As Introduced

131st General Assembly Regular Session 2015-2016

S. B. No. 287

Senator Hite

Cosponsors: Senators Brown, Hackett, Gardner, Yuko

A BILL

То	enact sections 191.10, 191.11, and 191.12 of the	1
	Revised Code to require state agencies to assess	2
	the incidence of diabetes in Ohio, to establish	3
	goals and plans to reduce that incidence, and to	4
	submit biennial reports with findings and	5
	recommendations for fiscal and legislative	6
	policies on diabetes prevention, treatment, and	7
	management.	8

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. That sections 191.10, 191.11, and 191.12 of the	9
Revised Code be enacted to read as follows:	10
Sec. 191.10. (A) Subject to division (B) of this section,	11
the executive director of the office of health transformation	12
shall convene meetings with staff of the department of health,	13
department of medicaid, department of administrative services,	14
and commission on minority health to do all of the following:	15
(1) Assess the incidence of diabetes in this state,	16
including disparities in that incidence among various	17
demographic populations and local jurisdictions;	18

(2) Establish and reevaluate goals for each of the	19
agencies to reduce that incidence;	20
(3) Identify how to measure the progress achieved toward	21
attaining the goals established under division (A)(2) of this	22
<pre>section;</pre>	23
(4) Establish and monitor the implementation of plans for	24
each agency to reduce the incidence of diabetes, improve	25
diabetes care, and control complications associated with	26
diabetes among the populations of concern to each agency;	27
(5) Consider any other matter associated with reducing the	28
incidence of diabetes in this state that the executive director	29
determines to be appropriate;	30
(6) Collect the information needed to prepare the reports	31
required by division (C) of this section.	32
(B) The executive director shall convene the meetings	33
required by division (A) of this section at the executive	34
director's discretion, but not less than twice each calendar	35
year.	36
(C) Not later than the thirty-first day of January of each	37
even-numbered year beginning in 2018, the executive director	38
shall submit a report to the general assembly in accordance with	39
section 101.68 of the Revised Code that addresses or contains	40
all of the following for the two-year period preceding the	41
<pre>report's submission:</pre>	42
(1) The results of the assessment required by division (A)	43
(1) of this section;	44
(2) The progress each agency has made toward achieving the	45
goals established under division (A)(2) of this section and	46

implementing the plans required by division (A)(4) of this	47
<pre>section;</pre>	48
(3) An assessment of the health and financial impacts that	49
all types of diabetes have had on the state and local	50
jurisdictions, and, subject to section 191.11 of the Revised	51
Code, each agency specified in division (A) of this section;	52
(4) A description of the efforts the agencies specified in	53
division (A) of this section have taken to coordinate programs	54
intended to prevent, treat, and manage all forms of diabetes and	55
associated complications;	56
(5) Recommendations for legislative policies to reduce the	57
impact that diabetes, pre-diabetes, and complications from	58
diabetes have on the citizens of this state, including specific	59
action steps that could be taken, the expected outcomes of the	60
action steps, and benchmarks for measuring progress toward	61
achieving the outcomes;	62
(6) A budget proposal that identifies the needs and	63
resources required to implement the recommendations described in	64
division (C)(5) of this section, as well as estimates of the	65
costs to implement the recommendations;	66
(7) Any other information concerning diabetes prevention,	67
treatment, or management in this state that the executive	68
director determines to be appropriate.	69
Sec. 191.11. An agency-specific assessment required by	70
division (C) of section 191.10 of the Revised Code shall include	71
all of the following:	72
(A) A list and description of each diabetes prevention or	73
control program the agency administers, the number of	74
individuals with diabetes and their dependents who are impacted	75

by each program, the expenses associated with administering each	76
program, and the funds appropriated for each program, along with	77
each funding source.	78
(B) A comparison of the expenses described in division (A)	79
of this section with the expenses the agency incurs in	80
administering programs to reduce the incidence of other chronic	81
diseases and conditions;	82
(C) An evaluation of the benefits that have resulted from	83
each program listed pursuant to division (A) of this section.	84
Sec. 191.12. Nothing in section 191.10 or 191.11 of the	85
Revised Code requires the office of health transformation or the	86
agencies specified in division (A) of section 191.10 of the	87
Revised Code to establish programs for diabetes prevention,	88
treatment, and management that had not been initiated or funded	89
prior to the effective date of this section.	90