

HCS HB 2125 -- DIABETES PREVENTION

SPONSOR: Franklin

COMMITTEE ACTION: Voted "Do Pass" by the Special Standing Committee on Emerging Issues in Health Care by a vote of 12 to 0.

This bill requires the MO HealthNet Division within the Department of Social Services and the Department of Health and Senior Services to collaborate to coordinate goals and benchmarks in each individual agency's plans to reduce the incidence of diabetes in Missouri, improve diabetes care, and control complications associated with diabetes. The MO HealthNet Division and the Department of Health and Senior Services must submit a report to the General Assembly by January 1 of each odd-numbered year on the following:

- (1) The prevalence and financial impact of diabetes of all types on the state of Missouri. The assessment must include an estimate of the number of people with diagnosed and undiagnosed diabetes, the number of individuals with diabetes impacted or covered by the agency programs addressing diabetes, the financial impact of diabetes, and its complications on Missouri based on the most recently published American Diabetes Association cost estimates for diabetes;
- (2) An assessment of the benefits of implemented programs and activities aimed at controlling diabetes and preventing the disease;
- (3) A description of the level of coordination existing between the agencies, their contracted partners, and other stakeholders on activities, programs, and messaging on managing, treating, or preventing all forms of diabetes and its complications;
- (4) The development or revision of detailed action plans for battling diabetes with a range of actionable items for consideration by the General Assembly. The plans must identify proposed action steps to reduce the impact of diabetes, pre-diabetes, and related diabetes complications. The plan also must identify expected outcomes of the action steps proposed in the following biennium while also establishing benchmarks for controlling and preventing diabetes; and
- (5) The development of a detailed budget blueprint identifying needs, costs, and resources required to implement the plan specified in the bill. The blueprint must include a budget range for all options presented in the plan for consideration by the General Assembly.

The requirements of these provisions must be limited to diabetes information, data, initiatives, and programs within each agency prior to the effective date of these provisions, unless there is unobligated funding for diabetes in each agency that may be used for new research, data collection, reporting, or other requirements.

PROPONENTS: Supporters say that Diabetes is a common, prevalent, and costly disease for the state of Missouri. The disease is controllable and serious complications such as blindness and kidney failure do not have to occur or can be substantially reduced if diagnosed early and managed well by both the patient and the treating physician. The challenge is developing ways to bridge the gap between what is scientifically known and what patients know, as well as how the disease is treated and what patients do to manage their own health. The bill is needed to develop an action plan, and budget blueprint for the state of Missouri so that we can better address the diabetes epidemic.

Testifying for the bill were Representative Franklin; Stewart Perry; Lt. Governor Peter Kinder; Missouri State Medical Association; United Healthcare Services, Inc.; Missouri Academy of Family Physicians; Missouri Association of Rural Health Clinics; and Missouri Psychological Association.

OPPONENTS: There was no opposition voiced to the committee.