

HOUSE BILL No. 5364

October 25, 2007, Introduced by Reps. Bieda, Simpson, Johnson, Jackson, Leland, Bauer, Kathleen Law, Robert Jones, Scott, Donigan, Meisner, Vagnozzi, Constan, Lemmons, Rocca, Clack, Gillard, Meadows, Gonzales, McDowell, Accavitti, Young, Condino, Nofs and Gaffney and referred to the Committee on Health Policy.

A bill to amend 1978 PA 368, entitled
"Public health code,"
(MCL 333.1101 to 333.25211) by adding part 55A.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 PART 55A. ARTHRITIS PREVENTION AND CONTROL

2 SEC. 5551. THIS PART SHALL BE KNOWN AND MAY BE CITED AS THE
3 "ARTHRITIS PREVENTION AND CONTROL ACT".

4 SEC. 5555. THE PURPOSES OF THIS PART ARE AS FOLLOWS:

5 (A) TO CREATE AND FOSTER A STATEWIDE PROGRAM THAT PROMOTES
6 PUBLIC AWARENESS AND INCREASES KNOWLEDGE ABOUT THE CAUSES OF
7 ARTHRITIS, THE IMPORTANCE OF EARLY DIAGNOSIS AND APPROPRIATE
8 MANAGEMENT, EFFECTIVE PREVENTION STRATEGIES, AND PAIN PREVENTION
9 AND MANAGEMENT.

1 (B) TO DEVELOP KNOWLEDGE AND ENHANCE UNDERSTANDING OF
2 ARTHRITIS BY DISSEMINATING EDUCATIONAL MATERIALS, INFORMATION ON
3 RESEARCH RESULTS, SERVICES PROVIDED, AND STRATEGIES FOR PREVENTION
4 AND CONTROL TO PATIENTS, HEALTH PROFESSIONALS, AND THE PUBLIC.

5 (C) TO ESTABLISH A SOLID SCIENTIFIC BASE OF KNOWLEDGE ON THE
6 PREVENTION OF ARTHRITIS AND RELATED DISABILITY THROUGH
7 SURVEILLANCE, EPIDEMIOLOGY, AND PREVENTION RESEARCH.

8 (D) TO UTILIZE EDUCATIONAL AND TRAINING RESOURCES AND SERVICES
9 DEVELOPED BY ORGANIZATIONS WITH APPROPRIATE EXPERTISE AND KNOWLEDGE
10 OF ARTHRITIS AND TO USE AVAILABLE TECHNICAL ASSISTANCE.

11 (E) TO EVALUATE THE NEED FOR IMPROVING THE QUALITY AND
12 ACCESSIBILITY OF EXISTING COMMUNITY-BASED ARTHRITIS SERVICES.

13 (F) TO HEIGHTEN AWARENESS ABOUT THE PREVENTION, DETECTION, AND
14 TREATMENT OF ARTHRITIS AMONG STATE AND LOCAL HEALTH OFFICIALS,
15 HEALTH PROFESSIONALS AND OTHER HEALTH CARE PROVIDERS, AND POLICY
16 MAKERS.

17 (G) TO IMPLEMENT AND COORDINATE STATE AND LOCAL PROGRAMS AND
18 SERVICES TO REDUCE THE PUBLIC HEALTH BURDEN OF ARTHRITIS.

19 (H) TO ADEQUATELY FUND THE PROGRAMS DESCRIBED IN SUBDIVISION
20 (G) ON A STATE LEVEL.

21 (I) TO PROVIDE LASTING IMPROVEMENTS IN THE DELIVERY OF HEALTH
22 CARE FOR INDIVIDUALS WITH ARTHRITIS AND THEIR FAMILIES, THUS
23 IMPROVING THEIR QUALITY OF LIFE WHILE ALSO CONTAINING HEALTH CARE
24 COSTS.

25 SEC. 5557. THE DIRECTOR OF THE DEPARTMENT SHALL DO ALL OF THE
26 FOLLOWING:

27 (A) PROVIDE SUFFICIENT STAFF TO IMPLEMENT THE ARTHRITIS

1 PREVENTION AND CONTROL PROGRAM.

2 (B) PROVIDE APPROPRIATE TRAINING FOR THE STAFF OF THE
3 ARTHRITIS PREVENTION AND CONTROL PROGRAM.

4 (C) IDENTIFY THE APPROPRIATE ORGANIZATIONS TO CARRY OUT THE
5 PROGRAM.

6 (D) BASE THE PROGRAM ON THE MOST CURRENT SCIENTIFIC
7 INFORMATION AND FINDINGS.

8 (E) WORK TO INCREASE AND IMPROVE COMMUNITY-BASED SERVICES
9 AVAILABLE TO PEOPLE WITH ARTHRITIS AND THEIR FAMILY MEMBERS.

10 (F) WORK WITH GOVERNMENTAL OFFICES, NATIONAL VOLUNTARY HEALTH
11 ORGANIZATIONS AND THEIR LOCAL CHAPTERS, COMMUNITY AND BUSINESS
12 LEADERS, COMMUNITY ORGANIZATIONS, AND HEALTH CARE AND HUMAN SERVICE
13 PROVIDERS TO COORDINATE EFFORTS AND MAXIMIZE STATE RESOURCES IN THE
14 AREAS OF PREVENTION, EDUCATION, DETECTION, PAIN MANAGEMENT, AND
15 TREATMENT OF ARTHRITIS.

16 (G) IDENTIFY AND, WHEN APPROPRIATE, USE EVIDENCE-BASED
17 ARTHRITIS PROGRAMS AND OBTAIN RELATED MATERIALS AND SERVICES FROM
18 ORGANIZATIONS WITH APPROPRIATE EXPERTISE AND KNOWLEDGE OF
19 ARTHRITIS.

20 SEC. 5559. (1) THE DEPARTMENT SHALL ESTABLISH, PROMOTE, AND
21 MAINTAIN AN ARTHRITIS PREVENTION AND CONTROL PROGRAM IN ORDER TO
22 RAISE PUBLIC AWARENESS, EDUCATE CONSUMERS, EDUCATE AND TRAIN HEALTH
23 PROFESSIONALS, TEACHERS, AND HUMAN SERVICES PROVIDERS, AND FOR
24 OTHER PURPOSES.

25 (2) THE DEPARTMENT SHALL CONDUCT A NEEDS ASSESSMENT TO
26 IDENTIFY ALL OF THE FOLLOWING, AS IT RELATES TO ARTHRITIS:

27 (A) EPIDEMIOLOGICAL AND OTHER PUBLIC HEALTH RESEARCH BEING

1 CONDUCTED WITHIN THE STATE.

2 (B) AVAILABLE TECHNICAL ASSISTANCE AND EDUCATIONAL MATERIALS
3 AND PROGRAMS NATIONWIDE AND WITHIN THE STATE.

4 (C) THE LEVEL OF PUBLIC AND PROFESSIONAL ARTHRITIS AWARENESS.

5 (D) THE NEEDS OF PEOPLE IN THIS STATE WITH ARTHRITIS, THEIR
6 FAMILIES, AND CAREGIVERS.

7 (E) EDUCATIONAL AND SUPPORT SERVICE NEEDS OF HEALTH CARE
8 PROVIDERS, INCLUDING, BUT NOT LIMITED TO, PHYSICIANS, NURSES, AND
9 MANAGED CARE ORGANIZATIONS.

10 (F) THE SERVICES AVAILABLE TO A PERSON WITH ARTHRITIS.

11 (G) THE EXISTENCE OF ARTHRITIS TREATMENT, SELF-MANAGEMENT,
12 PHYSICAL ACTIVITY, AND OTHER EDUCATION PROGRAMS.

13 (H) THE EXISTENCE OF REHABILITATION SERVICES.

14 (3) THE DEPARTMENT SHALL ESTABLISH AND COORDINATE AN ADVISORY
15 PANEL ON ARTHRITIS THAT WILL PROVIDE NONGOVERNMENTAL INPUT
16 REGARDING THE ARTHRITIS PREVENTION AND CONTROL PROGRAM. MEMBERSHIP
17 SHALL INCLUDE, BUT IS NOT LIMITED TO, PERSONS WITH ARTHRITIS,
18 PUBLIC HEALTH EDUCATORS, MEDICAL EXPERTS ON ARTHRITIS, PROVIDERS OF
19 ARTHRITIS HEALTH CARE, PERSONS KNOWLEDGEABLE IN HEALTH PROMOTION
20 AND EDUCATION, AND REPRESENTATIVES OF NATIONAL ARTHRITIS
21 ORGANIZATIONS AND THEIR LOCAL CHAPTERS.

22 (4) THE DEPARTMENT SHALL USE, BUT IS NOT LIMITED TO,
23 STRATEGIES CONSISTENT WITH THE NATIONAL ARTHRITIS ACTION PLAN, THE
24 MICHIGAN ARTHRITIS ACTION PLAN, AND OTHER EXISTING STATE PLANNING
25 EFFORTS TO RAISE PUBLIC AWARENESS AND KNOWLEDGE ON THE CAUSES AND
26 NATURE OF ARTHRITIS, PERSONAL RISK FACTORS, VALUE OF PREVENTION AND
27 EARLY DETECTION, WAYS TO MINIMIZE PREVENTABLE PAIN, AND OPTIONS FOR

1 DIAGNOSING AND TREATING THE DISEASE.

2 (5) THE DEPARTMENT MAY REPLICATE AND USE SUCCESSFUL ARTHRITIS
3 PROGRAMS, ENTER INTO CONTRACTS, AND PURCHASE MATERIALS OR SERVICES
4 FROM ENTITIES WITH APPROPRIATE EXPERTISE FOR SUCH SERVICES AND
5 MATERIALS AS ARE NECESSARY TO CARRY OUT THE GOALS OF THE ARTHRITIS
6 PREVENTION AND CONTROL PROGRAM.

7 (6) THE DEPARTMENT MAY ENTER INTO AN AGREEMENT WITH 1 OR MORE
8 NATIONAL ORGANIZATIONS WITH EXPERTISE IN ARTHRITIS TO IMPLEMENT
9 PARTS OF THE ARTHRITIS PREVENTION AND CONTROL PROGRAM.

10 SEC. 5561. (1) THE DEPARTMENT MAY ACCEPT GRANTS, SERVICES, AND
11 PROPERTY FROM THE FEDERAL GOVERNMENT AND FROM PRIVATE FOUNDATIONS,
12 ORGANIZATIONS, MEDICAL SCHOOLS, AND OTHER ENTITIES AS MAY BE
13 AVAILABLE FOR THE PURPOSES OF FULFILLING THE OBLIGATIONS OF THE
14 ARTHRITIS PREVENTION AND CONTROL PROGRAM.

15 (2) THE DEPARTMENT SHALL SEEK A FEDERAL WAIVER OR WAIVERS IF
16 NECESSARY TO MAXIMIZE FUNDS RECEIVED FROM THE FEDERAL GOVERNMENT TO
17 IMPLEMENT THE ARTHRITIS PREVENTION AND CONTROL PROGRAM.