

1 A CONCURRENT RESOLUTION urging all private health insurance providers
2 doing business in Kentucky to study the potential impacts of implementing programs
3 similar to the Kentucky Employees' Health Plan's Diabetes Value Benefit plan and
4 Diabetes Prevention Program, and to implement similar programs if the results of their
5 studies indicate a likelihood of cost savings or improved client health outcomes.

6 WHEREAS, data from the Kentucky Behavioral Risk Factor Surveillance Survey
7 show that from 2000 to 2015, the number of adults in Kentucky diagnosed with diabetes
8 more than doubled from 6.5 percent of the adult population, or 198,052 individuals, to
9 13.4 percent, or 458,381 individuals; and

10 WHEREAS, the Center for Disease Control (CDC) estimates that an additional
11 152,793 adult Kentuckians are living with undiagnosed diabetes; and

12 WHEREAS, according to the CDC, as many as one in three adult Kentuckians, or
13 1,100,000 individuals, may have prediabetes; and

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

17 WHEREAS, in 2015 Kentucky hospitals reported nearly 10,000 inpatient hospital
18 discharges with a primary diagnosis of diabetes; and

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

21 WHEREAS, the American Diabetes Association (ADA) estimates that total direct
22 medical expenses for diagnosed and undiagnosed diabetes, prediabetes, and gestational
23 diabetes in Kentucky in 2012 was \$3.5 billion; and

24 WHEREAS, the ADA further estimates that in 2012 diabetes cost Kentucky \$1.3
25 billion in indirect costs such as lost productivity; and

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

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

4 WHEREAS, KEHP's Diabetes Prevention Program participants, on average, exceed
5 CDC goals for weight loss, regular physical activity, A1C levels; and

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

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

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

18 WHEREAS, the Diabetes Medical Emergency Response Task Force has
19 recommended that the General Assembly adopt a resolution urging all private health
20 insurance providers doing business in the Commonwealth to study the potential impacts
21 of implementing programs similar to the Diabetes Prevention Program and Diabetes
22 Value Benefit plan offered by KEHP and urging such companies to implement similar
23 programs if the results of their studies indicate a likelihood of cost savings or
24 improvement of customer health;

25 NOW, THEREFORE,

26 ***Be it resolved by the Senate of the General Assembly of the Commonwealth of***
27 ***Kentucky, the House of Representatives concurring therein:***

1 ➔Section 1. The General Assembly respectfully urges all private health insurance
2 providers doing business in Kentucky to study the potential impacts of implementing
3 programs similar to the Kentucky Employees' Health Plan's Diabetes Value Benefit plan
4 and Diabetes Prevention Program. Impacts studied should include but not be limited to
5 the estimated cost of such programs, the potential health benefits of such programs, and
6 any possible financial savings that may be achieved by such programs. The General
7 Assembly further urges such companies to implement programs similar to KEHP's
8 Diabetes Value Benefit plan and Diabetes Prevention Program if the results of their
9 studies indicate a likelihood of cost savings or improved client health outcomes.