



Ohio Legislative Service Commission

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Fiscal Note & Local Impact Statement

Bill: S.B. 287 of the 131st G.A.

Date: May 3, 2016

Status: As Introduced

Sponsor: Sen. Hite

Local Impact Statement Procedure Required: No

Contents: To assess the incidence of diabetes in Ohio, to establish goals and plans to reduce the incidence, and to submit biennial reports

State Fiscal Highlights

- The Office of Health Transformation, as well as the departments of Health, Medicaid, and Administrative Services, and the Commission on Minority Health will realize an increase in administrative costs related to completing the diabetes assessments and required report, as well as providing staff at meetings.

Local Fiscal Highlights

- No direct fiscal effect on political subdivisions.

Detailed Fiscal Analysis

The bill requires the Executive Director of the Office of Health Transformation to convene meetings with staff of the departments of Health, Medicaid, and Administrative Services, as well as the Commission on Minority Health, to, among other things, assess the incidence of diabetes in Ohio and to establish goals for each of the agencies to reduce that incidence, establish and monitor the implementation of plans for each agency to reduce the incidence, improve care, and control complications among the populations of concern to each agency, and collect the information to prepare biennial reports required by the bill. The Executive Director must convene the meetings at his or her discretion, but the meetings must take place at least twice in each calendar year. Additionally, the bill requires the Executive Director, no later than January 31 of each even-numbered year, to submit a report to the General Assembly that includes the assessment results, the progress each agency has made toward establishing goals, and recommendations regarding legislative and fiscal policies related to diabetes prevention, treatment, and management. The bill specifies what agency-specific assessments are to be included. The bill states that the agencies

referenced above are not required to establish programs for diabetes prevention, treatment, and management.

Each of the specified agencies will realize an increase in administrative costs relating to the completion of assessments and the required report, as well as for providing staff at meetings. The costs will depend on the level of assessment conducted and what activities agencies are currently conducting regarding diabetes assessments.

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