

HOUSE JOINT RESOLUTION 9

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By: **Delegates Nathan-Pulliam, R. Baker, Benson, Brown, Burns, Cadden, Cane, C. Davis, Dobson, Eckardt, Finifter, Goldwater, Gladden, Grosfeld, Howard, Hubbard, A. Jones, Klausmeier, Marriott, McHale, McIntosh, Mohorovic, Montague, Oaks, Paige, Phillips, Proctor, Rawlings, Swain, and Zirkin**

Introduced and read first time: February 12, 1999  
Assigned to: Environmental Matters

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HOUSE JOINT RESOLUTION

1 A House Joint Resolution concerning

2 **Prevention of Hypertension, Diabetes Mellitus, and Heart Disease Through**  
3 **Obesity Awareness, Risk Assessment, and Treatment**

4 FOR the purpose of directing the Department of Health and Mental Hygiene to study  
5 the interrelationship of major cardiovascular comorbidities such as  
6 hypertension and coronary artery disease, as well as major endocrinology  
7 comorbidities such as diabetes with obesity in order to determine the economics  
8 of obesity through an assessment of its risks and costs for patients enrolled in  
9 the Maryland Medicaid Program; making recommendations following the study  
10 for improvement in public awareness about the impact of obesity on increased  
11 risk factors for hypertension, diabetes, and coronary artery disease through  
12 school and community-based programs; giving priority to the development of  
13 cost-effective treatment protocols for obesity and access to treatment that will  
14 lead to improved outcomes for patients at risk for developing hypertension,  
15 diabetes, and coronary heart disease; and reporting the findings of this study  
16 and its recommendations to the General Assembly prior to the convening of the  
17 2000 Regular Session.

18 WHEREAS, The Behavioral Risk Factor Surveillance Data from the federal  
19 Center for Disease Control and Prevention indicates that 30% of Maryland's  
20 population is overweight and that the percentage of State deaths due to  
21 cardiovascular disease alone is 41%; and

22 WHEREAS, A 1997 study by Kaiser Permanente indicated that the total direct  
23 costs of obesity-related diseases such as hypertension, diabetes, and coronary heart  
24 disease in the United States in 1990 was \$45.8 billion; and

25 WHEREAS, There is a causal relationship between obesity and hypertension,  
26 diabetes, and coronary heart disease and the Kaiser study indicated that there is a  
27 significant potential for a reduction in health care expenditures stemming from  
28 health complications such as hypertension, diabetes, and coronary artery disease  
29 through obesity prevention efforts; and

1 WHEREAS, The National Institute of Diabetes and Digestive and Kidney  
2 Diseases provided information which indicates that nearly 80% of patients with  
3 diabetes mellitus are obese; and

4 WHEREAS, The National Health and Nutrition Examination Survey indicates  
5 that men in the highest obesity category have more than twice the risk of  
6 hypertension and women in the highest obesity category have four times the risk of  
7 hypertension; and

8 WHEREAS, 1997 statistics reflect that while 22.5% of the State's Caucasian  
9 population are at risk for hypertension, there is a much greater risk affecting 30.2% of  
10 Maryland's African American population (27.8% in Baltimore City and 30.2% in  
11 Baltimore County); and

12 WHEREAS, Maryland ranks in the top third of all states for the prevalence of  
13 diabetes mellitus, which affects 9.6% of the State's African American population  
14 according to 1997 statistics (6.5% in Baltimore City and 19.1% in Baltimore County)  
15 while Maryland's Caucasian population is affected at 4.6%; and

16 WHEREAS, An expert panel convened by the National Heart, Lung and Blood  
17 Institute concluded that an increased risk of diabetes mellitus, hypertension, and  
18 coronary disease is associated with obesity; and

19 WHEREAS, These diseases are also associated with high salt intake, a high fat  
20 diet, stress, and inactivity, conditions that are prevalent among patients in groups  
21 who do not have access to proper nutrition, quality health care, and related treatment  
22 strategies and clinical information regarding the health risks associated with obesity  
23 such as hypertension, diabetes mellitus, and coronary disease as a result of being  
24 uninsured; and

25 WHEREAS, 16.1% of all Americans were uninsured in 1997 and 13.4% of the  
26 population in the State of Maryland, or 496,966 persons, are without health  
27 insurance; and

28 WHEREAS, Without appropriate and consistent delivery of health care services,  
29 these individuals will increase their risks of developing cardiovascular or  
30 endocrinology disease; and

31 WHEREAS, The Department of Health and Mental Hygiene should develop a  
32 cost-effective community-based strategy for delivering health care to these  
33 uninsured patients in the State, who are ineligible for medical assistance through the  
34 CHIPS and Medicaid program, as well as recommending protocols for obesity risk  
35 assessment in this population; and

36 WHEREAS, The Department of Health and Mental Hygiene should partner  
37 with local organizations such as the Baltimore Alliance on Hypertension and  
38 Diabetes, the Maryland Legislative Black Caucus, and the Maryland Health  
39 Foundation to increase awareness and educate patients in the Medicaid and  
40 uninsured populations about the risk factors associated with hypertension, diabetes,

1 and coronary disease such as obesity, poor nutrition, and the need for physical fitness;  
2 and

3 WHEREAS, There is an urgent need for State health care groups and medical  
4 societies to place the prevention of hypertension, diabetes, and coronary disease and  
5 obesity awareness at the top of Maryland's health care agenda; and

6 WHEREAS, Clinical protocols for the treatment of hypertension, diabetes, and  
7 coronary disease should include strategies for the treatment of obesity and the  
8 delivery of health care for obesity, which include but are not limited to behavior  
9 modification and pharmacotherapy; and

10 WHEREAS, This study by the Department of Health and Mental Hygiene of the  
11 interrelationship of major cardiovascular comorbidities and major endocrinology  
12 comorbidities with obesity in order to determine the economics of obesity through an  
13 assessment of its risks and costs for patients enrolled in the Maryland Medicaid  
14 Program is critical to raise public and private sector awareness about hypertension,  
15 diabetes mellitus, and coronary disease and the role of obesity in the risk factors for  
16 these diseases, that through this awareness, the economic costs associated with these  
17 diseases can be reduced, and that innovative treatment protocols for these diseases  
18 will include the management and treatment of medically significant obesity within  
19 the Medicaid population and that at the conclusion of the study, recommendations for  
20 improving the clinical outcomes associated with hypertension, diabetes, and coronary  
21 disease, and strategies for increasing awareness in the State about these conditions  
22 will be reported to the full Legislature prior to the convening of the 2000 Regular  
23 Session; now, therefore, be it

24 RESOLVED BY THE GENERAL ASSEMBLY OF MARYLAND, That the  
25 Department of Health and Mental Hygiene is hereby directed to give priority and  
26 attention to this study of the interrelationship of major cardiovascular comorbidities  
27 and major endocrinology comorbidities with obesity and developing recommendations  
28 in accordance with its focus and objectives regarding awareness strategies, treatment  
29 protocols, and delivery of health care to Medicaid patients and uninsured patients in  
30 the State suffering from a high prevalence of obesity and the resulting elevated  
31 disease risks which are manifested in high rates of hypertension, diabetes mellitus,  
32 and coronary disease among these patients, particularly in the African American  
33 community; and be it further

34 RESOLVED, That a copy of this Resolution be forwarded by the Department of  
35 Legislative Services to the Honorable Parris N. Glendening, Governor of Maryland;  
36 the Honorable Thomas V. Mike Miller, Jr., President of the Senate of Maryland; the  
37 Honorable Casper R. Taylor, Jr., Speaker of the House of Delegates; and to the  
38 Secretary of the Department of Health and Mental Hygiene.