

1 HB504  
2 158754-1  
3 By Representative Patterson  
4 RFD: Health  
5 First Read: 18-FEB-14

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8 SYNOPSIS: This bill would require the Department of  
9 Public Health, the Medicaid Agency, the State  
10 Employees' Insurance Board, and the Public  
11 Education Employees' Health Insurance Board to  
12 develop a plan for reducing the instance of chronic  
13 disease and improving chronic care coordination  
14 within the state. This bill would specify the  
15 content of the plan. This bill would also require  
16 an annual report to certain committees and agencies  
17 of the Legislature.

18  
19 A BILL  
20 TO BE ENTITLED  
21 AN ACT  
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23 To require the Department of Public Health, the  
24 Medicaid Agency, the State Employees' Insurance Board, and the  
25 Public Education Employees' Health Insurance Board to develop  
26 a plan for reducing the instance of chronic disease and  
27 improving chronic care coordination within the state; to

1 provide for the content of the plan; and to require these  
2 bodies to report annually to certain committees and agencies  
3 of the Legislature.

4 BE IT ENACTED BY THE LEGISLATURE OF ALABAMA:

5 Section 1. (a) The Department of Public Health, the  
6 Medicaid Agency, the State Employees' Insurance Board, and the  
7 Public Education Employees' Health Insurance Board shall  
8 collaborate to develop a plan that reduces the incidence of  
9 chronic disease and improves chronic care coordination within  
10 the state. The plan shall do all of the following:

11 (1) Identify goals and benchmarks for reducing  
12 chronic disease.

13 (2) Specify wellness and prevention plans  
14 specifically tailored to the group of people they represent.

15 (3) Provide for submission of an annual report on or  
16 before January 1 of each year to the Governor, the State  
17 Health Officer, the House and Senate Health Committees, the  
18 House Ways and Means Committee-General Fund, the Senate Ways  
19 and Means Committee-General Fund, the House Ways and Means  
20 Committee-Education, the Senate Ways and Means  
21 Committee-Education, and the Legislative Fiscal Office.

22 (b) The report required in subdivision (3) of  
23 subsection (a) shall contain all of the following information:

24 (1) A description of the goals and benchmarks for  
25 the reduction of chronic disease.

26 (2) A description of the wellness and prevention  
27 plans specifically tailored to Medicaid recipients, state and

1 local government employees insured through the State  
2 Employees' Insurance Board, and public education employees  
3 insured through the Public Education Employees' Health  
4 Insurance Board.

5 (3) A description of the financial impact and  
6 magnitude of the chronic health conditions in this state most  
7 likely to cause death or disability.

8 (4) An assessment of the benefits derived from  
9 wellness and prevention programs and activities implemented  
10 within the state with the goal of coordinating chronic care.  
11 The assessment shall include a breakdown of the amount of all  
12 state, federal, and other funds appropriated to the Department  
13 of Public Health and the Medicaid Agency for wellness and  
14 prevention programs and activities for the detection,  
15 prevention, and treatment of persons with multiple chronic  
16 health conditions.

17 (5) A description of how the Department of Public  
18 Health, the State Employees' Insurance Board, the Public  
19 Education Employees' Health Insurance Board, and the Medicaid  
20 Agency are coordinating their activities, programs, and public  
21 education with respect to the prevention, treatment, and  
22 management of chronic health conditions.

23 (6) A detailed action plan for care coordination of  
24 multiple chronic health conditions in the same patient,  
25 including a range of recommended legislative actions. The  
26 action plans shall identify proposed action steps to reduce

1 the financial impact of the chronic health conditions  
2 identified in this section including all of the following:

3 a. Adjustment of hospital readmission rates.

4 b. Development of transitional care plans.

5 c. Implementation of comprehensive medication  
6 management to help patients achieve improved clinical and  
7 therapeutic outcomes.

8 d. Adoption of standards related to quality care  
9 that are publicly reported evidence-based measures endorsed  
10 through a multi-stakeholder process such as the National  
11 Quality Forum. The action plans shall also identify expected  
12 outcomes of these proposed action steps during the next fiscal  
13 year and establish benchmarks for coordinating care and  
14 reducing the incidence of multiple chronic health conditions.

15 (7) A detailed budget identifying all costs  
16 associated with implementing the action plans identified in  
17 subdivision (5).

18 Section 2. This act shall become effective on the  
19 first day of the third month following its passage and  
20 approval by the Governor, or its otherwise becoming law.