Regular Session, 2001

ACT No. 616

HOUSE BILL NO. 1349

BY REPRESENTATIVE PRATT AND SENATOR BAJOIE

AN ACT

To amend and reenact R.S. 46:2611, 2612, and 2613(A), (C), (D), and (E), relative to the Louisiana Council on Obesity; to provide for its continuation; to provide for its powers, functions, and duties; to provide relative to its members, meetings, and report; and to provide for related matters.

Be it enacted by the Legislature of Louisiana:

Section 1. R.S. 46:2611, 2612, and 2613(A), (C), (D), and (E) are hereby amended and reenacted to read as follows:

§2611. Louisiana Council on Obesity Prevention and Management; creation; funding

The legislature hereby creates the Louisiana Council on Obesity Prevention and Management, hereinafter referred to as the "council" within the Department of Health and Hospitals, to be in existence for the period from August 1, 1999 to March 31, 2001. The legislature shall make appropriations as needed to finance the operations of the council. In addition, the council may accept and expend grants and private donations from any source, including federal, state, public, and private entities, to assist it to carry out its functions.

§2612. Powers, functions, and duties

The powers, functions, and duties of the council shall include but not be limited to the following:

Page 1 of 6

CODING: Words in struck through type are deletions from existing law; words underscored are additions.

(1) The collection and analysis of data regarding the extent to which children and adults in Louisiana suffer from obesity, and the programs and services currently available to meet the needs of overweight children and adults, and the funds dedicated by the state to maintain such programs and services.

- (2) The collection and analysis of data to demonstrate the economic impact on the state of treating obesity-related diseases and the estimated cost savings of implementing a comprehensive statewide obesity prevention and management model.
- (3) The establishment and maintenance of a resource databank containing information about obesity and related subjects accessible to educational and research institutions, as well as members of the general public.
- (4) Consideration of the feasibility of awarding tax incentives for work sites which promote activities to reduce obesity in the work force.
- (5) The establishment of recommendations to enhance funding for effective prevention and management programs and services, including Medicaid, private health insurance programs, and other state and federal funds.
- (6) The establishment of recommendations designed to assure that children of school age who may have early indicators of obesity have access to affordable, effective prevention and management services.
- (7) The establishment of recommendations for changes to statewide elementary and secondary education curricula to implement

comprehensive, coordinated obesity awareness and education programs.

- (8) Recommendations to enhance clinical education curricula in medical, nursing, and other schools of higher education to implement comprehensive, coordinated obesity awareness and education courses.
- (9) Recommendations to increase education and awareness among primary care physicians and other health professionals regarding the recognition of obesity as a disease, and effective prevention and management.
- (10) Consideration of a state prevention campaign to increase public awareness of the need for early prevention and management of obesity, possibly including:
- (a) A broad-based public education campaign outlining health risks associated with failure to receive treatment for obesity.
 - (b) A health professional training campaign.
- (c) A targeted public education campaign directed toward high risk populations.
- (11) Coordination with the U.S. Center for Disease Control, the National Center for Chronic Disease Prevention, the U.S. Department of Agriculture, the U.S. Department of Health and Human Services, and the U.S. Department of Education to share resources and information in order to ensure a comprehensive approach to the disease of obesity and obesity-related conditions.
- (12) Coordination with the state Departments of Education,
 Labor, Health and Hospitals, and Social Services to share resources and

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information in order to ensure a comprehensive approach to the disease of obesity and obesity-related conditions.

- (13) Identification of and recommendations to reduce cultural, environmental, and socioeconomic barriers to prevention and management of obesity in Louisiana.
- (1) Advising the secretary of the Department of Health and Hospitals as to the implementation of the council's recommendations.
- (2) Assisting the secretary of the Department of Health and Hospitals in achieving programmatic goals. To this end, the council shall provide leadership and support for:
- (a) Organizational efforts found necessary to achieve programmatic objectives.
- (b) Articulating standards through the dissemination of materials, identification of expert opinion, identification of alternate means of developing effective population-based programs, and development of policy in identified health risk.
- (c) Creating awareness of health risks due to overweight and obesity conditions among payers, providers, and patients.
- (d) Enhancing reporting mechanisms of latest outcomes and health trends in the area of overweight and obesity concerns.
 - (e) Conducting evaluations of program effectiveness.
- (f) Encouragement of research and the identification of resources, which seek ways to promote cost-effective methods of treating overweight and obesity concerns.
- (3) Assisting in conducting exploratory research as deemed necessary with the intent of achieving programmatic objectives.

Page 4 of 6

(4) Ensuring that the policy direction on obesity issues is integrated with goals established in Healthy People 2010.

- (5) Advising and assisting participating agencies with the development and implementation of obesity programs.
- §2613. Members; meetings; final report

A. The council shall convene for its first meeting no later than October 1, 1999. August thirty-first in each state fiscal year. At the first meeting each year the executive director, chairman, and vice chairman of the council shall be appointed by the secretary of the Department of Health and Hospitals with the consultation and approval of the council. The council shall have a staff of two persons to assist in administering the business of the council. The council may adopt such rules of procedure as are necessary to facilitate orderly conduct of its business.

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C. All members shall serve without compensation, except that the executive director of the council and the two staff members shall receive a salary to be determined by the secretary of the Department of Health and Hospitals, with the consultation and approval of the council, and all All council members shall receive reimbursement for travel related to council business, all to be paid out of funds appropriated to the council for such purpose.

D. The council shall meet at least quarterly. Meetings shall also be held on call of the chairman or at the request of at least three members of the council. Presence of a majority of the members of the council shall constitute a quorum.

Page 5 of 6

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E. The council shall submit a an annual report, including proposed legislation if necessary, to the governor and to the House and Senate Health and Welfare Committees, thirty days prior to the convening of the 2001 regular legislative session. Such report shall include a comprehensive state plan for update the legislature on the council's progress toward full implementation of services and programs in the state of Louisiana to increase prevention and management of the disease of obesity in adults and children and an estimate of the cost of implementation of such a plan.

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	SPEAKER OF THE HOUSE OF REPRESENTATIVES
	PRESIDENT OF THE SENATE
	GOVERNOR OF THE STATE OF LOUISIANA
APPROVED:	