

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HM 1045 Federal Funding for Alzheimer's Disease Research

SPONSOR(S): Kelly and others

TIED BILLS: **IDEN./SIM. BILLS:** SM 2662

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) <u>Committee on Healthy Seniors</u>	<u>6 Y, 0 N</u>	<u>Ciccone</u>	<u>Ciccone</u>
2) <u>Healthcare Council</u>	<u></u>	<u></u>	<u></u>
3) <u>Rules & Calendar Council</u>	<u></u>	<u></u>	<u></u>
4) <u></u>	<u></u>	<u></u>	<u></u>
5) <u></u>	<u></u>	<u></u>	<u></u>

SUMMARY ANALYSIS

House Memorial 1045 requests that Congress increase federal financial assistance for Alzheimer's disease research by \$360 million during fiscal year 2008-2009.

The legislation directs that copies of the memorial are to be sent to the President of the United States, the President of the United States Senate, the Speaker of the United States House of Representatives, and to each member of the Florida delegation to the United States Congress.

The memorial has no direct fiscal impact on state funds.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Empower families – Increased federal funding for Alzheimer’s disease research would assist present and future individuals who are affected by this disease to benefit from Alzheimer’s research and related health care services.

B. EFFECT OF PROPOSED CHANGES:

Present Situation

Alzheimer’s Disease Initiative¹

In 1985, the Alzheimer’s Disease Initiative (ADI) was established to provide a continuum of services to individuals with Alzheimer’s disease and similar memory disorders, and their families. The Department of Elder Affairs (DOEA, or “the department”) is the lead agency in this initiative, and coordinates and develops policies to carry out the statutory requirements. The Alzheimer’s Disease Advisory Committee, created in Section 403.501, F.S., advises the department in this effort.

Alzheimer’s Disease Advisory Committee²

The Alzheimer’s Disease Advisory Committee consists of ten members, appointed by the Governor, whose duties include advising the department regarding legislative, programmatic, and administrative matters relating to Alzheimer’s disease individuals and their caretakers. The Alzheimer’s Disease Initiative program includes four components:

- Respite Caregiver Support: Alzheimer’s respite care programs are established in all of Florida’s 67 counties; many counties have multiple service sites. Alzheimer’s Support Groups allow caregivers the opportunity to come together to share their feelings and experiences, learn how to manage stressful situations and improve care giving skills.
- Memory Disorder Clinics: These clinics are mandated by statute to provide comprehensive assessments, diagnostic services, and treatment to individuals who exhibit symptoms of Alzheimer’s disease and related memory disorders. These clinics also develop training programs and disease-related materials and conduct training for caregivers, respite service providers and health care professionals.
- Model Day Care Programs: These programs have been established in conjunction with memory disorder clinics to test therapeutic models of care and provide day care services for individuals with Alzheimer’s disease. Alzheimer’s patients congregate for the day, socialize with each other, and receive therapeutic interventions designed to maintain or improve their cognitive functioning.
- The Florida Alzheimer’s Disease Brain Bank: The brain bank is a service and research oriented network of statewide regional sites. The intent of the brain bank program is to study brains of persons clinically diagnosed with dementia and provide tissue for research after their deaths. Mt. Sinai Medical Center contracts with the state to operate the primary brain bank. Coordinators at regional brain bank sites in Melbourne, Orlando, Tampa and Pensacola assist in recruiting participants and act as liaisons between the brain bank and participants’ families. Families of Alzheimer’s victims obtain two significant service benefits from the brain bank:

¹ <http://elderaffairs.state.fl.us/english/alzheimers.html>

² S. 430.503(1), F.S., reads “Sections 403.501-504, F.S. may be cited as the ‘Alzheimer’s Disease initiative.’”

1. A diagnostic confirmation of the disease written in clear, understandable terms; and
2. Involvement in variable research activities both inside and outside of Florida.

Memory Disorder Clinics

There are 15 memory disorder clinics in Florida.³ These clinics are mandated by statute to provide comprehensive assessments, diagnostic services, and treatment to individuals who exhibit symptoms of Alzheimer's disease and related memory disorders. These clinics also develop training programs and disease-related materials, and conduct training for caregivers, respite service providers and health care professions in the care of persons with Alzheimer's disease and related memory disorders. Currently, Florida funds 13 of the 15 memory disorder clinics at \$246,692.⁴

Memory Disorder Clinics are responsible for conducting applied research that is service-related and selected in conjunction with the department. Clinics are established at medical schools, teaching hospitals, and public and private not-for-private hospitals in Florida. The following is a list of memory disorder clinics:

- Boca Raton, Florida Atlantic University
- Clearwater, Morton Plant
- Deerfield Beach, N. Broward Medical Center
- Fort Myers, Lee Memorial Health System
- Gainesville, University of Florida, McKnight Brain Institute
- Jacksonville, Mayo Clinic Jacksonville
- Melbourne, East Central Florida
- Miami, University of Miami
- Miami Beach, The Wien Center, Mt. Sinai Medical Center
- Orlando, Orlando Regional
- Pensacola, West Florida Hospital
- Sarasota, Sarasota Memorial Hospital
- Tallahassee, Tallahassee Memorial Healthcare Neuroscience Center
- Tampa, University of South Florida
- West Palm Beach, Tenet at St. Mary's Medical Center

Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute

Section 1004.445, F. S., establishes the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute at the University of South Florida. The institute was created to conduct and support research, provide institutional research grants and investigator-initiated research grants, develop and operate integrated data projects and provide assistance to statutorily designated memory disorder clinics.

³ S. 430.502, F.S.

⁴ Department of Elder Affairs Analysis, March 5, 2008, on file with the committee.

Medicaid Home and Community Based Waiver

The department operates Medicaid Waiver programs in partnership with the Agency for Health Care Administration (AHCA), Florida's designated Medicaid agency. Medicaid Waiver programs are administered through contracts with area agencies on aging and local service providers to provide alternative, less restrictive long-term care options for elders who qualify for skilled nursing-home care. These options include care in the home, or in a community setting such as an assisted living facility or adult day care center rather than in an institutional setting such as a skilled nursing facility.⁵

In November 2003, the Florida Medicaid Program submitted a 1915(b)(4) and a 1915(c) waiver application to the federal Centers for Medicare and Medicaid Services (CMS) and received approval in 2004. The department and AHCA are statutorily charged with the implementation of this waiver,⁶ the purpose of which is to provide specialized services designed to maintain persons with Alzheimer's disease in the community as long as possible by providing home and community based support services. Pending legislative action, this waiver is scheduled to expire at the close of the 2008 Legislative Session.

The Medicaid Alzheimer's disease waiver program serves persons age 60 and over who have a specific diagnosis of Alzheimer's disease (no other dementias qualify) and who have a live-in caregiver. Eligible waiver participants must be diagnosed with Alzheimer's disease by a physician, as confirmed by a Memory Disorder Clinic, a board certified neurologist, or a licensed medical doctor with experience in neurology. Eligible participants must also meet the nursing home level-of-care criteria as assessed by the DOEA's Comprehensive Assessment Review and Evaluation Services (CARES) unit. Persons already living in a nursing home or an intermediate care facility for individuals with mental retardation, the medically needy, and those persons receiving services through another Medicaid home and community-based waiver program are ineligible for participation in the Medicaid Alzheimer's disease waiver program.⁷

The authorized services delivered through the Medicaid Alzheimer's disease waiver program include:

- Case management;
- Adult day care;
- Respite care;
- Wanderer alarm systems;
- Wanderer identification and location programs;
- Caregiver training;
- Behavioral assessment and intervention;
- Incontinence supplies;
- Personal care assistance;
- Environmental modifications; and,
- Pharmacy review.

The Medicaid Alzheimer's disease waiver program was implemented in three areas of the state: Miami-Dade/Broward, Palm Beach, and Pinellas counties. AHCA and DOEA selected vendors through a competitive bid process. Each vendor, in turn, was contracted to develop a network of service providers to deliver direct waiver services consistent with those listed above. Vendors are also responsible for:

⁵ Department of Elder Affairs, *Summary of Programs & Services, 2007*

⁶ S. 403.502 (7) (8) (9), F.S.

⁷ Department of Elder Affairs Analysis dated March 5, 2008, on file with the committee.

- Assisting with screening, assessing and enrolling eligible participants;
- Planning and implementing services as recipients' conditions decline;
- Coordinating the discharge of program participants to appropriate settings;
- Documenting successful interventions to disseminate to other practitioners; and
- Assisting the state Medicaid program to evaluate the program to determine implementing in other areas.

Effect of Proposed Change

House Memorial 1045 encourages Congress to increase federal financial assistance for Alzheimer's disease research by \$360 million during fiscal year 2008-2009.

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The memorial has no direct fiscal impact on state funds.

C. SECTION DIRECTORY:

Not applicable

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:
None.

D. FISCAL COMMENTS:
None.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:
Not applicable.

2. Other:
None.

B. RULE-MAKING AUTHORITY:
Not applicable

C. DRAFTING ISSUES OR OTHER COMMENTS:
None.

D. STATEMENT OF THE SPONSOR
No statement submitted.

IV. AMENDMENTS/COUNCIL SUBSTITUTE CHANGES