

AMENDED IN ASSEMBLY MAY 6, 2014
AMENDED IN ASSEMBLY APRIL 23, 2014
AMENDED IN ASSEMBLY APRIL 2, 2014
AMENDED IN ASSEMBLY MARCH 20, 2014
CALIFORNIA LEGISLATURE—2013–14 REGULAR SESSION

ASSEMBLY BILL

No. 1592

**Introduced by Assembly Member Beth Gaines
(Coauthors: Assembly Members Fox, Garcia, and Gonzalez)**

February 3, 2014

An act to add Article 1 (commencing with Section 104250) to Chapter 4 of Part 1 of Division 103 of the Health and Safety Code, relating to diabetes.

LEGISLATIVE COUNSEL'S DIGEST

AB 1592, as amended, Beth Gaines. California Diabetes Program.

Existing law establishes the State Department of Public Health and sets forth its powers and duties, including, but not limited to, the administration of the California Diabetes Program.

This bill would require the ~~department~~ *State Department of Public Health* to submit a report to the Legislature by December 31 of each odd-numbered year that is to include, among other things, an assessment of the benefits of implemented programs and activities aimed at preventing and controlling diabetes, and detailed action plans for combating diabetes with a range of actionable items for consideration by the Legislature that will aid in attaining the goals set forth by the ~~State Department of Public Health~~ *department* in the California Wellness Plan for 2014 and the ~~Diabetes Burden Report, and Report.~~ *The bill*

would require the department to make the biannual reports available on its Internet Web site. The bill would authorize the department to use statistical data from external sources and requires sources, and would require the State Department of Health Care Services to provide the department with any relevant statistical data for purposes of creating the biannual reports. ~~The bill would require the department to ensure that all grant funds from the federal Centers for Disease Control and Prevention and other federal sources for the California Diabetes Program are expended for the purpose of diabetes prevention, treatment, and awareness pursuant to the grant requirements, and the creation of the biannual reports.~~

The bill would also make related findings and declarations.

Vote: majority. Appropriation: no. Fiscal committee: yes.

State-mandated local program: no.

The people of the State of California do enact as follows:

1 SECTION 1. Article 1 (commencing with Section 104250) is
 2 added to Chapter 4 of Part 1 of Division 103 of the Health and
 3 Safety Code, to read:

4
 5 Article 1. California Diabetes Program
 6

7 104250. The Legislature finds and declares all of the following:

8 (a) It is reported by the California Diabetes Program that one
 9 in seven adult Californians has diabetes, and the numbers are rising
 10 rapidly. The actual number of those whose lives are affected by
 11 diabetes is unknown and stands to be much higher when factoring
 12 in the incidence of type 1 diabetes and undiagnosed gestational
 13 diabetes.

14 (b) California has the greatest number of annual new cases of
 15 diabetes in the United States.

16 (c) The incidence of diabetes amongst all Californians has
 17 increased 32 percent over the past decade.

18 (d) Over 11.4 million people in California have prediabetes, a
 19 condition that is a precursor to full onset type 2 diabetes. This
 20 suggests that the total population of those diagnosed will continue
 21 to rise in the absence of interventions.

22 (e) The prevalence of diagnosed gestational diabetes in
 23 California has increased 60 percent in just seven years, from 3.3

1 percent of hospital deliveries in 1998 to 5.3 percent of hospital
2 deliveries in 2005, with the federal Centers for Disease Control
3 and Prevention stating that the diagnosis rate could run as high as
4 18.3 percent.

5 (f) The fiscal impact to the State of California, including total
6 health care and related costs for the treatment of diabetes, was over
7 \$35.9 billion in 2010.

8 (g) A recent study of a large state with a sizable diabetes
9 population found that the rate of diagnosed diabetes in the state's
10 Medicaid population is nearly double that of its general population.

11 (h) There is no cure for any type of diabetes.

12 (i) Diabetes when left untreated can lead to serious and costly
13 complications and a reduced lifespan.

14 (j) Many of these serious complications can be delayed or
15 avoided with timely diagnosis, effective patient self-care, and
16 improved social awareness.

17 (k) The State Department of Public Health has created the
18 California Wellness Plan for 2014 that provides a set of desired
19 outcomes regarding diabetes in the state.

20 (l) The State Department of Public Health will complete a
21 Diabetes Burden Report by December 31, 2014, and will include
22 in the report, information on the prevalence of diabetes in
23 California compared to the rest of the United States, risk factors
24 for developing diabetes and diabetes complications, and the
25 prevalence of obesity, inactivity, and cardiovascular disease risk
26 factors among individuals with diabetes as compared to individuals
27 without diabetes in California. The report will address the
28 prevalence of prediabetes, complications of diabetes, and diabetes
29 mortality in California as compared to the rest of the United States.
30 The report will also outline the department's programs and
31 activities that address the burden of diabetes in California.

32 (m) It is the intent of the Legislature to require the State
33 Department of Public Health, as part of the California Diabetes
34 Program, to create a diabetes action plan that provides policy
35 guidance to prevent, treat, and increase awareness of diabetes and
36 to aid the state in complying with the goals set forth by the State
37 Department of Public Health in the California Wellness Plan for
38 2014 and the Diabetes Burden Report.

39 104251. (a) The State Department of Public Health, as part of
40 the California Diabetes Program, shall submit a report to the

1 Legislature by December 31 of each odd-numbered year that shall
2 include all of the following:

3 (1) An assessment of the benefits of implemented programs and
4 activities aimed at preventing and controlling diabetes. The
5 assessment shall document both of the following:

6 (A) The amount and source for any funding directed to the State
7 Department of Public Health and the State Department of Health
8 Care Services from the Legislature for programs and activities
9 aimed at reaching those with diabetes.

10 (B) The amount and source for any funding directed to the State
11 Department of Public Health and the State Department of Health
12 Care Services that may be used for the purposes of the action plans
13 required pursuant to paragraph (3).

14 (2) A description of the level of coordination between the State
15 Department of Public Health and the State Department of Health
16 Care Services in preventing, treating, managing, and increasing
17 awareness of all forms of diabetes and its complications within
18 the Medi-Cal population.

19 (3) Detailed action plans for combating diabetes with a range
20 of actionable items for consideration by the Legislature that will
21 aid in attaining the goals set forth by the State Department of Public
22 Health in the California Wellness Plan for 2014 and the Diabetes
23 Burden Report.

24 (4) A detailed budget blueprint identifying needs, costs, and
25 resources required to implement the action plans required pursuant
26 to paragraph (3) for consideration by the Legislature. The budget
27 blueprint to the Legislature shall include a cost-benefit analysis to
28 assist in prioritizing plans by level of efficiency.

29 (b) The State Department of Public Health shall make the
30 biannual reports available on its Internet Web site.

31 (c) A report submitted pursuant to subdivision (a) shall be
32 submitted in compliance with Section 9795 of the Government
33 Code.

34 104252. (a) In order to reduce potential costs incurred by the
35 State Department of Public Health in the process of creating the
36 biannual reports as required pursuant to Section 104251, the State
37 Department of Public Health may use statistical data from external
38 sources.

39 (b) (1) The State Department of Health Care Services shall
40 provide to the State Department of Public Health any relevant

1 statistical data for the purposes of the creation of the biannual
2 report.

3 (2) To ensure patient privacy, all data transferred to the State
4 Department of Public Health from the State Department of Health
5 Care Services shall conform to requirements described in the
6 federal Health Insurance Portability and Accountability Act of
7 1996 (Public Law 104-191).

8 ~~104253. The State Department of Public Health shall ensure~~
9 ~~that all grant funds from the federal Centers for Disease Control~~
10 ~~and Prevention and other federal sources for the California Diabetes~~
11 ~~Program are expended for the purpose of diabetes prevention,~~
12 ~~treatment, awareness pursuant to the grant requirements, and the~~
13 ~~creation of the biannual reports as required pursuant to Section~~
14 ~~104251.~~