

SUBJECT: Creating an adult diabetes education program for county hospital systems

COMMITTEE: Public Health — favorable, without amendment

VOTE: 10 ayes — Kolkhorst, Naishtat, Alvarado, Coleman, S. Davis, Gonzales, S. King, Schwertner, Truitt, Zerwas

0 nays

1 absent — Laubenberg

WITNESSES: For — (*Registered, but did not testify*: Troy Alexander, Texas Medical Association; Steven Bristow, Parkland Health & Hospital System; Miryam Bujanda, Methodist Healthcare Ministries; Michael Gutierrez; Marcus Mitias, Texas Health Resources; Denise Rose, Texas Hospital Association; JP Urrabazo and Rebecca Waldrop, Sanofi-aventis; Stacy Wilson, Central Health & Community Care; Chris Yanas, Teaching Hospitals of Texas)

Against — None

On — (*Registered, but did not testify*: Roger Fasko, Texas Department of State Health Services; Lauri Kalanges, Texas Department of State Health Services)

DIGEST: HB 123 would amend Health and Safety Code, sec. 1001 to authorize the Department of State Health Services (DSHS) to help hospital districts and county hospital systems provide an adult diabetes education program in counties with a population of more than 100,000. The program would have to be based on a curriculum developed by the Texas Diabetes Council (TDC).

The curriculum would have to emphasize life choices that enable a person with diabetes to control the disease and improve the individual's standard of living. Participating hospital districts or county hospitals would make the program available in the county, including each rural health clinic within the health system, and educational materials would be produced in English and Spanish.

The TDC would have to develop the curriculum by June 1, 2012.

The bill would take effect September 1, 2011.

**SUPPORTERS  
SAY:**

HB 123 would provide critical education to Texans with diabetes, which would go a long way toward saving lives and costs to the state. More than 1.7 million adults in Texas have been diagnosed with diabetes. This increases to more than 2 million adults when accounting for the estimated number of undiagnosed cases. Diabetes is the sixth-largest killer in the state across all populations and the fourth leading cause of death for Latinos and African Americans in Texas. The health impact can be dramatic for individuals living with the disease, jeopardizing an individual's vision, limbs, kidneys, and other vital organs. The disease is steadily growing, and it is believed that diabetes costs the state about \$12.5 billion annually in lost productivity and health care costs.

The bill would empower individuals living with diabetes to make healthy life choices and manage their disease independently. Public health officials understand that the soaring rates of obesity have had a dramatic impact on the growing prevalence of diabetes within Texas. HB 123 would authorize DSHS to create an educational curriculum that would provide patients with medically proven strategies to handle their disease and improve their standard of living. This could have a powerful impact on state health care programs and health outcomes.

A number of hospitals already have implemented diabetes education programs to improve patient care and achieve cost savings, and they have experienced promising results. HB 123 would build upon the experience gained from these efforts to create a model for best practices and aid in this important prevention effort.

**OPPONENTS  
SAY:**

HB 123 could impose an unfunded mandate on hospital districts in counties that have not developed comprehensive education programs for diabetes. The current budget shortfall could leave many hospital systems with less funding overall, and it is unclear to what extent DSHS could help with funding and administrative support if the program were established.