoring, and scientific evidence supports that advanced glucose monitoring technologies like CGM and FGM systems accomplish this.

I would be pleased to set-up a meeting to discuss this issue further if you have any questions or concerns.

Sincerely, <insert name and contact details>