INSULIN PUMP PROGRAM QUESTIONS AND ANSWERS

Who is eligible to apply for the PEI Insulin Pump Program?

On September 1, 2024, the Insulin Pump Program expanded to include PEI residents of all ages who are medically eligible. Islanders living with type 1 diabetes who are medically eligible can apply to the PEI Insulin Pump Program to help offset the cost associated with insulin pump therapy.

The diabetes care team must be satisfied that you are a good candidate for an insulin pump before they approve you for this program. For more information, see the Insulin Pump Program web page and the Insulin Pump Program Eligibility Criteria.

For further questions, talk to your diabetes care team.

As the program expands, we anticipate a higher demand for services. This increased demand, along with capacity of specialists and personal readiness, may lead to significant delays for some patients starting on insulin pump therapy. To address this, Health PEI is actively recruiting specialist physicians and diabetes educators to support the program

How do I know if an insulin pump is right for me or my child?

There are many advantages to insulin pump therapy but there are also potential disadvantages. Take the Are You Ready to Pump? self-assessment then speak with your diabetes care team to see if insulin pump therapy is a good fit for you or your child.

How can I (or my child) enroll in the program?

Follow the steps on the Insulin Pump Program web page.

I currently do not attend the Provincial Diabetes Program. Can my family physician or nurse practitioner sign the medical eligibility form?

No. Your family physician/nurse practitioner can refer you to the Provincial Diabetes Program for consideration for insulin pump therapy. The Provincial Diabetes Program team will determine if you meet the medical eligibility.

What will it cost?

The PEI Insulin Pump Program may provide up to 100% coverage to assist with the cost of the pump and quarterly pump supplies (i.e., shipment every 3 months) for those who qualify. The amount this program will provide for you depends:

- your total household income
- coverage through private health insurance (if applicable)
- device costs

The cost to the individual or family will vary. Use the Insulin Pump Payment Calculator to determine the estimated out-of-pocket costs for your insulin pump and supplies.

I am currently followed by a diabetes care team outside of PEI, however I am a PEI resident. Can my off-island diabetes specialist sign the medical eligibility form?

If you are followed by an out-of-province care team, the PEI Provincial Diabetes Program medical director must approve your application. Follow the steps below:

1. Contact the PEI Insulin Program administrator for an application:

   Insulin Pump Program Administrator
   PEI Pharmacare
   PO Box 2000
   16 Fitzroy Street
   Charlottetown, PE C1N 7N8
   Telephone: 902-213-4825
   Email: insulinpumpprogram@ihis.org

2. Complete this application with your out-of-province diabetes care team. Your out-of-province care provider will need to complete part of this application. Your out-of-province care provider will also need to provide additional information to Health PEI to confirm medical eligibility (i.e., lab work and clinic visits).

3. Send your application to the Insulin Pump Program administrator. The Insulin Pump Program administrator will send it to the Provincial Diabetes Program medical director for approval.

4. If approved, the Provincial Diabetes Program medical director will sign the confirmation of eligibility and return it to the Insulin Pump Program administrator who will process the application. Once completed, a letter of confirmation of registration in the PEI Insulin Pump Program will be sent to you and your chosen pump company.

5. Once registered, before ordering your pump and pump supplies, contact your out-of-province diabetes care team to determine your next steps. his team will be responsible for educating you on how to use the pump, deciding your pump start date and providing ongoing follow-up once you are using the insulin pump.

6. To renew your coverage in the program each year, your out-of-province care provider must sign a special authorization form that you must submit with your renewal application to the Insulin Pump Program administrator.

Can I apply my out-of-pocket co-pay expenses to the household cap for the PEI Catastrophic Drug Program?

No, out-of-pocket expenses paid for the insulin pump or pump supplies cannot be applied to the Catastrophic Drug Program household cap.

What insulin pump brands are approved under the Insulin Pump Program?

- **Medtronic Diabetes**
- **Omni-pod Insulin Pump**
- **Tandem**

How do you define Household?

A household is:

- a single adult
- an adult and spouse (refer to definition below)
- an adult and all dependent children (refer to definition below)
- an adult, spouse, and all dependent children

How do you define Spouse?

A spouse is a person who is married to you or with whom you are living in a marriage-like relationship. A spouse may be of the same gender.

How do you define Dependent?

A dependant is a child of a person or the person's spouse who is:

- Under 19 years of age and does not have a spouse or
- Is 19 years of age or over but under 25 years of age, is a full-time student and does not have a spouse

A dependant may only be a member of one household

When will I receive the insulin pump and supplies?

This will depend on program capacity and wait time to see a specialist in insulin pump therapy.

As the program expands, we anticipate a higher demand for services. This increased demand, along with capacity of insulin pump specialists and personal readiness, may lead to significant delays for some patients starting on insulin pump therapy. To address this, Health PEI is actively recruiting specialist physicians and diabetes educators to support the program.

The Insulin Pump Program will be registering participants for coverage in the following order:

1. Existing patients using insulin pump therapy who are followed by the Provincial Diabetes Program (at the discretion of the pump team)
2. Those previously on insulin pumps who lost coverage/ recently stopped insulin pump therapy (within the past two years) due to the cost or a lack of insurance and who are medically eligible.
3. New pump starts for those who are medically eligible.

Once you have been medically approved for an insulin pump you will be provided with a program application. You must complete this application with your insulin pump team and submit it to the Insulin Pump Program administrator. The insulin pump start date (with required training) will be determined by the insulin pump team.

Do I need to renew my Insulin Pump Program coverage annually?

Yes. Each year between April 1 and June 30 you will need to renew your coverage. For more information, visit the Renew Your Insulin Pump Program and/or Glucose Sensor Program benefits web page.

To renew your registration in the Insulin Pump Program, each year you will need to:

- File your income taxes for the preceding year with the Canada Revenue Agency
- Submit the required documentation by June 30 to the Insulin Pump Program administrator (complete the online form or the paper form)
- Continue to meet the medical eligibility for the Insulin Pump Program. You will be assessed by your diabetes care team, as part of your ongoing diabetes care, to ensure you are safe on insulin pump therapy.

Are glucose sensors covered?

Not under the Insulin Pump Program. Glucose sensors are funded under the PEI Glucose Sensor Program.

What if I have private health insurance?

If you have private health insurance, contact your insurance provider to determine how much coverage is available under your plan for the insulin pump and the ongoing cost of pump supplies. Ask for *written* notification (not just verbal), verifying the coverage available from your private health insurance. That portion will be deducted before establishing the funding available under the PEI Insulin Pump Program and the out-of-pocket cost for you/your family.

How do we make co-payments?

Co-payments must be made directly to the insulin pump company. You will need to discuss any payment plans on your co-payment of the pump and pump supplies with the pump company. In most circumstances, you will be required to make one co-payment on your insulin pump. Typically, for insulin pump supplies, a co-payment is required every three months, before the supplies are shipped from the company.

Can we claim the co-payment on an income tax return?

Yes, you can claim your co-payment as a medical expense on your tax return. For more information, please contact the Canada Revenue Agency.

What happens if my financial situation or private health insurance changes?

If your income has dropped by 25 percent or more, or your private health insurance coverage has changed, contact the program administrator and explain your situation. We may be able to help.

Contact the Insulin Pump Program administrator

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