



94TH GENERAL ASSEMBLY

State of Illinois

2005 and 2006

HB2380

Introduced 2/16/2005, by Rep. Elizabeth Coulson

SYNOPSIS AS INTRODUCED:

New Act

Creates the Arthritis Prevention, Control, and Cure Act. Directs the Department of Public Health to establish, promote, and maintain an Arthritis Prevention, Control, and Cure Program to raise public awareness, educate consumers, and educate and train health professionals, teachers, and human services providers. Provides for a pilot program for the study of arthritis public health innovation projects. Provides for an Advisory Council on Arthritis to provide non-governmental input regarding the program.

LRB094 09891 DRJ 41241 b

FISCAL NOTE ACT
MAY APPLY

1 AN ACT in relation to public health.

2 **Be it enacted by the People of the State of Illinois,**
3 **represented in the General Assembly:**

4 Section 1. Short title. This Act may be cited as the
5 Arthritis Prevention, Control, and Cure Act.

6 Section 5. Findings and purposes.

7 (a) Findings. The legislature hereby finds the following:

8 (1) Arthritis encompasses more than 100 diseases and
9 conditions that affect joints, the surrounding tissues,
10 and other connective tissues.

11 (2) One of the most common family of diseases in the
12 United States, arthritis or chronic joint symptoms affect
13 nearly one of every 3 Americans.

14 (3) Arthritis is the leading cause of disability in the
15 United States, limiting daily activities for more than
16 7,000,000 citizens.

17 (4) Although prevailing myths inaccurately portray
18 arthritis as an old person's disease, arthritis is a
19 multi-generational disease that has become one of the
20 country's most pressing public health problems.

21 (5) This disease has a significant impact on quality of
22 life not only for the individual who experiences its
23 painful symptoms and resulting disability, but also for
24 family members and caregivers.

25 (6) Compounding this picture are the enormous economic
26 and social costs associated with treating arthritis and its
27 complications, which are estimated at almost
28 \$86,000,000,000 annually.

29 (7) Currently, the challenge exists to ensure delivery
30 of effective, but often underutilized, interventions that
31 are necessary in the prevention or reduction of
32 arthritis-related pain and disability.

1 (8) Although there exists a large quantity of public
2 information and programs about arthritis, it remains
3 inadequately disseminated and insufficient in addressing
4 the needs of specific diverse populations and other
5 underserved groups.

6 (9) The Arthritis Foundation, the Centers for Disease
7 Control and Prevention (CDC), and the Association of State
8 and Territorial Health Officials have led the development
9 of a public health strategy, the National Arthritis Action
10 Plan, to respond to this challenge.

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

15 (b) Purposes. The purposes of this Act are:

16 (1) To create and foster a statewide program that
17 promotes public awareness and increases knowledge about
18 the causes of arthritis, the importance of early diagnosis
19 and appropriate management, effective prevention
20 strategies, and pain prevention and management.

21 (2) To develop knowledge and enhance understanding of
22 arthritis by disseminating educational materials and
23 information on research results, services provided, and
24 strategies for prevention and control to patients, health
25 professionals, and the public.

26 (3) To establish a solid scientific base of knowledge
27 on the prevention of arthritis and related disability
28 through surveillance, epidemiology, and prevention
29 research.

30 (4) To utilize educational and training resources and
31 services developed by organizations with appropriate
32 expertise and knowledge of arthritis and to use available
33 technical assistance.

34 (5) To evaluate the need for improving the quality and
35 accessibility of existing community-based arthritis
36 services.

1 (6) To heighten awareness about the prevention,
2 detection, and treatment of arthritis among State and local
3 health and human services officials, health professionals
4 and providers, and policy makers.

5 (7) To implement and coordinate State and local
6 programs and services to reduce the public health burden of
7 arthritis.

8 (8) To adequately fund these programs on a State level.

9 (9) To provide lasting improvements in the delivery of
10 health care for individuals with arthritis and their
11 families, thus improving their quality of life while also
12 containing health care costs.

13 Section 10. Arthritis Prevention, Control, and Cure
14 Program.

15 (a) The Department of Public Health shall establish,
16 promote, and maintain an Arthritis Prevention, Control, and
17 Cure Program to raise public awareness, educate consumers, and
18 educate and train health professionals, teachers, and human
19 services providers, and for other purposes. The program shall
20 include the following components:

21 (1) Needs assessment. The Department of Public Health
22 shall conduct a needs assessment to identify the following:

23 (A) Epidemiological and other public health
24 research being conducted within the State.

25 (B) Available technical assistance and educational
26 materials and programs nationwide and within the
27 State.

28 (C) The level of public and professional arthritis
29 awareness.

30 (D) The needs of people with arthritis and their
31 families and caregivers.

32 (E) Educational and support service needs of
33 health care providers, including physicians, nurses,
34 managed care organizations, and other health care
35 providers.

1 (F) The services available to a person with
2 arthritis.

3 (G) The existence of arthritis treatment,
4 self-management, physical activity, and other
5 education programs.

6 (H) The existence of rehabilitation services.

7 (2) Advisory Council on Arthritis. The Department of
8 Public Health shall establish and coordinate an Advisory
9 Council on Arthritis to provide non-governmental input
10 regarding the Arthritis Prevention, Control, and Cure
11 Program. Membership of the Council must include, but need
12 not be limited to, persons with arthritis, public health
13 educators, medical experts on arthritis, providers of
14 arthritis health care, persons knowledgeable in health
15 promotion and education, and representatives of national
16 arthritis organizations and their local chapters.

17 (3) Public awareness. The Department of Public Health
18 shall use, but is not limited to, strategies consistent
19 with the National Arthritis Action Plan and existing State
20 planning efforts to raise public awareness and knowledge on
21 the causes and nature of arthritis, personal risk factors,
22 the value of prevention and early detection, ways to
23 minimize preventable pain, and options for diagnosing and
24 treating the disease.

25 (4) Technical assistance. The Department of Public
26 Health may replicate and use successful arthritis programs
27 and enter into contracts with or purchase materials or
28 services from entities with appropriate expertise for
29 services and materials that are necessary to carry out the
30 goals of the Arthritis Prevention, Control, and Cure
31 Program. The Department may enter into agreements with one
32 or more national organizations with expertise in arthritis
33 to implement parts of the Arthritis Prevention, Control,
34 and Cure Program.

35 (b) In addition to the components described in subsection
36 (a), the Arthritis Prevention, Control, and Cure Program shall

1 include a pilot program for the study of arthritis public
2 health innovation projects. Under the pilot program, the
3 Department of Public Health may give grants to academic
4 organizations or to public or community health organizations to
5 conduct the study or studies. The Department shall review all
6 grant applications, in collaboration with the Arthritis
7 Foundation and the Illinois Arthritis Partnership. Under the
8 pilot program, the Department of Public Health also may fund
9 community health projects for the following activities:
10 surveillance, awareness campaigns, public education,
11 professional education, screenings, and physical activity
12 programs. The Department of Public Health, in coordination with
13 selected grantees, shall evaluate the success of the community
14 health projects and their outcomes.

15 (c) The Department of Public Health shall do all of the
16 following:

17 (1) Provide sufficient staff to implement the
18 Arthritis Prevention, Control, and Cure Program.

19 (2) Provide appropriate training for staff of the
20 Arthritis Prevention, Control, and Cure Program.

21 (3) Identify the appropriate organizations to carry
22 out the program.

23 (4) Base the program on the most current scientific
24 information and findings.

25 (5) Work to increase and improve community-based
26 services available to people with arthritis and their
27 family members.

28 (6) Work with governmental offices, national voluntary
29 health organizations and their local chapters, community
30 and business leaders, community organizations, and health
31 care and human services providers to coordinate efforts and
32 maximize State resources in the areas of prevention,
33 education, detection, pain management, and treatment of
34 arthritis.

35 (7) Identify and, when appropriate, use evidence-based
36 arthritis programs and obtain related materials and

1 services from organizations with appropriate expertise and
2 knowledge of arthritis.

3 Section 15. Funding. The Department of Public Health may
4 accept grants, services, and property from the federal
5 government, foundations, organizations, medical schools, and
6 other entities that may be available for the purposes of
7 fulfilling the obligations of the Arthritis Prevention,
8 Control, and Cure Program.

9 Section 20. Waivers. The Department of Public Health shall
10 seek all waivers of federal law and regulations that may be
11 necessary to maximize funds from the federal government to
12 implement the Arthritis Prevention, Control, and Cure Program.