

Senate Bill 169

Printed pursuant to Senate Interim Rule 213.28 by order of the President of the Senate in conformance with pre-session filing rules, indicating neither advocacy nor opposition on the part of the President (at the request of Senate Interim Committee on Health Care, Human Services and Rural Health Policy for Oregon Diabetes Coalition)

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure **as introduced**.

Requires Oregon Health Authority, Oregon Health Insurance Exchange Corporation, Oregon Educators Benefit Board and Public Employees' Benefit Board to identify activities that address diabetes, diabetes care and complications from diabetes. Requires report to Legislative Assembly on data, programs, outcomes and proposed next steps.

A BILL FOR AN ACT

1
2 Relating to diabetes.

3 **Be It Enacted by the People of the State of Oregon:**

4 **SECTION 1. (1) As used in this section, "diabetes" includes all types of diabetes.**

5 **(2) The Oregon Health Authority, the Oregon Health Insurance Exchange Corporation,**
6 **the Oregon Educators Benefit Board and the Public Employees' Benefit Board shall collab-**
7 **orate to identify information being provided to clients, data being collected and initiatives**
8 **and programs operating within each entity on the effective date of this 2013 Act, that are**
9 **aimed at reducing the incidence of diabetes in Oregon, improving diabetes care and control-**
10 **ling medical complications associated with diabetes.**

11 **(3) The authority, the corporation and the boards shall report on the following to the**
12 **Legislative Assembly by January 1, 2015:**

13 **(a) The extent of the financial impact of diabetes on each entity, the state and localities,**
14 **including, but not limited to:**

15 **(A) The number of individuals with diabetes impacted or covered by each entity.**

16 **(B) The number of individuals identified in subparagraph (A) of this paragraph who are**
17 **affected by diabetes prevention and control programs identified by each entity under sub-**
18 **section (2) of this section.**

19 **(C) The cost of diabetes and complications from diabetes for programs operated by each**
20 **entity and how that cost compares to the financial impact of other chronic diseases or con-**
21 **ditions.**

22 **(b) An assessment of the benefits of programs implemented by each entity that are aimed**
23 **at preventing and controlling diabetes and the amount and source of funding for each pro-**
24 **gram.**

25 **(c) A description of the coordination between the entities with respect to activities, pro-**
26 **grams and communications related to preventing, managing or treating diabetes and com-**
27 **plications from diabetes.**

28 **(d) Detailed action plans for combating diabetes, including, for each plan:**

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

- 1 **(A) A range of options for the Legislative Assembly to consider;**
 - 2 **(B) Benchmarks for controlling and preventing each type of diabetes;**
 - 3 **(C) Proposed action steps to reduce the impact of prediabetes, diabetes and diabetes**
 - 4 **complications; and**
 - 5 **(D) The outcomes of the proposed action steps to be expected in the 2015-2016 biennium.**
 - 6 **(e) A detailed budget blueprint identifying the needs, costs and resources required to**
 - 7 **implement the detailed action plans described in paragraph (d) of this subsection, including**
 - 8 **a budget range for all options presented by each entity for the Legislative Assembly to con-**
 - 9 **sider.**
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