



AMERICAN ACADEMY OF  
FAMILY PHYSICIANS  
STRONG MEDICINE FOR AMERICA

September 16, 2015

Dr. Jonathan Woodson, Assistant Secretary of Defense for Health Affairs  
Department of Defense  
1400 Defense Pentagon  
Washington, DC 20301-1400

Dear Assistant Secretary Woodson,

On behalf of the American Academy of Family Physicians (AAFP), which represents 120,900 family physicians and medical students across the country, I write to request that Department of Defense work to ensure that all health plan formularies under your responsibility cover insulin pens at the same tier as vial and syringe insulin injections. We believe there are benefits for both patients and the health system if insulin pens are placed on par with vial and syringe insulin injections in patient-centered formularies.

Diabetes is a disease that imposes a significant burden on both our patients and our health care system, and many patients with diabetes require insulin to appropriately treat their disease. Unfortunately, many patients have difficulty with vial and syringe insulin injections and thus rely on insulin delivery devices such as insulin pens, which have been shown to improve adherence to insulin therapy. Insulin pens promote better compliance overall than do vials and syringes since the pens are easier and more convenient to use. This is especially important for the visually impaired, those with arthritic conditions, and children. In addition, insulin pens are the standard of care in Europe.

Regrettably, many public and private health care plans have limited patient access to insulin pens on their formularies or eliminated access altogether. For patients who have difficulty with vial and syringe insulin injections, such formulary policies hamper their management of their diabetes, potentially leading to unnecessary complications to the patient and costs to the health care system. We believe those complications and costs are avoidable when health plan formularies cover insulin pens at the same tier as vial and syringe insulin injections. Accordingly, we urge you to adopt that approach for all health plan formularies for which your office is responsible.

Thank you for your time and consideration. If you or your staff has any questions about this matter or if we may further facilitate matters in this regard, please contact Robert Bennett, Federal Regulatory Manager, at 202-232-9033 or [rbennett@aafp.org](mailto:rbennett@aafp.org).

Sincerely,

Reid B. Blackwelder, MD, FAAFP  
Board Chair

[www.aafp.org](http://www.aafp.org)

**President**

Robert L. Wergin, MD  
Millford, NE

**President-elect**

Wanda Filer, MD  
York, PA

**Board Chair**

Reid B. Blackwelder, MD  
Kingsport, TN

**Directors**

Carlos Gonzales, MD, *Patagonia, AZ*  
Carl Olden, MD, *Yakima, WA*  
Lloyd Van Winkle, MD, *Castroville, TX*  
Yushu "Jack" Chou, MD, *Baldwin Park, CA*  
Robert A. Lee, MD, *Johnston, IA*  
Michael Munger, MD, *Overland Park, KS*

Mott Blair, IV, MD, *Wallace, NC*

John Cullen, MD, *Valdez, AK*

Lynne Lillie, MD, *Woodbury, MN*

Emily Briggs, MD, MPH, (New Physician Member), *New Braunfels, TX*

Andrew Lutzkanin, MD, (Resident Member), *Ephrata, PA*

Kristina Zimmerman (Student Member), *Dalton, PA*

**Speaker**

John S. Meigs Jr., MD  
Brent, AL

**Vice Speaker**

Javette C. Orgain, MD  
Chicago, IL

**Executive Vice President**

Douglas E. Henley, MD  
Leawood, KS