

# Minnesota Insulin Safety Net Program **Provider Toolkit**

*This toolkit aims to help pharmacists, pharmacy technicians, and providers understand and share information about Minnesota’s Insulin Safety Net Program (ISNP).*

*For more information, visit [mninsulin.org](http://mninsulin.org).*

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# The Alec Smith Story



**Watch the Video Story (<https://youtu.be/kSL39vG31tI>)**

# Talking Points & Messaging Tips

- **The Minnesota Insulin Safety Net Program was created to help Minnesotans who have difficulty accessing their insulin.** The program is made up of two parts: the urgent need program and the continuing need program.
- With the **urgent need program**, eligible Minnesotans who have less than a seven-day supply of insulin can receive a 30-day supply of insulin immediately at their pharmacy for no more than \$35.
  - Applying is quick and easy. To get insulin via the urgent need program, go to [mninsulin.org/urgent-need/](https://mninsulin.org/urgent-need/), download and complete the simple application form, and then take it to the pharmacy. The form can be processed immediately, and insulin can be dispensed on the spot.
- With the **continuing need program**, eligible Minnesotans who cannot afford their insulin can receive their prescribed insulin for no more than \$50 per 90-day supply.
  - Minnesotans can apply for the continuing need program annually.
- The Alec Smith Story: When Alec turned 26, he was no longer covered by his mother Nicole's health insurance, and he could not afford to pay for his next insulin prescription, which by then cost him \$1,300 a month. After rationing his insulin, Alec tragically died in his Minneapolis apartment from ketoacidosis.
- In 2020, the Minnesota Legislature passed the Alec Smith Insulin Affordability Act, which Governor Tim Walz signed into law on April 15, 2020. The Act created the Insulin Safety Net Program that now aids individuals who cannot afford insulin.

# Program FAQ

**Q: What is the Insulin Safety Net Program (ISNP)?**

**A:** The Minnesota Insulin Safety Net Program was created to help Minnesotans who face difficulty affording their insulin. The program is made up of two parts: the urgent need program and the continuing need program.

**Q: What is the urgent need program?**

**A:** The urgent need program allows eligible individuals who are in urgent need of insulin to get a one-time, 30-day supply of insulin from their pharmacy, for a \$35 co-pay. An urgent need supply can normally be obtained only once in a 12-month period. However, there is an option for some individuals to receive a second 30-day supply in certain circumstances.

**Q: How does somebody apply for the program?**

**A:** Applying is quick and easy. Applicants simply complete an application form and present it to their pharmacist. Pharmacists can quickly process the form and dispense insulin on the spot. You can download and print forms to share with patients and customers via this link: [mninsulin.org/urgent-need/](https://mninsulin.org/urgent-need/)

**Q: Who is eligible for the urgent need program?**

**A:** To be eligible for the urgent need program you must:

- Live in Minnesota.
- Have an urgent need for insulin.
- Have a current prescription for insulin.
- Pay more than \$75 each month for insulin.
- Not be enrolled in Medical Assistance or MinnesotaCare.
- Present identification proving Minnesota residency in the form of a valid Minnesota identification card, driver's license or permit, or tribal-issued identification. If you don't have one of these but you have an Individual Taxpayer Identification Number (ITIN), you can provide that instead. If you are a minor under the age of 18, your parent or legal guardian must provide the pharmacy with proof of residency or an ITIN.

**Q: What are some of the circumstances where people are eligible for the urgent need program?**

**A:** Applicants have an urgent need for insulin whenever they have less than a seven-day supply of insulin.

Circumstances where someone is eligible for the urgent need program include, but are not limited to:

- The applicant's insulin went bad due to excessive heat or cold
- The applicant is traveling and left their insulin at home
- The applicant cannot afford a re-fill of their insulin prescription
- The applicant is ill and in need of additional insulin that insurance may not cover
- The applicant is in between insurance policies, due to a change of job or other life events
- The applicant's insulin went bad in an insulin pump
- The applicant's insulin vial broke or shattered, and insurance won't replace it
- The applicant was put on a temporary medication that causes high blood sugars
- The applicant misplaced their insulin

# Program FAQ

**Q: What kinds of insulin are covered under the urgent need program?**

**A:** Most insulins that are dispensed by community pharmacies will be covered. Insulins not covered include:

- A few insulins that are used only within hospitals
- Products made by smaller insulin manufacturers
- Relatively inexpensive insulins that pharmacies can usually purchase for less than \$8.00 per milliliter

**Q: Do all pharmacies in Minnesota have to participate in the urgent need program?**

**A:** All pharmacies located within Minnesota and licensed in the community/outpatient category must participate in the Minnesota Insulin Safety Net Program. This includes chain pharmacies, independent pharmacies, and the outpatient pharmacies of some hospitals.

**Q: Can a pharmacy refuse to fill an urgent-need insulin prescription?**

**A:** A pharmacist may refuse to fill an eligible individual's insulin prescription only if:

- The pharmacist believes that filling the prescription could be harmful to the patient;
- The pharmacy does not have the insulin in stock;
- The application for the Urgent Need Program is not correctly filled out and signed; or
- The patient refuses to pay the co-pay.

If a pharmacy does not have the insulin in stock, the pharmacist will work to determine if the patient can wait to fill their prescription until they are able to get it in stock. If not, the pharmacist should, whenever possible, assist the patient in locating another nearby pharmacy that does have the insulin in stock.

If a pharmacist believes that filling the prescription might be harmful, the pharmacist should contact the prescriber to discuss and resolve the concerns. Pharmacists or their staff can assist in making sure that the application is correctly filled out.

**Q: What is the continuing need program?**

**A:** The continuing need program requires insulin manufacturers to provide insulin to eligible individuals for up to one year, with the option to renew annually. Throughout the year the individual is determined eligible, the manufacturers will provide their prescribed insulin for a co-pay of no more than \$50 for each 90-day supply.

Some individuals with insurance may be referred to a manufacturer's co-pay program, which waives all or part of the co-pay that the patient normally has to pay, if the co-pay program provides the patient with a better value.

# Program FAQ

## **Q: Who qualifies for the continuing need program?**

**A:** To be eligible for the continuing need program you must:

- Live in Minnesota.
- Present identification proving Minnesota residency in the form of a valid Minnesota identification card, driver's license or permit, or tribal-issued identification. If you don't have one of these but you have an Individual Taxpayer Identification Number (ITIN), you can provide that instead. If you are a minor under the age of 18, your parent or legal guardian must provide the pharmacy with proof of residency or an ITIN.
- Have a family income that is equal to or less than 400% of the federal poverty guidelines (FPG) income. See the Minnesota Board of Pharmacy website (<https://mn.gov/boards/pharmacy/insulinsafetynetprogram/>) for more information about the FPG.
- Not be enrolled in Medical Assistance or MinnesotaCare.
- Not be eligible to receive health care through most federally funded programs. Note: An individual who is enrolled in Medicare Part D is eligible for a manufacturer's insulin safety net program if the individual has spent \$1,000 on prescription drugs in the current calendar year and meets the other eligibility requirements.
- Not be eligible to receive prescription drug benefits through the Department of Veterans Affairs.

## **Q: If a manufacturer determines someone eligible for the continuing need program, what do they need to do to get their insulin?**

**A:** The individual needs to give their pharmacy the statement of eligibility they received from the manufacturer. They also need to give the pharmacy a prescription for insulin (unless the pharmacy already has a prescription on file for them). In other cases, their insulin will be shipped directly to their home.

In all cases, the individual should begin the application process at least a couple weeks in advance of when they will run out of insulin.

## **Q: How can patients seek assistance with their continuing need program application?**

**A:** Individuals can get help applying for the continuing need program from a MNsure-certified navigator (<https://mninsulin.org/continuing-need/index.jsp>). Navigators are experts at local, trusted community organizations that can help you apply for one of the manufacturer's programs. Individuals can also get help by contacting the Minnesota Board of Pharmacy (<https://mn.gov/boards/pharmacy/insulinsafetynetprogram/>).

# Posters & Rack Cards

Click on an image to download the PDF version.

## Posters

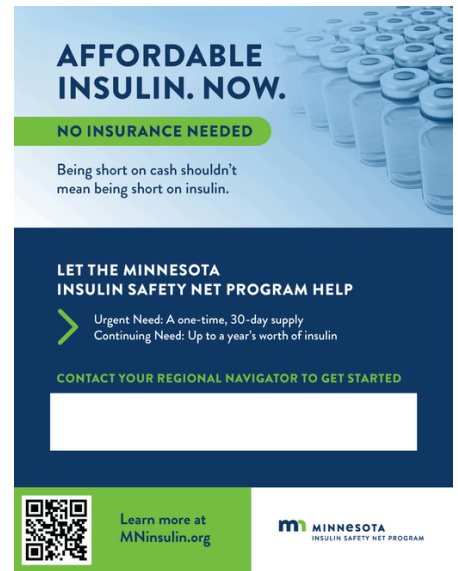
Affordable Insulin Now Poster  
Version #1



Affordable Insulin Now Poster  
Version #2



Affordable Insulin Now Poster  
Version #3



## Rack Cards

ISNP Rack Card - With Application  
Instructions



ISNP Rack Card - Two Sides Up  
With Application Instructions



# Social Media Graphics

Follow the links below to download graphics to share on your social media accounts. You can post these graphics with the copy on the next page of this toolkit.

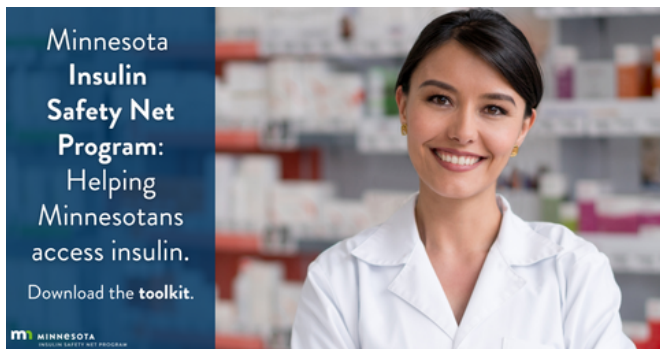
## Landscape graphics.

## Square graphics.

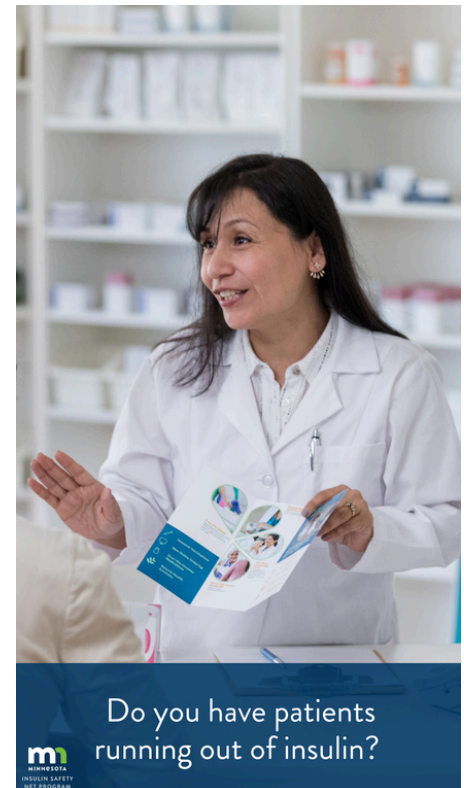
## Story graphics.

Examples:

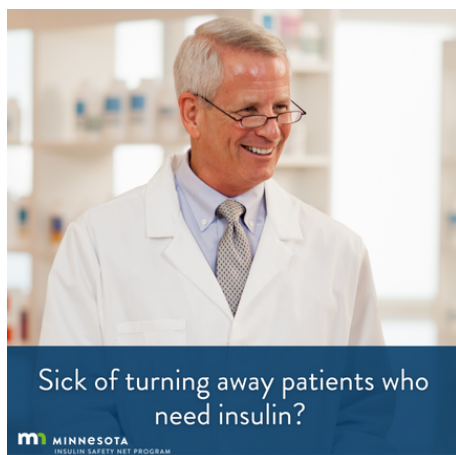
Landscape Pharmacist Social Media graphic example:



Story Pharmacist Social Media graphic example:



Square Pharmacist Social Media graphic example:



# Social Media Copy

## Pharmacists

Are you sick of turning away patients who need insulin?

Through Minnesota's Insulin Safety Net Program, individuals who have less than a seven-day supply of insulin can get a one-time, 30-day supply of insulin for \$35 at any Minnesota pharmacy, at no cost to the pharmacy. The application takes less than 5 minutes, can be processed immediately, and insulin can be dispensed on the spot.

Download application forms for your patients here: [mninsulin.org/provider-resources/index.jsp](https://mninsulin.org/provider-resources/index.jsp)

You don't have to turn away patients who cannot afford their insulin. Applying for Minnesota's Insulin Safety Net Program takes less than 5 minutes, insulin can be dispensed on the spot, and the program comes at no cost to the pharmacy.

Learn more about the program and how you can help patients apply: [mninsulin.org/provider-resources/index.jsp](https://mninsulin.org/provider-resources/index.jsp)

Do you have patients running out of insulin? If a Minnesotan has less than a 7-day supply of insulin, they can receive a one-time, 30-day supply for just \$35, at no cost to the pharmacy. All they need to do is take a few minutes to complete a simple application form, which the pharmacy can process on the spot and then dispense insulin immediately.

You can download application forms here: [mninsulin.org/provider-resources/index.jsp](https://mninsulin.org/provider-resources/index.jsp)

Minnesota's Insulin Safety Net Program is a quick, easy, and on-the-spot resource for Minnesotans who urgently need insulin or cannot afford their insulin on an ongoing basis. To help patients apply, I am downloading application forms and posters for my pharmacy.

You can find those materials and other resources here: [mninsulin.org/provider-resources/index.jsp](https://mninsulin.org/provider-resources/index.jsp)

## Doctors and Other Healthcare Providers

Are your patients stressed about the cost of their insulin prescription?

The Minnesota Insulin Safety Net Program was created to help Minnesotans who have difficulty accessing insulin. The program offers a quick and easy application that helps people in need receive their insulin on the spot.

You can download rack cards and learn how to help patients apply here: [mninsulin.org/provider-resources/index.jsp](https://mninsulin.org/provider-resources/index.jsp)

# Applications

**Pharmacists & providers can print applications to have available to customers.**

Urgent Need Program - How to Apply:

1. Download, print, and fill out the application form.
2. Bring application form to your pharmacist.
3. Receive urgent-need insulin.

[Download a fillable PDF Application Form.](https://www.mninsulin.org/mnsure/assets/Urgent-Need-Insulin-Application_tcm34-438051.pdf)

([https://www.mninsulin.org/mnsure/assets/Urgent-Need-Insulin-Application\\_tcm34-438051.pdf](https://www.mninsulin.org/mnsure/assets/Urgent-Need-Insulin-Application_tcm34-438051.pdf))

Or print the following pages.\*

\*Printable pages are updated as of July 30, 2024. Follow the link above to see the most updated version of application form.

# Urgent Need Printable Application Form



## Urgent Need Insulin Safety Net Program Application

Use this application if you have an urgent need for insulin. An urgent need for insulin means that you have less than a 7-day supply of insulin and you will likely have significant health consequences if you run out of insulin.

### Who qualifies for this urgent need program?

To be eligible for this program you must:

- Live in Minnesota.
- Have an urgent need for insulin.
- Have a current prescription for insulin.
- Pay more than \$75 each month for your insulin.
- Present identification proving Minnesota residency in the form of a valid Minnesota identification card, driver's license or permit, or tribal-issued identification. If you don't have one of these but you have an Individual Taxpayer Identification Number (ITIN), you can provide that instead. If you are a minor under the age of 18, your parent or legal guardian must provide proof of residency or an ITIN.

You can normally access an urgent need-insulin supply only once in a 12-month period. However, there are some circumstances in which you may be eligible to access a second 30-day supply. Complete the application below to see if you qualify.

If you qualify for the urgent need program, you can receive your insulin immediately, but you will need to pay up to a \$35 co-pay to receive your 30-day supply.

To get longer-term help covering your insulin costs, visit [MNinsulin.org](https://mninsulin.org) to learn about the continuing need program.

### How do I apply?

You must complete page two of this document and give it to your pharmacist.

You must either:

- Fill in the form on page two electronically and then print it. Sign the form by hand.
- Print the document. Fill in the form on page two by hand. Sign the form by hand.

If you are unable to print the document, your pharmacist can provide you a paper copy to complete at the pharmacy.

### Questions

If you have questions about the Minnesota Insulin Safety Net Program, contact your pharmacy, or contact the Minnesota Board of Pharmacy by visiting <https://mn.gov/boards/pharmacy/insulinsafetynetprogram/>.

### Privacy Notice

The information requested on this form is needed by your pharmacy to process your request for urgent-need insulin. The information is collected, maintained and shared as permitted or required under Minnesota Statutes, section 151.74.

### Alternative Formats

To request this document in an alternative format call 651-539-2099 or 855-366-7873, email [AEO@MNsure.org](mailto:AEO@MNsure.org), or mail to MNsure AEO office, PO Box 64253, St. Paul, MN 55164-0253.

# Urgent Need Printable Application Form

## Minnesota Urgent Need Insulin Safety Net Program Application

### Your Personal Information

**Do you live in Minnesota?** (If you do not live in Minnesota, you are not eligible for this program.)

☐ Yes ☐ No

First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Phone Number \_\_\_\_\_ Email Address (optional) \_\_\_\_\_

Home Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

Mailing Address (if same as above, leave blank) \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

### Health Care Coverage / Prescription Information

**1. Are you currently enrolled in Medical Assistance or MinnesotaCare coverage?**

☐ Yes ☐ No

**2. Do you have insurance and pay \$75 or less each month to purchase your insulin prescriptions?**

☐ Yes ☐ No

**3. In the previous 12 months, have you received an urgent-need supply of insulin through this program?**

☐ Yes ☐ No (please skip questions 4 and 5)

**4. Have you applied for Medical Assistance or MinnesotaCare health care coverage but are waiting for your coverage to begin, or to find out if you qualify?**

☐ Yes (please skip question 5) ☐ No ☐ Not applicable

**5. Have you been determined ineligible for a manufacturer's patient assistance program by the manufacturer, but are waiting on the Board of Pharmacy's decision on an appeal?**

☐ Yes ☐ No ☐ Not applicable

*If you answered "No" to questions 1, 2 and 3, OR you answered "No" to questions 1 and 2 and "Yes" to question 3 and "Yes" to question 4 or 5, you could be eligible for this program.*

### Signature and Date

By signing and dating below, you agree that all information is truthful. If you are a minor under the age of 18, your parent/guardian must sign and date the application on your behalf.

Print name (of guardian if applicant is a minor) \_\_\_\_\_

Signature (of guardian if applicant is a minor) \_\_\_\_\_ Date \_\_\_\_\_

### Official Pharmacy Use

I confirm that this individual had a valid prescription and provided the following valid form of identification:

☐ Driver's license/permit. Enter number: \_\_\_\_\_

☐ Minnesota identification card. Enter number: \_\_\_\_\_

☐ Tribal-issued identification. Enter number: \_\_\_\_\_

☐ Individual Taxpayer Identification Number (ITIN). Enter number: \_\_\_\_\_

Signature of pharmacist \_\_\_\_\_ Date \_\_\_\_\_

*Pharmacists with questions should contact the Minnesota Board of Pharmacy.*