

2 SSB 6239 - H COMM AMD  
3 By Committee on Health Care

4

5 Strike everything after the enacting clause and insert the  
6 following:

7 NEW SECTION. **Sec. 1.** This act may be known and cited as the  
8 "osteoporosis prevention and treatment education act."

9 NEW SECTION. **Sec. 2.** (1) The legislature hereby finds the  
10 following:

11 (a) Osteoporosis, a bone-thinning disease, is a major public health  
12 problem that poses a threat to the health and quality of life to as  
13 many as twenty-five million Americans;

14 (b) The one and one-half million fractures each year that result  
15 from osteoporosis cause pain, disability, immobility, and social  
16 isolation, affecting quality of life and threatening people's ability  
17 to live independently;

18 (c) Because osteoporosis progresses silently and without sensation  
19 over many years and many cases remain undiagnosed, its first symptom is  
20 often a fracture, typically of the hip, spine, or wrist;

21 (d) One of two women and one of five men will suffer an  
22 osteoporotic fracture in their lifetimes;

23 (e) A woman's risk of hip fracture is equal to her combined risk of  
24 breast, uterine, and ovarian cancer;

25 (f) The annual direct and indirect costs of osteoporosis to the  
26 health care system are estimated to be as high as eighteen billion  
27 dollars in 1993 and are expected to rise to sixty to eighty billion  
28 dollars by the year 2020;

29 (g) Since osteoporosis progresses silently and currently has no  
30 cure, prevention, early diagnosis, and treatment are key to reducing  
31 the prevalence of and devastation from this disease;

32 (h) Although there exists a large quantity of public information  
33 about osteoporosis, it remains inadequately disseminated and not  
34 tailored to meet the needs of specific population groups;

1 (i) Most people, including physicians, health care providers, and  
2 government agencies, continue to lack knowledge in the prevention,  
3 detection, and treatment of the disease;

4 (j) Experts in the field of osteoporosis believe that with greater  
5 awareness of the value of prevention among medical experts, service  
6 providers, and the public, osteoporosis will be preventable and  
7 treatable in the future, thereby reducing the costs of long-term care;

8 (k) Osteoporosis is a multigenerational issue because building  
9 strong bones during youth and preserving them during adulthood may  
10 prevent fractures in later life; and

11 (l) Educating the public and health care community throughout the  
12 state about this potentially devastating disease is of paramount  
13 importance and is in every respect in the public interest and to the  
14 benefit of all residents of the state.

15 (2) The purposes of sections 2 through 10 of this act are to:

16 (a) Create and foster a multigenerational, state-wide program to  
17 promote public awareness and knowledge about the causes of  
18 osteoporosis, personal risk factors, the value of prevention and early  
19 detection, and the options available for treatment;

20 (b) Facilitate and enhance knowledge and understanding of  
21 osteoporosis by disseminating educational materials, information about  
22 research results, services, and strategies for prevention and treatment  
23 to patients, health professionals, and the public;

24 (c) Utilize educational and training resources and services that  
25 have been developed by organizations with appropriate expertise and  
26 knowledge of osteoporosis and to use available technical assistance;

27 (d) Evaluate existing osteoporosis services in the community and  
28 assess the need for improving the quality and accessibility of  
29 community-based services;

30 (e) provide easy access to clear, complete, and accurate  
31 osteoporosis information and referral services;

32 (f) Educate and train service providers, health professionals, and  
33 physicians;

34 (g) Heighten awareness about the prevention, detection, and  
35 treatment of osteoporosis among state and local health and human  
36 service officials, health educators, and policy makers;

37 (h) Coordinate state programs and services to address the issue of  
38 osteoporosis;

- 1 (i) Promote the development of support groups for osteoporosis  
2 patients and their families and caregivers;  
3 (j) Adequately fund these programs; and  
4 (k) Provide lasting improvements in the delivery of osteoporosis  
5 health care, thus providing patients with an improved quality of life  
6 and society with the containment of health care costs.

7 NEW SECTION. **Sec. 3.** Within available resources, the secretary  
8 may:

- 9 (1) Provide sufficient staff to implement the osteoporosis  
10 prevention and treatment education program;  
11 (2) Provide appropriate training for staff of the osteoporosis  
12 prevention and treatment education program;  
13 (3) Identify the appropriate entities to carry out the program;  
14 (4) Base the program on the most up-to-date scientific information  
15 and findings;  
16 (5) Work to improve the capacity of community-based services  
17 available to osteoporosis patients;  
18 (6) Work with governmental offices, community and business leaders,  
19 community organizations, health care and human service providers, and  
20 national osteoporosis organizations to coordinate efforts and maximize  
21 state resources in the areas of prevention, education, and treatment of  
22 osteoporosis; and  
23 (7) Identify and when appropriate replicate or use successful  
24 osteoporosis programs and procure related materials and services from  
25 organizations with appropriate expertise and knowledge of osteoporosis,  
26 as described in section 9 of this act.

27 NEW SECTION. **Sec. 4.** Within available resources, the department  
28 may establish, promote, and maintain an osteoporosis prevention and  
29 treatment education program as an integral part of its health promotion  
30 and disease prevention efforts in order to raise public awareness,  
31 educate consumers, educate and train health professionals, teachers,  
32 and human service providers, and for other purposes.

33 NEW SECTION. **Sec. 5.** Within available resources, the department  
34 may use any of the following strategies for raising public awareness on  
35 the causes and nature of osteoporosis, personal risk factors, value of

1 prevention and early detection, and options for diagnosing and treating  
2 the disease:

3 (1) An outreach campaign utilizing print, radio, and television  
4 public service announcements, advertisements, posters, and other  
5 materials;

6 (2) Community forums;

7 (3) Health information and risk factor assessment at public events;

8 (4) Targeting at-risk populations;

9 (5) Providing reliable information to policy makers;

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

15 NEW SECTION. **Sec. 6.** Within available resources, the department  
16 may use any of the following strategies for educating consumers about  
17 risk factors, diet and exercise, diagnostic procedures and their  
18 indications for use, risks, and benefits of drug therapies currently  
19 approved by the United States food and drug administration,  
20 environmental safety and injury prevention, and the availability of  
21 diagnostic, treatment, and rehabilitation services:

22 (1) Identify and obtain educational materials including brochures  
23 and videotapes which translate accurately the latest scientific  
24 information on osteoporosis in easy-to-understand terms;

25 (2) Build a state-wide capacity to provide information and referral  
26 on all aspects of osteoporosis, including educational materials and  
27 counseling;

28 (3) Establish state linkage with an existing toll-free hotline for  
29 consumers;

30 (4) Facilitate the development and maintenance of osteoporosis  
31 support groups; and

32 (5) Conduct workshops and seminars for lay audiences.

33 NEW SECTION. **Sec. 7.** Within available resources, the department  
34 may use any of the following strategies for educating physicians and  
35 health professionals and training community service providers on the  
36 most up-to-date, accurate scientific and medical information on  
37 osteoporosis prevention, diagnosis, and treatment, therapeutic decision

1 making, including guidelines for detecting and treating the disease in  
2 special populations, risks and benefits of medications, and research  
3 advances:

4 (1) Identify and obtain educational materials for the professional  
5 that translates the latest scientific and medical information into  
6 clinical applications;

7 (2) Raise awareness among physicians and health and human services  
8 professionals as to the importance of osteoporosis prevention, early  
9 detection, treatment, and rehabilitation;

10 (3) Identify and use available curricula for training health and  
11 human service providers and community leaders on osteoporosis  
12 prevention, detection, and treatment;

13 (4) Provide workshops and seminars for in-depth professional  
14 development in the field of the care and management of the patient with  
15 osteoporosis; and

16 (5) Conduct a state-wide conference on osteoporosis at appropriate  
17 intervals.

18 NEW SECTION. **Sec. 8.** (1) Within available resources, the  
19 department may conduct a needs assessment to identify:

20 (a) Research being conducted within the state;

21 (b) Available technical assistance and educational materials and  
22 programs nationwide;

23 (c) Levels of public and professional awareness about osteoporosis;

24 (d) Needs of osteoporosis patients, their families, and caregivers;

25 (e) Needs of health care providers, including physicians, nurses,  
26 managed care organizations, and other health care providers;

27 (f) Services available to the osteoporosis patient;

28 (g) Existence of osteoporosis treatment programs;

29 (h) Existence of osteoporosis support groups;

30 (i) Existence of rehabilitation services; and

31 (j) Number and location of bone density testing equipment.

32 (2) Based on the needs assessment, the department shall develop and  
33 maintain a list of osteoporosis-related services and osteoporosis  
34 health care providers with specialization in services to prevent,  
35 diagnose, and treat osteoporosis. This list must be disseminated with  
36 a description of diagnostic testing procedures, appropriate indications  
37 for their use, drug therapies currently approved by the United States  
38 food and drug administration, and a cautionary statement about the

1 current status of osteoporosis research, prevention, and treatment.  
2 The statement must also indicate that the department does not license,  
3 certify, or in any way approve osteoporosis programs or centers in the  
4 state.

5 NEW SECTION. **Sec. 9.** (1) The governor may assign an existing  
6 interagency health policy group to function in part as an interagency  
7 oversight council on osteoporosis.

8 (2) The council shall assist department of health efforts to:

9 (a) Coordinate osteoporosis programs;

10 (b) Establish a mechanism for sharing information on osteoporosis  
11 among all officials and employees involved in carrying out  
12 osteoporosis-related programs;

13 (c) Coordinate the most promising areas of education, prevention,  
14 and treatment concerning osteoporosis;

15 (d) Assist other departments and offices in developing and  
16 coordinating plans for education and health promotion on osteoporosis;

17 (e) Establish mechanisms to use the results of research concerning  
18 osteoporosis in the development of relevant policies and programs; and

19 (f) Prepare a report that describes educational initiatives on  
20 osteoporosis sponsored by the state and makes recommendations for new  
21 educational initiatives on osteoporosis, and transmit the report to the  
22 state legislature and make the report available to the public.

23 (3)(a) Within available resources, the department may establish and  
24 coordinate an advisory panel on osteoporosis that provides  
25 nongovernmental input regarding the osteoporosis prevention and  
26 treatment education program.

27 (b) Membership on the advisory panel must include, but is not  
28 limited to, persons with osteoporosis, women's health organizations,  
29 public health educators, osteoporosis experts, providers of  
30 osteoporosis health care, persons knowledgeable in health promotion and  
31 education, and representatives of national osteoporosis organizations  
32 or their state or regional affiliates.

33 NEW SECTION. **Sec. 10.** (1) The department may replicate and use  
34 successful osteoporosis programs and either or both enter into  
35 contracts and purchase materials or services from organizations with  
36 appropriate expertise and knowledge of osteoporosis for such services  
37 and materials as, but not limited to, the following:

1 (a) Educational information and materials on the causes,  
2 prevention, detection, treatment, and management of osteoporosis;  
3 (b) Training of staff;  
4 (c) Physician and health care professional education and training  
5 and clinical conferences;  
6 (d) Conference organization and staffing;  
7 (e) Regional office development and staffing;  
8 (f) Nominations for advisory panels;  
9 (g) Support group development;  
10 (h) Consultation;  
11 (i) Resource library facilities;  
12 (j) Training home health aides and nursing home personnel; and  
13 (k) Training teachers.  
14 (2) The department may enter into an agreement or agreements to  
15 work with a national organization or organizations with expertise in  
16 osteoporosis to establish and staff an office or offices of that  
17 organization in the state to implement parts of the osteoporosis  
18 program.

19 NEW SECTION. **Sec. 11.** The secretary may accept grants, services,  
20 and property from the federal government, foundations, organizations,  
21 medical schools, and other entities as may be available for the  
22 purposes of fulfilling the obligations of this program.

23 NEW SECTION. **Sec. 12.** The secretary shall seek any federal waiver  
24 or waivers that may be necessary to maximize funds from the federal  
25 government to implement this program.

26 NEW SECTION. **Sec. 13.** Sections 2 through 12 of this act are each  
27 added to chapter 43.70 RCW."

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31 On page 1, line 1 of the title, after "education;" strike the  
32 remainder of the title and insert "adding new sections to chapter 43.70  
33 RCW; and creating a new section."

1        EFFECT:    Declares that the department may, within available  
2 resources, establish osteoporosis programs.

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