

SENATE BILL 705

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By: **Senators Pugh, Colburn, Exum, Forehand, Muse, and Rosapepe**

Introduced and read first time: February 6, 2009

Assigned to: Finance

A BILL ENTITLED

1 AN ACT concerning

2 **Blue Ribbon Commission on Health Improvement and Disease Prevention**

3 FOR the purpose of establishing a Blue Ribbon Commission on Health Improvement
4 and Disease Prevention; providing for the membership, purpose, chair, staff,
5 and reimbursement of the Commission; requiring the Commission to consider
6 and make recommendations on certain incentives; requiring the Commission to
7 report its findings and recommendations to the Governor and General
8 Assembly; providing for the termination of this Act; and generally relating to a
9 Blue Ribbon Commission on Health Improvement and Disease Prevention.

10 Preamble

11 WHEREAS, In 2007, 62.7% of Maryland respondents to the Centers for Disease
12 Control and Prevention's Behavioral Risk Factor Surveillance Survey were overweight
13 or obese; and

14 WHEREAS, The National Governor's Association's Report on Healthy Living
15 states that "One in three Maryland babies born in 2001 will develop diabetes during
16 their lifetime, or a third of today's first graders will be tomorrow's diabetes patients";
17 and

18 WHEREAS, Based on a study conducted by researchers and economists from
19 Johns Hopkins University and the Centers for Disease Control, Maryland's
20 obesity-attributable medical expenditures were estimated at \$1.53 billion in 2004; and

21 WHEREAS, The Centers for Disease Control and Prevention estimate that
22 health care costs directly associated with inactivity were \$76.6 billion in 2000; and

23 WHEREAS, The federal Medical Expenditure Panel Survey estimates that in
24 2003 it cost \$277 billion to treat cancer, heart disease, hypertension, mental disorders,
25 diabetes, pulmonary conditions, and stroke in noninstitutionalized Americans; and

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.



1 WHEREAS, The Johns Hopkins University Partnership for Solutions in their
2 2004 update to the study “Chronic Conditions: Making the Case for Ongoing Care”
3 found that more than half of all Americans suffer from one or more chronic diseases;
4 and

5 WHEREAS, The New England Journal of Medicine in the 2007 article
6 “Explaining the Decrease in Deaths from Coronary Disease” reported that disease
7 rates have risen dramatically, threatening to cancel out health care gains made over
8 the past decades; and

9 WHEREAS, The Milken Institute 2007 study entitled “An Unhealthy America:
10 The Economic Burden of Chronic Disease” found Maryland to be the 23rd least
11 healthy state, as judged by its State Chronic Disease Index; and

12 WHEREAS, The recent study “Cost Effectiveness of Community-Based
13 Physical Activity Interventions” published in the Journal of Preventive Medicine in
14 December 2008 found that there is clear evidence to link physical inactivity with
15 increased risk of many chronic diseases, including coronary heart disease (CHD),
16 ischemic stroke, type 2 diabetes, breast cancer, and colorectal cancer; and

17 WHEREAS, That same study found the negative health effects of physical
18 inactivity are paralleled by staggering economic consequences resulting in the annual
19 cost directly attributable to inactivity in the U.S. to be an estimated \$24 billion to \$76
20 billion, or 2.4% to 5% of national health care expenditures; and

21 WHEREAS, The Trust for America’s Health in its report “Prevention for a
22 Healthier America” found that an investment of \$10 per person per year in proven
23 community-based programs to increase physical activity, improve nutrition, and
24 prevent smoking could save the country more than \$16 billion annually; and

25 WHEREAS, That same study found that the potential annual net savings and
26 return on investment for Maryland with 5 years of spending \$10 per capita in disease
27 prevention programs would yield \$332 million in savings or a return on investment of
28 6 to 1; now, therefore,

29 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
30 MARYLAND, That:

31 (a) There is a Blue Ribbon Commission on Health Improvement and Disease
32 Prevention.

33 (b) The purpose of the Commission is to consider incentives to help State
34 residents improve their health and mitigate their risk of debilitating disease.

35 (c) The Commission consists of the following members:

1 (1) two members of the Senate of Maryland, appointed by the
2 President of the Senate;

3 (2) two members of the House of Delegates, appointed by the Speaker
4 of the House; and

5 (3) one member appointed by the Governor.

6 (d) The Commission shall elect a chair from among its members.

7 (e) The Department of Health and Mental Hygiene shall provide staff for the
8 Commission.

9 (f) A member of the Commission:

10 (1) may not receive compensation as a member of the Commission; but

11 (2) is entitled to reimbursement for expenses under the Standard
12 State Travel Regulations, as provided in the State budget.

13 (g) The Commission shall consider and make recommendations on incentives
14 to:

15 (1) combat childhood obesity, including a tax deduction for parents of
16 children participating in a qualified program designed to combat childhood obesity;

17 (2) reduce smoking and tobacco use, including a tax deduction for
18 participants in qualified smoking and tobacco cessation programs;

19 (3) promote senior fitness and wellness, including a tax deduction for
20 seniors with qualified fitness and wellness expenses;

21 (4) promote adult physical activity, including a tax deduction for
22 qualified physical fitness expenses, such as exercise equipment and participation in a
23 health and physical fitness program; and

24 (5) promote healthy weight loss, including a tax deduction for
25 participation in qualified weight loss programs.

26 (h) The Commission shall also consider and make recommendations on how
27 incentives can create a sense of personal responsibility for improving health and
28 promote a climate for a healthy Maryland.

29 (i) On or before December 1, 2009, the Commission shall report its findings
30 and recommendations to the Governor and, in accordance with § 2-1246 of the State
31 Government Article, the General Assembly.

1 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect
2 July 1, 2009. It shall remain effective for a period of 1 year and, at the end of June 30,
3 2010, with no further action required by the General Assembly, this Act shall be
4 abrogated and of no further force and effect.