

29 January 2026

The Honorable Susan Donovan
Chair, House Committee on Health & Human Services
Rhode Island State House
82 Smith Street
Providence, RI 02903

RE: H 7075 – RELATING TO INSURANCE -- ACCIDENT AND SICKNESS INSURANCE POLICIES --
THE MATTHEW FEDERICO DIABETIC SAFETY ACT

Dear Chair Donovan and members of the Committee:

I am a clinical professor of pharmacy and board-certified pharmacotherapy specialist. I have practiced at several ambulatory care clinics and skilled/long-term nursing facilities within Rhode Island, Pennsylvania, and North Carolina. I have experience with family medicine and geriatric patients, including those facing significant barriers to care such as cost, access, and adherence to medications.

I am writing in support of H 7075 – the Matthew Federico Diabetic Safety Act, to ensure patients have access to glucagon. A companion bill has also been introduced in the Senate.

Insulin and other antidiabetic medications increase the risk for hypoglycemia, and access to glucagon to treat severe hypoglycemia is critical. A 2020-21 internet panel survey conducted in adults (ages 18-90) with type 1 or 2 diabetes in the United States estimated the incidence of “Level 3” severe hypoglycemia¹. Level 3 hypoglycemia is defined by the American Diabetes Association 2026 guidelines as low blood glucose resulting in mental or physical dysfunction that requires the assistance of another person to help the patient recover². This includes professional or non-professional assistance, and family or caregivers of someone with diabetes may be trained to administer glucagon. The study revealed that **35.0%** (345 out of 985 patients) experienced one or more Level 3 severe hypoglycemic events during a 12-month period of time¹. This included 45.0% of all patients in the study with type 1 diabetes and 33.0% of all patients in the study with type 2 diabetes. The annual rate of these level 3 events was **4.98 per person¹**.

The Rhode Island Department of Health [Diabetes Data webpage](#) states an estimated 105,437 adults in Rhode Island reported a diagnosis of diabetes in 2023, an increase from 6.0% of RI adults in 2000 to **11.8%**. More Rhode Islanders may be undiagnosed. It is imperative that glucagon is accessible for Rhode Islanders to ensure they can be rapidly treated for severe hypoglycemia and avoid potential consequences such as cardiovascular morbidity and mortality².

Thank you,



Christine Eisenhower, Pharm.D., BCPS
Cumberland, RI

1. Ratzki-Leewong A, Black JE, Ryan BL, et al. Real-world incidence and risk factors of level 3 (severe) hypoglycemia in adults with type 1 or 2 diabetes (iNPHORM, United States). *Diabetes Obes Metab* 2026;28(1):675-690. Doi: 10.1111/dom.70252.

2. American Diabetes Association Professional Practice Committee for Diabetes*. Glycemic goals, hypoglycemia, and hyperglycemic crises: Standards of Care in Diabetes-2026. *Diabetes Care* 2026;49(Supplement_1):S132-S149. Doi: 10.2337/dc26-S006.