

Steven Sepe

From: Casey Hamilton <Casey.Hall@PremiseHealth.com>
Sent: Thursday, January 29, 2026 9:19 AM
To: House Health and Human Services Committee
Cc: Rep. Donovan, Susan R; Rep. Giraldo, Joshua J.; Rep. Potter, Brandon C.; Rep. Ackerman, Mia A.; Rep. Bennett, David A.; Rep. Boylan, Jennifer; Rep. Fogarty, Kathleen A.; Rep. Cotter, Megan L.; Rep. Handy, Arthur; Rep. Hopkins, Marie A.; Rep. Kislak, Rebecca M.; Rep. McGaw, Michelle E.; Rep. Place, David J.; Rep. Speakman, June; Rep. Stewart, Jennifer A.; Rep. Shekarchi, K Joseph; Lynne Urbani; Sen. Lauria, Pamela J.; Cfedericorx@gmail.com; info@ripharmacists.org; info@campsurefire.org; laura.schafer@rocketmail.com
Subject: SUPPORT - H7075 - Matt Federico Diabetic Safety Act - Glucagon

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29 January 2026

The Honorable Susan Donovan
Chair, House Committee on Health & Human Services State House
82 Smith Street
Providence, RI 02903
RE: H7075, H7188

Good morning,

My name is Casey Hamilton and I am a pharmacist and nationally certified diabetes educator in Rhode Island and Connecticut. I have also been involved with Camp Surefire, Rhode Island's only camp for children with Type 1 Diabetes, for over 10 years as both a camp counselor and medical staff. I am writing to you in support of House Bill 7075 (The Matthew Federico Diabetic Safety Act) and House Bill 7188. These bills are essential for the health and safety of Rhode Islanders with diabetes.

Bill 7075, requiring plans to cover one type of glucagon that does not require reconstitution, allows all people at risk for life-threatening low blood sugars to have access to an easy-to-use device that can be administered in an emergency to save their life. There are currently people with diabetes that cannot afford glucagon to keep on hand due to the extraordinarily high copays and deductibles insurance plans are requiring to obtain these devices. Alternatively, they may only be able to afford "old school" reconstitutable glucagon - meaning that in an emergency, a bystander or caregiver must use a needle and syringe to combine 2 vials of medication correctly, allow to dissolve, then properly withdraw and administer the medication correctly in a timely fashion to save a life. This is not feasible for the average person and can lead to delay of care and death.

Bill 7188, capping monthly costs of diabetic equipment and supplies, gives access to lifesaving (and life-changing) technology and supplies to treat diabetes. Continuous glucose monitors (CGMs) are a mainstay of diabetes care; the American Diabetes Association guidelines state that all patients with diabetes should have access to CGMs as they are correlated with significantly improved diabetes management and control. While this is a great guideline, it is extremely cost prohibitive for many people

due to the copays and deductibles associated with these devices. Having these devices allows people to monitor their blood sugars 24/7 without needing to constantly prick their finger for a single reading. This also alerts patients to dangerously low and high blood sugars before they happen, allowing them to act sooner and prevent dangerous situations, often requiring expensive hospitalizations. This bill also applies to insulin pump supplies. Modern insulin pumps act almost like an "artificial pancreas", preventing severe variations in blood sugars by using technology to adjust insulin administration without intervention from the patient. This results in better diabetes control, fewer hospitalizations, and less long-term (expensive) complications throughout their lives.

Having over 10 years of experience in diabetes care in both children and adults, I believe it is reckless to view these bills as anything but absolutely essential for Rhode Islanders as a whole. While they may seem expensive on paper, they are cost-saving in terms of hospitalizations and long-term diabetes complications. Having life-saving medication and equipment available also keeps children from missing school due to diabetes-related issues and keeps adults in the workforce by allowing to live "normal" lives without diabetes holding them back.

Rhode Island has already been on the forefront of diabetes care with the passing of insulin capping bills in recent years. Please continue to support this community by passing the aforementioned bills and keeping our people safe and healthy.

Thank you for your time and consideration,

Casey Hamilton, PharmD, RPh, CDCES

Clinical Pharmacist, Electric Boat Family Pharmacy & Wellness Center
Medical Staff, Camp Surefire

P: 401.345.8488

E: casey.hamilton@premisehealth.com