

**CHAPTER 26****( SJR 7 )**

A JOINT RESOLUTION directing the Department for Medicaid Services to study the potential impacts of implementing programs similar to the Kentucky Employees' Health Plan's Diabetes Value Benefit plan and Diabetes Prevention Program for Medicaid beneficiaries in the Commonwealth.

WHEREAS, in State Fiscal Year 2015-2016, nearly 100,000 adult Medicaid recipients and nearly 3,000 Medicaid recipients under the age of 20 in Kentucky were diagnosed with diabetes; and

WHEREAS, data from the 2017 Kentucky Diabetes Report shows that diabetes is more common among those with lower incomes and lower levels of education; and

WHEREAS, people with diabetes are more likely to have other serious, chronic medical conditions, including hypertension, high cholesterol, and coronary heart disease; and

WHEREAS, in State Fiscal Year 2015-2016, 3,805 Kentucky Medicaid recipients with a primary diagnosis of diabetes made a total of 5,395 emergency department visits which resulted in a total of \$2.182 million in Medicaid spending; and

WHEREAS, in State Fiscal Year 2015-2016, 21,859 Kentucky Medicaid recipients with a primary or secondary diagnosis of diabetes were admitted to a hospital and received inpatient services more than 40,000 times for a total of 204,756 covered hospital days which resulted in a total of \$199 million in Medicaid spending; and

WHEREAS, diabetes has the third highest overall cost of common chronic condition among the Kentucky Medicaid population with total expenditures of \$283.69 million in State Fiscal Year 2015-2016; and

WHEREAS, in Kentucky diabetes is the fifth-leading cause of death by disease and the state ranks fourth in the nation for highest diabetes mortality rate; and

WHEREAS, people with diabetes have medical expenses approximately 2.3 times higher than those who do not have diabetes; and

WHEREAS, in 2013 the Kentucky Employees' Health Plan (KEHP) implemented the Diabetes Prevention Program which is a year-long educational and lifestyle training program certified by the Centers for Disease Control and Prevention (CDC) that is offered in both face-to-face classroom settings and online; and

WHEREAS, KEHP's Diabetes Prevention Program participants, on average, exceed CDC goals for weight loss, regular physical activity, and A1C levels thereby reducing their risk for developing diabetes; and

WHEREAS, in 2016 KEHP implemented the Diabetes Value Benefit plan which provides plan members who have been diagnosed with diabetes with access to all necessary diabetes testing supplies and diabetes-related prescription drugs free of charge, or in the case of some nongeneric prescriptions with a significantly reduced co-pay; and

WHEREAS, according to KEHP, the Diabetes Value Benefit plan has resulted in increased diabetes medication adherence rates which have produced reductions in overall medical costs, the average number of non-diabetes related prescriptions per patient, the number of doctor's office visits, the number of emergency department visits, the number of hospital admissions, and the length of hospital stays; and

WHEREAS, despite increased prescription costs, KEHP estimates that the Diabetes Value Benefit plan has produced a total medical cost savings in excess of \$10.5 million since 2016; and

WHEREAS, the Diabetes Medical Emergency Response Task Force has recommended that the General Assembly adopt a joint resolution instructing the Department for Medicaid Services to study the potential impacts of implementing programs similar to the Diabetes Prevention Program and Diabetes Value Benefits plan offered by KEHP and to provide the results of that study to the Interim Joint Committee on Health and Welfare and Family Services during the 2019 interim;

NOW, THEREFORE,

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

➔Section 1. The Department for Medicaid Services shall conduct a study of the potential impacts of implementing programs similar to the Kentucky Employees' Health Plan's Diabetes Value Benefit plan and Diabetes

Prevention Program for Medicaid beneficiaries in the Commonwealth. Impacts studied shall include but not be limited to the estimated cost of such programs, the health benefits such programs may afford Medicaid beneficiaries, and any potential financial savings that may be achieved by such programs.

➔Section 2. The Department for Medicaid Services shall submit a written report of its findings from the study required by Section 1 of this Resolution to the Legislative Research Commission's Interim Joint Committee on Health and Welfare and Family Services by November 1, 2019.

➔Section 3. The Clerk of the Senate shall transmit a copy of this Resolution to Governor Matthew G. Bevin, 700 Capital Avenue, Suite 100, Frankfort, Kentucky 40601; Adam Meier, Secretary of the Cabinet for Health and Family Services, 275 East Main Street, Frankfort, Kentucky 40621; and Carol Steckel, Commissioner of the Department for Medicaid Services, 275 East Main Street, Frankfort, Kentucky 40621.

**Signed by Governor March 19, 2019.**