STATE OF OKLAHOMA

1st Session of the 47th Legislature (1999)

SENATE BILL NO. _____330 By: Weedn

AS INTRODUCED

An Act relating to health; creating the Osteoporosis Prevention and Treatment Education Act; citing act; stating purposes of act; requiring promulgation of rules; requiring the State Department of Health provide certain services according to fund availability; requiring the State Department of Health to take certain actions to effectuate the purposes of the act; requiring the use of certain strategies for specified purposes; requiring the State Department of Health to conduct a needs assessment to identify specified resources and needs; requiring the Department to develop and maintain list of specified services and health care providers; requiring dissemination of list and other information; stating specified contents of certain document; establishing Interagency Council on Osteoporosis; providing for chair and composition of membership; stating duties of council; requiring preparation and transmission of report; requiring establishment and coordination of Advisory Panel on Osteoporosis; stating purpose of panel; providing for composition of membership; allowing the State Department of Health to take certain actions; allowing the State Department of Health to contract with specified entity for certain services; allowing the State Commissioner of Health to accept specified funds; requiring the Commissioner to seek waivers to maximize funds; providing for codification; and providing effective date.

BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:

SECTION 1. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-260.1 of Title 63, unless there is created a duplication in numbering, reads as follows:

This act shall be known and may be cited as the "Osteoporosis Prevention and Treatment Education Act".

SECTION 2. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-260.2 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. The purposes of this act are:

1. To design and implement a multigenerational, statewide program of public awareness and knowledge about:

a. the causes of osteoporosis,

b. personal risk factors,

c. the value of prevention and early detection, and

d. the options available for treatment;

2. To facilitate and enhance knowledge and understanding of osteoporosis by disseminating educational materials, information about research results, services, and strategies for prevention and treatment to patients, health professionals, and the public;

3. To utilize educational and training resources and services that have been developed by organizations with appropriate expertise and knowledge of osteoporosis, and to use available technical assistance;

4. To evaluate existing osteoporosis services in the community and assess the need for improving the quality and accessibility of community-based services;

5. To provide easy access to clear, complete, and accurate osteoporosis information and referral services;

6. To educate and train service providers, health professionals, and physicians;

7. To heighten awareness about the prevention, detection, and treatment of osteoporosis among state and local health and human service officials, health educators, and policymakers;

8. To coordinate state programs and services to address the issue of osteoporosis;

9. To promote the development of support groups for osteoporosis patients and their families and caregivers;

10. To adequately fund these programs; and

11. To provide lasting improvements in the delivery of osteoporosis health care that affect the quality of life of osteoporosis patients and that contain health care costs.

B. 1. The State Board of Health shall promulgate rules necessary to enact the provisions of the Osteoporosis Prevention and Treatment Education Act.

2. The State Department of Health, as funds are available, shall:

a. provide sufficient staff to implement the Osteoporosis Prevention and Treatment Education Program,

b. provide appropriate training for staff of the Osteoporosis Prevention and Treatment Education Program,

c. identify the appropriate entities to carry out the program,

d. base the program on the most up-to-date scientific information and findings,

e. work to improve the capacity of community-based services available to osteoporosis patients,

f. work with governmental offices, community and business leaders, community organizations, health care and human service providers, and national osteoporosis organizations to coordinate efforts and maximize state resources in the areas of prevention, education, and treatment of osteoporosis, and

g. identify and, when appropriate, replicate or use successful osteoporosis programs and procure related materials and services from organizations with appropriate expertise and knowledge of osteoporosis.

SECTION 3. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-260.3 of Title 63, unless there is created a duplication in numbering, reads as follows:

The State Department of Health shall establish, promote, and maintain an osteoporosis prevention and treatment education program in order to effectuate the purposes of this act as follows:

1. The Department shall use, but is not limited to, the following strategies for:

a. raising public awareness on the causes and nature of osteoporosis, personal risk factors, value of prevention and early detection, and options for diagnosing and treating the disease:

(1) an outreach campaign utilizing print, radio, and television public service announcements, advertisements, posters, and other materials,

(2) community forums,

(3) health information and risk factor assessment at public events,

(4) targeting at-risk populations,

(5) providing reliable information to policymakers, and

(6) distributing information through county health departments, schools, area agencies on aging, employer wellness programs, physicians, hospitals and health maintenance organizations, women's groups, nonprofit organizations, community-based organizations, and departmental regional offices,

b. educating consumers about risk factors, diet and exercise, diagnostic procedures and their indications for use, risks and benefits of drug therapies currently approved by the U.S Food and Drug Administration, environmental safety and injury prevention, and the availability of diagnostic, treatment, and rehabilitation services:

(1) identify and obtain educational materials, including brochures and videotapes, which accurately translate the latest scientific information on osteoporosis in easy-to-understand terms,

(2) build a statewide system of resources to provide information and referral on all aspects of osteoporosis, including educational materials and counseling,

(3) establish state linkage with an existing toll-free hotline for consumers,

(4) facilitate the development and maintenance of osteoporosis support groups, and

(5) conduct workshops and seminars for lay audiences, and

c. educating physicians and health professionals and training community service providers on the most up-to-date, accurate scientific and medical information on osteoporosis prevention, diagnosis, and treatment, therapeutic decision-making, including guidelines for detecting and treating the disease in special populations, risks and benefits of medications, and research advances:

(1) identify and obtain education materials for the health care provider which translates the latest scientific and medical information into clinical applications,

(2) raise awareness among physicians and health and human services professionals as to the importance of osteoporosis prevention, early detection, treatment, and rehabilitation,

(3) identify and use available curricula for training health and human service providers and community leaders on osteoporosis prevention, detection, and treatment,

(4) provide workshops and seminars for in-depth professional development in the field of the care and management of the patient with osteoporosis, and

(5) conduct a statewide conference on osteoporosis at appropriate intervals;

2. a. The Department shall conduct a needs assessment to identify:

(1) research being conducted within the state,

(2) available technical assistance and educational materials and programs nationwide,

(3) the level of public and professional awareness about osteoporosis,

(4) the needs of osteoporosis patients, their families, and caregivers,

(5) needs of health care providers, including physicians, nurses, managed care organizations, and other health care providers,

(6) the service available to the osteoporosis patient,

(7) existence of osteoporosis treatment programs,

(8) existence of osteoporosis support groups,

(9) existence of rehabilitation services, and

(10) number and location of bone density testing equipment.

b. Based on the needs assessment, the Department shall develop and maintain a list of osteoporosis-related services and osteoporosis health care providers with

specialization in services to prevent, diagnose, and treat osteoporosis. This list shall be disseminated with a description of diagnostic testing procedures, appropriate indications for their use, drug therapies currently approved by the U.S. Food and Drug Administration, and a cautionary statement about the current status of osteoporosis research, prevention, and treatment. Such cautionary statement shall also indicate that the Department does not license, certify, or in any way approve osteoporosis programs or centers in the state.

SECTION 4. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-260.4 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. There is hereby established within the State Department of Health an Interagency Council on Osteoporosis. The State Commissioner of Health shall chair the interagency council. The council shall be composed of representatives from appropriate state departments and agencies including, but not limited to, the entities with responsibility for aging, health care delivery, education, public welfare, and women's programs, who shall be appointed by the director or chief operating officer of such entity.

B. The council shall:

1. Advise the Department regarding coordination of osteoporosis programs conducted by or through the Department;

2. Establish a mechanism for sharing information on osteoporosis among all officials and employees involved in carrying out osteoporosis-related programs;

3. Preview and coordinate the most promising areas of education, prevention, and treatment concerning osteoporosis;

4. Assist the Department and other offices in developing plans for education and health promotion on osteoporosis;

5. Establish mechanisms to use the results of research concerning osteoporosis in the development of relevant policies and programs; and

6. Prepare a report that describes educational initiatives on osteoporosis sponsored by the state and makes recommendations for new educational initiatives on osteoporosis. The council shall transmit the report to the State Board of Health for review and forwarding with any necessary comments or recommendations to the Legislature. The report shall also be available to the public.

C. The Interagency Council on Osteoporosis shall establish and coordinate an Advisory Panel on Osteoporosis which will provide nongovernmental input regarding the Osteoporosis Prevention and Treatment Education Program. Membership on the advisory panel shall be voluntary and shall include, but not be limited to, persons with osteoporosis, representatives of women's health organizations, public health education, osteoporosis experts, providers of osteoporosis health care, persons knowledgeable in health promotion and education, and representatives of national osteoporosis organizations or their state or regional affiliates.

SECTION 5. NEW LAW A new section of law to be codified in the Oklahoma Statutes as Section 1-260.5 of Title 63, unless there is created a duplication in numbering, reads as follows:

A. The State Department of Health may replicate and use successful osteoporosis programs and enter into contracts and purchase materials or services from organizations with appropriate expertise and knowledge of osteoporosis for such services and materials as, but not limited to, the following:

1. Educational information and materials on the causes, prevention, detection, treatment, and management of osteoporosis;

2. Training of staff;

3. Physicians and health care professional education and training and clinical conferences;

4. Conference organization and staffing;

5. Regional office development and staffing;

6. Nominations for advisory panels;

7. Support group development;

8. Consultation;

9. Resource library facilities;

10. Training home health aides and nursing home personnel; and

11. Training teachers.

B. The Department may contract with a national organization with expertise in osteoporosis to establish and staff an office of such organization in the state to implement parts of the osteoporosis education program.

C. The State Commissioner of Health:

1. May accept grants, services, and property from the federal government, foundations, organizations, medical schools, and other entities as may be available for the purposes of fulfilling the Department's duties under this program; and

2. Shall seek any federal waiver or waivers that may be necessary to maximize funds from the federal government to implement this program.

SECTION 6. This act shall become effective November 1, 1999.

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