

# SENATE BILL REPORT

## SHB 1646

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As Passed Senate - Amended, February 25, 2022

**Title:** An act relating to continuing the work of the dementia action collaborative.

**Brief Description:** Continuing the work of the dementia action collaborative.

**Sponsors:** House Committee on Health Care & Wellness (originally sponsored by Representatives Bateman, Harris, Leavitt, Walen, Dolan, Bronoske, Callan, Eslick, Goodman, Macri, Simmons, Tharinger, Kloba, Stonier, Davis, Riccelli and Ormsby).

**Brief History:** Passed House: 1/26/22, 97-0.

**Committee Activity:** Health & Long Term Care: 2/16/22, 2/18/22 [DPA].

**Floor Activity:** Passed Senate - Amended: 2/25/22, 49-0.

### Brief Summary of Bill (As Amended by Senate)

- Codifies the Dementia Action Collaborative to assess the current and future impact of Alzheimer's disease and other dementias on Washington residents and to update the Washington State Alzheimer's Plan.

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## SENATE COMMITTEE ON HEALTH & LONG TERM CARE

**Majority Report:** Do pass as amended.

Signed by Senators Cleveland, Chair; Frockt, Vice Chair; Muzzall, Ranking Member; Conway, Keiser, Padden, Randall, Rivers, Robinson, Sefzik and Van De Wege.

**Staff:** LeighBeth Merrick (786-7445)

**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

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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 part of the legislation nor does it constitute a statement of legislative intent.*

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. There are about 126,000 people living with Alzheimer's or other dementia in Washington State.

In 2014, the Legislature directed the Department of Social and Health Services (DSHS) to convene an Alzheimer's disease working group (working group) to develop a state Alzheimer's plan. In 2016, the working group renamed themselves the Dementia Action Collaborative (DAC) and released the "Washington State Plan to Address Alzheimer's Disease and Other Dementias" (Plan). The Plan includes information about trends in Alzheimer's disease and other dementias in Washington and identifies seven goals to address Alzheimer's disease in Washington. The seven goals relate to:

- public awareness;
- preparation for growth in the dementia population;
- the well-being of people living with dementia and their families and caregivers;
- access to comprehensive supports for family caregivers;
- early identification of dementia and provision of dementia-capable, evidence-based health care;
- the availability of dementia-capable long-term services and supports in the setting of choice; and
- innovation and research related to the causes of and interventions for dementia.

**Summary of Amended Bill:** DAC is established to assess the current and future impact of Alzheimer's disease and other dementias on Washington residents. Specifically, it must examine progress in implementing the Plan, adopted in 2016, assess available services and resources for persons with Alzheimer's disease and other dementias and their families and caregivers, examine strategies to rectify disparate effects of Alzheimer's disease and other dementias on people of color, and develop a strategy for a state response to this public health crisis.

DAC must also review and revise the Plan. The revisions must evaluate and address:

- population trends related to Alzheimer's disease and other dementias, including demographic information related to Washington residents living with Alzheimer's disease and other dementias and disparities in the prevalence of Alzheimer's disease and other dementias between different racial and ethnic populations; and
- existing services, resources, and health care system capacity, including the types, cost, and availability of dementia services; dementia-specific training requirements; public safety and law enforcement needs for responding to persons with Alzheimer's disease and other dementias; the availability of home and community-based resources; the availability of long-term dementia care beds; state funding and Alzheimer's disease research; and advances in knowledge regarding brain health, dementia, and risk reduction related to Alzheimer's disease and other dementias.

DAC must submit an updated Plan to the Governor and the Legislature by October 2023,

and provide annual updates.

The Governor must, at a minimum, appoint members of DAC who include:

- a representative of the Governor's Office;
- a representative and an alternate from the Aging and Long-Term Support Administration at DSHS;
- a representative and an alternate from the Developmental Disabilities Administration at DSHS;
- a representative and an alternate from the Department of Health;
- a representative and an alternate from the Health Care Authority;
- a representative and an alternate from the Office of the State Long-Term Care Ombuds;
- at least one person with Alzheimer's disease or another dementia;
- a caregiver of a person with Alzheimer's disease or another dementia;
- a representative of the University of Washington's Memory and Brain Wellness Center;
- a representative of an organization representing area agencies on aging;
- a representative of an association representing long-term care facilities in Washington;
- a representative of an association representing physicians in Washington;
- a representative of a Washington-based organization of volunteers, family, and friends of those affected by Alzheimer's disease and other dementias;
- a representative of an Alzheimer's advocacy organization;
- an attorney who specializes in elder law;
- an Alzheimer's disease researcher;
- a representative of an organization representing emergency medical service providers in Washington;
- an expert in workforce development;
- a representative of the Washington State Council on Aging;
- a representative of the Governor's Office of Indian Affairs;
- a licensed behavioral health provider with expertise in Alzheimer's disease and other dementias;
- a representative of a health care organization that primarily serves people of color; and
- a nurse with expertise in serving individuals with Alzheimer's disease or other dementias.

DAC must be co-chaired by the Secretary of DSHS, or the Secretary's designee, and either the member representing an Alzheimer's disease advocacy organization or the member representing the Washington-based organization of volunteers, family, and friends of those affected by Alzheimer's disease and other dementias. The Secretary of DSHS must convene DAC and submit reports, and DSHS must provide administrative support.

**Appropriation:** None.

**Fiscal Note:** Available.

**Creates Committee/Commission/Task Force that includes Legislative members:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony on Substitute House Bill:** *The committee recommended a different version of the bill than what was heard.* PRO: In 2014, the Legislature directed DSHS to establish the Alzheimer's state plan because Alzheimer's and dementia were hidden diseases, leaving people with dementia and their families feeling isolated and like there was no-where to turn. Resources for individuals and family members facing dementia were not readily available and navigating care can be extremely challenging for family members. The Plan created by the DAC and the resources they have made available have been extremely helpful. The road map developed by the DAC has been critical in helping family members navigate care in today's world and the legal planning tool kit allows families facing a new diagnosis to be informed. The DAC is largely a group of volunteers and with the plan five years old, it is time we make the DAC a more formal and effective function of our state and update the plan. This bill builds a strong supportive future for people affected by dementia and lays out specific issues for the DAC to address. The DAC must continue its work with an eye on gaps of services and equity. The requirement for the DAC to report annually will strengthen the work. We request a sunset be added to the bill to address a procedural issue with the Governor's appointment process. This will ensure the DAC is able to retain its current members.

**Persons Testifying:** PRO: Brad Forbes, Alzheimer's Association; Bryan Haakenson.

**Persons Signed In To Testify But Not Testifying:** No one.