

CHAPTER 72

(HB 383)

AN ACT relating to the diabetes research board.

Be it enacted by the General Assembly of the Commonwealth of Kentucky:

Section 1. KRS 211.738 is amended to read as follows:

- (1) A proposed research project shall be submitted to the board on an application developed by the Cabinet for Health and Family Services in consultation with the board. The submission deadline for the application shall be **determined by the board**~~[September 30 of each year]~~.
- (2) The board shall review the project proposal for scientific merit and adherence to the research priority established in this section. After reviewing the project proposal's scientific merit and adherence to the research priority, the board shall determine whether a project proposal shall or shall not be funded. An applicant shall be notified of the board's decision **by a date determined by the board**~~[on the application no later than December 31 of each year]~~.
- (3) A project proposal shall be reviewed for scientific merit as follows:
 - (a) Adequacy of prior research and theory in providing a basis for the research;
 - (b) Adequacy of methods;
 - (c) Adequacy of environment, facilities, equipment, available equipment, and research atmosphere;
 - (d) Qualifications and productivity of the PI and key staff;
 - (e) Time commitments of the PI and key staff;
 - (f) Availability of subjects or patients where relevant;
 - (g) Adequacy of procedures for assessing the effect of interventions on recovery; and
 - (h) Other factors that affect the potential of the applicants to successfully address the research objectives.
- (4) A project shall be reviewed by the board for adherence to research priorities relating to **experimental, clinical, or population-based**~~[in vivo and in vitro]~~ studies~~[on naturally occurring phenomena]~~ that may:
 - (a) **Prevent or delay the development of diabetic disease;**
 - ~~(b)(a)~~ Predict the development of diabetic vascular, neuronal, or musculo-skeletal complications;
 - ~~(c)(b)~~ Define the response of diabetic vascular, neuronal, or musculo-skeletal complications to existing therapies;~~[or]~~
 - ~~(d)(c)~~ Reverse diabetic vascular, neuronal, or musculo-skeletal complications; **or**
 - (e) **Cure diabetic disease.**

Approved March 23, 2007.