

**Senate Bill 287
Proponent Testimony**

Gary Dougherty
Director, State Government Affairs and Advocacy
American Diabetes Association
Senate Health and Human Services Committee – May 4, 2016

Good morning Chairwoman Jones and Members of the Committee.

My name is Gary Dougherty and I am Director of State Government Affairs and Advocacy for the American Diabetes Association.

I am here today to thank Senator Hite for introducing Senate Bill 287 and to convey the Association's support for the bill which calls for an assessment of the incidence of diabetes in Ohio as well as a plan to combat the disease and its complications.

More than 1.3 million Ohioans have diabetes and another three million have prediabetes. Diabetes also exacts a financial toll on the state. People with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes. As a result, it has been estimated that direct medical costs for diagnosed and undiagnosed diabetes, prediabetes, and gestational diabetes were about \$9.1 billion in 2012. Add to that another \$2.9 billion spent on indirect costs from lost productivity due to diabetes.

There is a need to bring attention to the diabetes epidemic and its impact at the state level and to implement coordinated efforts to effectively meet this public health challenge.

That brings us to SB 287. This legislation is intended to create a vehicle for diabetes policy change in Ohio.

In general, this legislation requires state departments and agencies with an interest in safeguarding the health of state residents and taxpayers to plan, assess, review, and prioritize efforts to contain the reach, scope, and costs of the epidemic of diabetes and its complications.

SB 287 seeks to cast a spotlight on the cost and burden of diabetes among key communities in the state – the Medicaid population, state employee health plan members, minority populations, and the general population. Thus, the bill asks the Office of Health Transformation, the Ohio Departments of Health, Medicaid, and Administrative Services, as well as the Commission on Minority Health to collaborate on five key areas:

- analyzing existing data illustrating the cost and impact of diabetes,
- highlighting the benefits of current programs addressing diabetes,
- reviewing the current collaborative efforts to address diabetes,
- making evidence-based recommendations for legislative action to reduce the impact of diabetes and related complications, and
- preparing an estimated budget to implement each recommendation.

Diabetes Action Plan legislation has been enacted in 18 states and has been recommended by the Council of State Governments, the National Conference of State Legislatures, and Women in Government to address state diabetes epidemics.

The overall goal of SB 287 is to provide a more balanced and comprehensive means of addressing the costs of diabetes and to influence public policy to reduce the impact on people with, and at risk for, diabetes.

To sum it up, a diabetes action plan is necessary, because in too many ways diabetes is winning. And when diabetes is winning, the people of Ohio are losing.

On behalf of the American Diabetes Association, I urge your support for Senate Bill 287 so that an assessment of the scope of the diabetes epidemic in Ohio can be performed and a comprehensive action plan detailing how various agencies in Ohio state government can collaborate to reduce the incidence and impact of diabetes in the state can be developed. The resulting plan will provide you as policy makers with a clearer picture of what the state is doing and what the potential next steps might be so that Ohio can be at the forefront of our country's work to stop diabetes.

Thank you very much for your kind attention this morning and for your support of Senate Bill 287.

I would be happy to answer any questions you might have.