

SESSION OF 2017

SUPPLEMENTAL NOTE ON HOUSE BILL NO. 2219

As Recommended by House Committee on
Health and Human Services

Brief*

HB 2219 would require the Secretary of Health and Environment (Secretary) to identify goals and benchmarks and develop plans to reduce the incidence of diabetes in Kansas, improve diabetes care, and control complications associated with diabetes.

The bill would require the Secretary to submit a report to the Legislative Coordinating Council, by January 10 of each even-numbered year, on the following information:

- The financial impact and reach diabetes is having on the Kansas Department of Health and Environment (KDHE), the state, and localities. This information would include the number of individuals with diabetes impacted or covered by programs administered by the Secretary, the number of individuals with diabetes and family members impacted by the prevention and diabetes control programs implemented by KDHE, and the financial toll or impact diabetes and its complications place on KDHE and how that compares to other chronic diseases and conditions;
- An assessment of the benefits of implemented programs and activities aimed at controlling and preventing diabetes, including documenting the amount and source of any funding directed to KDHE from the Kansas Legislature;

*Supplemental notes are prepared by the Legislative Research Department and do not express legislative intent. The supplemental note and fiscal note for this bill may be accessed on the Internet at <http://www.kslegislature.org>

- A description of coordination of diabetes management, treatment, or prevention activities and programs within KDHE;
- The development or revision of action plans to address reducing the impact of diabetes, pre-diabetes, and diabetes complications and the identification of expected benchmarks for diabetes control and prevention; and
- The development of a budget identifying the needs, costs, and resources required to implement the action plans.

Unless there are unobligated funds available within KDHE to use for the requirements of the bill, the requirements would be limited to diabetes data existing within KDHE prior to the effective date of the bill.

Background

The bill was introduced by the House Committee on Health and Human Services at the request of Representative Concannon. In the House Committee hearing, Representative Finch, a representative of the National Diabetes Volunteer Leadership Council, and a child with type 1 diabetes testified in favor of the bill. The proponents generally stated the bill would increase diabetes awareness, consolidate data, and require KDHE to develop a strategic plan to address the pandemic of diabetes. The proponents also stated an identical bill was introduced during the 2015 Legislative Session and with regard to that bill, KDHE estimated enactment of the bill would have no fiscal effect because the reporting requirements of the bill could be performed using current resources.

No neutral or opponent testimony was provided.

According to the fiscal note prepared by the Division of the Budget, enactment of the bill would increase State General Fund (SGF) expenditures for KDHE by \$111,520 in FY 2018 and by \$111,750 in FY 2019 and would require one new FTE position. The expenditures for FY 2018 would include: \$65,020 for one FTE section director position; \$2,000 for computer equipment; \$2,000 for telephone, travel, and office supplies; \$12,500 for Behavioral Risk Factors Surveillance System (BRFSS) data collection; and \$30,000 for the rate set by contractors for data collection and analysis. The estimate for FY 2019 assumed a 2.0 percent inflation factor for a total of \$111,750.

The fiscal note states that although there are federal grant funds available for the diabetes collection process, including software licensing fees, the requirements for the use of these funds are very prescriptive and do not allow for the collection of data outside the scope of any current grants, and the data request outlined in the bill is not included in the scope of the grant. The fiscal note also states the provision in the bill requiring the collection of additional data would be collected through KDHE's existing BRFSS, and the funding for these expenditures would come from the SGF. The use of federal funds would be contingent upon availability. Any fiscal effect associated with enactment of the bill is not reflected in *The FY 2018 Governor's Budget Report*.