

AMENDED IN SENATE JUNE 23, 2014
AMENDED IN ASSEMBLY MAY 28, 2014
AMENDED IN ASSEMBLY MAY 23, 2014
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 Bonta, Chávez, Fong, 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, *and declaring the urgency thereof, to take effect immediately.*

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 State Department of Public Health to submit a report to the Legislature by December 31, 2015, 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 department in the California Wellness Plan for 2014 and the Diabetes Burden Report. The bill would also authorize the department to update the report as necessary and at the department’s discretion. The bill would require the department to make the report and any updates available on its Internet Web site. The bill would authorize the department to use statistical data from external 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 report. *The bill would require the State Department of Public Health to also include guidelines to reduce the fiscal burden of diabetes to the state in the Diabetes Burden Report, which is to be completed by December 31, 2014.*

The bill would also make related findings and declarations.

This bill would declare that it is to take effect immediately as an urgency statute.

Vote: ~~majority~~^{2/3}. 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.

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

5 (e) The prevalence of diagnosed gestational diabetes in
6 California has increased 60 percent in just seven years, from 3.3
7 percent of hospital deliveries in 1998 to 5.3 percent of hospital
8 deliveries in 2005, with the federal Centers for Disease Control
9 and Prevention stating that the diagnosis rate could run as high as
10 18.3 percent.

11 (f) The fiscal impact to the State of California, including total
12 health care and related costs for the treatment of diabetes, was over
13 \$35.9 billion in 2010.

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

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

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

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

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

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

38 (m) It is the intent of the Legislature to require the State
39 Department of Public Health, as part of the California Diabetes
40 Program, to create a diabetes action plan that provides policy

1 guidance to prevent, treat, and increase awareness of diabetes and
2 to aid the state in complying with the goals set forth by the State
3 Department of Public Health in the California Wellness Plan for
4 2014 and the Diabetes Burden Report.

5 104251. (a) The State Department of Public Health, as part of
6 the California Diabetes Program, shall submit a report to the
7 Legislature by December 31, 2015, that shall include all of the
8 following:

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

12 (A) The amount and source for any funding directed to the State
13 Department of Public Health and the State Department of Health
14 Care Services from the Legislature for programs and activities
15 aimed at reaching those with diabetes.

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

20 (2) A description of the level of coordination between the State
21 Department of Public Health and the State Department of Health
22 Care Services in preventing, treating, managing, and increasing
23 awareness of all forms of diabetes and its complications within
24 the Medi-Cal population.

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

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

35 (b) The State Department of Public Health may, as necessary
36 and at its discretion, issue updates to the report specified in
37 subdivision (a) in future years. The State Department of Public
38 Health shall make the report and any updates issued pursuant to
39 this section available on its Internet Web site. The report and any

1 updates submitted pursuant to subdivision (a) shall be submitted
2 in compliance with Section 9795 of the Government Code.

3 104252. (a) In order to reduce potential costs incurred by the
4 State Department of Public Health in the process of creating the
5 report as required pursuant to Section 104251, the State Department
6 of Public Health may use statistical data from external sources.

7 (b) (1) The State Department of Health Care Services shall
8 provide to the State Department of Public Health any relevant
9 statistical data for the purposes of creating the report.

10 (2) To ensure patient privacy, all data transferred to the State
11 Department of Public Health from the State Department of Health
12 Care Services shall conform to requirements described in the
13 federal Health Insurance Portability and Accountability Act of
14 1996 (Public Law 104-191).

15 104253. *The State Department of Public Health shall also*
16 *include in the Diabetes Burden Report, which is to be completed*
17 *by December 31, 2014, guidelines that will reduce the fiscal burden*
18 *of diabetes to the state.*

19 *SEC. 2. This act is an urgency statute necessary for the*
20 *immediate preservation of the public peace, health, or safety within*
21 *the meaning of Article IV of the Constitution and shall go into*
22 *immediate effect. The facts constituting the necessity are:*

23 *In order for the state to combat diabetes and reduce the fiscal*
24 *burden to the state in combating diabetes at the earliest possible*
25 *time, it is necessary that this act take effect immediately.*