

AMENDED IN SENATE JULY 2, 2015
AMENDED IN ASSEMBLY APRIL 16, 2015
AMENDED IN ASSEMBLY APRIL 8, 2015
CALIFORNIA LEGISLATURE—2015–16 REGULAR SESSION

ASSEMBLY BILL

No. 572

**Introduced by Assembly Member Beth Gaines
(Coauthors: Assembly Members Chávez, Cristina Garcia, Gonzalez,
and Ridley-Thomas)**

February 24, 2015

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 572, as amended, Beth Gaines. ~~California Diabetes Program. prevention: treatment.~~

Existing law establishes the State Department of Public Health and sets forth its powers and duties pertaining to, among other things, protecting, preserving, and advancing public health, including disseminating information regarding diseases.

This bill would require the State Department of Public Health to ~~develop a detailed action plan for the prevention and treatment of diabetes; update the California Wellness Plan 2014 to include specified items, including priorities and performance measures that are based upon evidence-based strategies to prevent and control diabetes, and to submit a report to the Legislature by January 1, 2018, that includes an update on the status of the plan and the progress of those specified plan objectives and outcomes.~~ *items.*

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. Diabetes.

6

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

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

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

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

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

21 (e) The prevalence of diagnosed gestational diabetes in
22 California has increased 60 percent in just seven years, from 3.3
23 percent of hospital deliveries in 1998 to 5.3 percent of hospital
24 deliveries in 2005, with the federal Centers for Disease Control
25 and Prevention stating that the diagnosis rate could run as high as
26 18.3 percent.

27 (f) The fiscal impact to the State of California, including total
28 health care and related costs for the treatment of diabetes, was over
29 \$35.9 billion in 2010.

30 (g) *There is a disproportionate prevalence of type 2 diabetes*
31 *among Californians who are Black, Hispanic, or of Asian origin*
32 *compared to the general population. As of 2010, the incidence of*
33 *diabetes among Black and Hispanic people was nearly double that*
34 *among non-Hispanic Whites at approximately 14 percent. Asians*

1 *and Pacific Islanders, in the aggregate, experience higher rates*
2 *of diabetes than other populations. Certain groups within the Asian*
3 *and Pacific Islander population experience the highest prevalence*
4 *and risk overall, including Filipino, South Asians, and Pacific*
5 *Islanders, who suffer from diabetes at rates of 15 percent, 16*
6 *percent, and more than 18 percent respectively.*

7 ~~(g)~~

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

11 ~~(h)~~

12 (i) There is no cure for any type of ~~diabetes~~. *diabetes; however,*
13 *there is evidence that diabetes can be prevented or delayed in*
14 *onset through lifestyle changes and medical intervention.*

15 ~~(i)~~

16 (j) Diabetes when left untreated can lead to serious and costly
17 complications and a reduced lifespan.

18 ~~(j)~~

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

22 ~~(k)~~

23 (l) It is the intent of the Legislature to require the State
24 Department of Public Health to provide to the Legislature
25 information, including the annual federal Centers for Disease
26 Control and Prevention progress report, on diabetes prevention
27 and control activities conducted by the State Department of Public
28 Health and expenditures associated with diabetes prevention and
29 control activities. These activities are set forth by the State
30 Department of Public Health in the California Wellness Plan 2014
31 and the report dated September 2014 entitled "Burden of Diabetes
32 in California."

33 104251. (a) The State Department of Public Health shall
34 ~~develop a detailed action plan for the prevention and treatment of~~
35 ~~diabetes in the state. The plan shall include, at a minimum, update~~
36 ~~the California Wellness Plan 2014 to include~~ all of the following
37 items:

38 (1) Priorities and performance measures that are based upon
39 evidence-based strategies to prevent or control diabetes. The plan
40 shall also identify expected outcomes of the ~~action steps~~ proposed

1 *priorities and performance measures* and establish benchmarks
2 for controlling and preventing relevant forms of diabetes.

3 (2) An analysis of the financial impact on the state of ~~all types~~
4 ~~of~~ diabetes. This assessment shall include the number of persons
5 living with diabetes, the number of family members affected by
6 diabetes, the financial impact diabetes and its complications have
7 on the state, and the financial impact of diabetes in comparison to
8 other chronic diseases and conditions.

9 (3) A summary of expenditures by the department on programs
10 and activities aimed at preventing or controlling diabetes.

11 (4) A summary of the amount and source of any funding directed
12 to the department for programs and activities aimed at controlling
13 or preventing diabetes.

14 (5) A description of the existing level of coordination between
15 state departments and entities with regard to activities,
16 programmatic activities, and the provision of information to the
17 public regarding ~~managing, treating,~~ *managing* and preventing ~~all~~
18 ~~forms of~~ diabetes and its complications.

19 (6) A detailed budget blueprint identifying needs, costs, and
20 resources required to implement the ~~plan~~. *items listed in*
21 *paragraphs (1) to (5), inclusive*. This blueprint shall include a
22 budget range for each ~~action step~~ *priority and performance*
23 *measure* identified.

24 (7) Policy recommendations for the prevention and ~~treatment~~
25 *management* of diabetes.

26 ~~(b) The plan may revise the priorities and performance measures~~
27 ~~previously set forth as part of the California Wellness Plan, the~~
28 ~~Burden of Diabetes in California report, or other diabetes~~
29 ~~prevention programs within the State Department of Public Health.~~

30 ~~(e)~~

31 *(b)* The State Department of Public Health shall submit a report
32 to the Legislature on or before January 1, 2018, and biennially
33 thereafter, that includes ~~an update on the status of the plan and the~~
34 ~~progress of plan objectives and outcomes.~~ *the plan items listed in*
35 *paragraphs (1) to (7), inclusive, of subdivision (a)*. The report shall
36 additionally include recommendations for improving ~~the those~~
37 *plan items* based upon activities and findings to date. The State
38 Department of Public Health shall make the report and any updates
39 issued pursuant to this section available on its Internet Web site.

40 ~~(d)~~

- 1 (c) (1) The requirement for submitting a report imposed under
- 2 subdivision ~~(e)~~ (b) is inoperative on January 1, 2024.
- 3 (2) The report submitted to the Legislature pursuant to this
- 4 section shall be submitted in compliance with Section 9795 of the
- 5 Government Code.

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