Coverage of Insulin Pumps Across Canada

Background

Type 1 diabetes is a chronic disease affecting the lives and livelihoods of up to 400,000 Canadians. It places an enormous burden on individuals as well as their families, the health-care system, and society as a whole. There is no cure for type 1 diabetes, but it can be treated with a regimen of insulin, glucose monitoring, and lifestyle management.

Insulin pumps represent an alternative to multiple daily injections. Their clinical effectiveness is well documented. Diabetes Canada's Clinical Practice Guidelines[1] state that insulin pump therapy can be beneficial and considered for people with type 1 diabetes who:

- Do not reach glycemic targets despite optimized basal-bolus injection therapy;
- Have significant glucose variability;
- Experience frequent severe hypoglycemia and/or hypoglycemia unawareness;
- Have significant "dawn phenomenon" with rise of blood glucose early in the morning;
- Have very low insulin requirements;
- Experience adequate glycemic management but suboptimal treatment satisfaction and quality of life; and
- Are contemplating pregnancy.

Challenges

Public coverage of insulin pump therapy is inconsistent across Canada, and many obstacles—including administrative red tape—impede people's ability to fully access this coverage. Some provinces cover insulin pump devices and supplies for individuals with type 1 diabetes deemed medically eligible without age restrictions. However, some provinces still have age restrictions or require means/income testing that make the program inaccessible to many. The high cost of insulin pumps and pump supplies is a barrier to access for many Canadians living with type 1 diabetes.

Policy Implications

Canadians who live in provinces with limited coverage or who do not meet eligibility criteria for their provincial plan must pay out-of-pocket for insulin pump therapy, which carries a $6,000 to $7,500 price tag. In addition, the ongoing expense of monthly supplies is a constraint to the use of insulin pumps, costing up to $3,500 a year[2]. For many people, these charges are prohibitive. Restricted access means a lost opportunity for people with type 1 diabetes to enhance their glucose management and diabetes-specific quality of life and treatment satisfaction.[1]

Recommendations

Diabetes Canada recommends provincial governments eliminate discrimination based on age, and other financial and administrative barriers to access the insulin pump program, to make pump therapy an option for all clinically eligible people living with diabetes. Coverage for pump supplies must include all products needed to use an insulin pump, including antiseptic, adhesive, and protective barrier products. Where governments choose to use co-pays and/or means testing, the test criteria must be set at a level which ensures that the cost of caring for diabetes is not a barrier or a burden to the individual. People living with diabetes across Canada should also have access to the education and supports they require that allow them to effectively self-manage their disease.

References

1. McGibbon, A., Adams, L., Ingersoll, K., Kader, T., Tugwell, B., (2018). Glycemic Management in Adults With Type 1 Diabetes. Can J Diabetes, 42(2018), 580-587.
2. Type 1 Better (2024). Insulin pumps comparison table.

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Jurisdiction	Pump Coverage	Pump Supplies Coverage
Yukon	All ages who meet criteria. Full coverage for those recommended by an endocrinologist (Any pump commercially available in Canada).	All ages
Northwest Territories	All ages who meet criteria. Full coverage for those recommended by an endocrinologist (Medtronic, Omnipod or Tandem).	All ages
Nunavut	All ages who meet criteria. Full coverage for those recommended by an endocrinologist.	All ages
British Columbia	**All ages** who meet criteria. A two-tiered system with tier one pump fully covered after their deductible has been paid and tier two pump available with Special Authority (SA) approval according to BC PharmaCare	All ages according to the rules of Pharmacare.
Alberta	All ages who meet criteria under the Diabetes Insulin Pump Therapy Program	All ages
Saskatchewan	All ages who meet criteria under the Saskatchewan Aids to Independent Living (SAIL) Insulin Pump Program	All ages according to the rules of the applicable Pharmacare program.
Manitoba	All ages who meet criteria. For adults aged 18 and over, criteria is based on the Manitoba Adult Insulin Pump Coverage Program. For individuals under the age of 17, criteria is based on the Manitoba Pediatric Insulin Pump Program.	All ages according to the rules of Manitoba Pharmacare.
Ontario	All ages who meet criteria under the Assistive Devices Program (any pump commercially available in Canada).	All ages
Québec	Age 17 and under who meet criteria under the Insulin Pump Access Program. Age 18 and over who are already in the program and meet criteria (any pump commercially available in Canada).	Age 17 and under. Age 18 and over who are already in the program and meet criteria.

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Jurisdiction	Pump Coverage	Pump Supplies Coverage
New Brunswick	All ages who meet criteria under The New Brunswick Insulin Pump Program (IPP) (Medtronic, Omnipod or Tandem). The client/family is responsible for a portion of the equipment and supplies based on income. The calculation for the client/family contribution considers information such as household income, family size and the selected device.	All ages
Nova Scotia	All ages who meet criteria under the Nova Scotia Insulin Pump Program (any pump commercially available in Canada).	All ages
Prince Edward Island	All ages who meet criteria under the Prince Edward Island Insulin Pump Program (Medtronic, Omnipod or Tandem).	All ages
Newfoundland & Labrador	Age 17 and under who meet criteria under the Newfoundland and Labrador Insulin Pump Program (NLIPP). Age 18-24 who are already in the program and meet criteria under the Newfoundland and Labrador Insulin Pump Program (NLIPP) can continue to avail of the legacy NLIPP program criteria until they reach 25 years of age. Age 25 and over who are already in the program will undergo income testing as part of the renewal process, to determine eligibility for financial support under the expanded NLIPP. Age 18 and over (new applicants who are not already enrolled in the program) who meet criteria will be income tested (any pump commercially available in Canada).	Age 17 and under who meet criteria. Age 18-24 who are already in the program. Age 18 and over who are not already enrolled in the program and meet criteria will be income tested.
NIHB	All ages who meet criteria under the NIHB Insulin Pump Program	All ages

NOTE: Though a device or device supplies may theoretically be available to a patient through a public plan, any co-pays and/or deductibles charged to the patient can effectively prohibit access. Additionally, access is limited for many patients when devices and device supplies are only partially reimbursed by a public plan**.** Pump supplies can include infusion sets, insertion devices, insulin reservoirs, and/or insulin pods.

Abbreviations: NIHB: Non-Insured Health Benefits

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