Washington State House of Representatives Office of Program Research

BILL ANALYSIS

Health Care & Wellness Committee

SSB 6124

Brief Description: Developing a state Alzheimer's plan.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Keiser, Dammeier, Hargrove, Ranker, McCoy, Hasegawa, Conway, Darneille, McAuliffe, Cleveland, Billig, Rolfes, Nelson, Mullet, Fraser, Frockt, Eide, Kohl-Welles, Kline, Hobbs, Pedersen, Hatfield, Parlette, Roach and Becker).

Brief Summary of Substitute Bill

• Creates an Alzheimer's disease working group to develop a state Alzheimer's plan.

Hearing Date: 2/24/14

Staff: Chris Blake (786-7392).

Background:

Alzheimer's disease is a form of dementia that affects parts of the brain that control thought, memory, language, and functional status. Alzheimer's disease is an irreversible, progressive brain disease that results in death of the individual. In more than 90 percent of people with Alzheimer's disease, symptoms do not appear until after age 60. The causes of Alzheimer's disease are not known, but are believed to be associated with a combination of genetic, environmental, and lifestyle factors.

The United States Centers for Disease Control and Prevention estimates that approximately 5.6 million Americans have Alzheimer's disease. Nationally, it is the sixth leading cause of death for American adults. In 2012 Alzheimer's disease was the third most common cause of death in Washington, accounting for over 6 percent of all deaths in the state.

Summary of Bill:

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This analysis was prepared by non-partisan legislative staff for the use of legislative members in their deliberations. This analysis is not a part of the legislation nor does it constitute a statement of legislative intent.

The Department of Social and Health Services (DSHS) must convene an Alzheimer's disease working group. The working group must develop a state Alzheimer's plan. The working group must examine the needs of individuals diagnosed with Alzheimer's, the services available to meet those needs, and the capacity of the state and providers to meet those needs. The working group must adopt recommendations and findings related to:

- trends in the state's Alzheimer's population and service needs, including the state's role in long-term care, family caregiver support, and assistance to persons with Alzheimer's disease; state policy regarding persons with Alzheimer's disease and dementia; and estimates of current and future impacts of Alzheimer's disease in Washington;
- existing resources, services, and capacity, including types, costs, and availability of
 dementia services; dementia-specific training requirements for long-term care staff;
 quality measures for long-term care facilities; availability of home and community-based
 resources for person's with Alzheimer's disease; availability of dementia units; adequacy
 of geriatric psychiatric units; assisted living residential options for persons with
 dementia; and state support of Alzheimer's disease research; and
- needed policies or responses, including promoting the early detection of Alzheimer's disease and dementia, coordinated services and supports, the capacity to meet needs, and strategies to identify gaps in services.

The working group consists of:

- unpaid and professional caregivers of persons who have been diagnosed with Alzheimer's disease:
- individual provider caregivers of persons who have been diagnosed with Alzheimer's disease:
- persons who have been diagnosed with Alzheimer's disease;
- representatives of nursing homes, assisted living facilities, and adult family homes;
- a representative of home care agencies that care for persons with Alzheimer's disease;
- a representative of adult day services;
- a health care professional who treats people with Alzheimer's disease;
- a psychologist who specializes in dementia care;
- a person who conducts research on Alzheimer's disease;
- representatives of the Alzheimer's Association and the Alzheimer Society of Washington;
- Executive branch representatives from the Governor's Office, DSHS, the Department of Health, the Health Care Authority, and the Department of Veterans Affairs;
- the Long-Term Care Ombuds;
- members of the House and Senate committees with jurisdiction over health care issues;
- five health policy advocates;
- representatives of the University of Washington's Alzheimer's Disease Research Center;
 and
- a person with experience in elder law or guardianship issues.

The DSHS must submit a report of the working group's findings and recommendations, including any draft legislation required to implement the recommendations, to the Governor and the Legislature by January 1, 2016.

Appropriation: None.

Fiscal Note: Available.

Effective Date: The bill takes effect 90 days after adjournment of the session in which the bill is passed.

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