

1                   A bill to be entitled  
2           An act relating to Alzheimer's disease; creating s.  
3           430.5025, F.S.; directing the Department of Elderly  
4           Affairs to develop and implement a public education  
5           program relating to screening for Alzheimer's disease;  
6           providing criteria for awarding grants; providing a  
7           definition; requiring grant recipients to submit an  
8           evaluation of certain activities to the department;  
9           authorizing the department to provide technical support;  
10          requiring an annual report to the Legislature; requiring  
11          the department to conduct or support a study on memory  
12          impairment screening; requiring a report to the  
13          Legislature; providing for implementation of the public  
14          education program to operate within existing resources of  
15          the department; providing that implementation of the  
16          memory impairment screening grant program is contingent  
17          upon an appropriation of state funds or the availability  
18          of private resources; providing for implementation of the  
19          screening study on memory impairment to operate within  
20          existing resources of the department; amending s.  
21          400.1755, F.S.; specifying the types of facilities where  
22          an employee or direct caregiver of an assisted living  
23          facility may begin employment without repeating certain  
24          training requirements; amending s. 400.6045, F.S.;  
25          requiring direct caregivers to comply with certain  
26          continuing education requirements; amending s. 429.178,  
27          F.S.; specifying the types of facilities where an employee  
28          or direct caregiver of an assisted living facility may

29 |       begin employment without repeating certain training  
30 |       requirements; providing an effective date.

31 |  
32 |       WHEREAS, Alzheimer's disease, a slow, progressive disorder  
33 | of the brain which results in loss of memory and other cognitive  
34 | functions, is the eighth leading cause of death in the United  
35 | States, and currently affects an estimated 5 million Americans,  
36 | with that number expected to increase to 16 million by mid-  
37 | century, and

38 |       WHEREAS, Alzheimer's disease strikes approximately 1 in 10  
39 | people over age 65 and nearly half of those who are age 85 or  
40 | older, although some people develop symptoms as young as age 40,  
41 | and

42 |       WHEREAS, Alzheimer's disease takes an enormous toll on  
43 | family members who are the caregivers for individuals who have  
44 | the disease, and

45 |       WHEREAS, caregivers for individuals who have Alzheimer's  
46 | disease suffer more stress, depression, and health problems than  
47 | caregivers for individuals who have other illnesses, and

48 |       WHEREAS, Alzheimer's disease costs United States businesses  
49 | more than \$60 billion annually due to lost productivity and  
50 | absenteeism by primary caregivers and increased insurance costs,  
51 | and

52 |       WHEREAS, recent advancements in scientific research have  
53 | demonstrated the benefits of early medical treatment for persons  
54 | who have Alzheimer's disease and the benefits of early access to  
55 | counseling and other support services for their caregivers, and

56 |       WHEREAS, research shows that several medications have been

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57 developed which can reduce the symptoms of Alzheimer's disease,  
58 that persons begin to benefit most when these medications are  
59 taken in the early stages of a memory disorder, and that this  
60 intervention may extend the period during which patients can be  
61 cared for at home, thereby significantly reducing the costs of  
62 institutional care, and

63 WHEREAS, with early diagnosis, patients can participate in  
64 decisions regarding their care and their families can take  
65 advantage of support services that can reduce caregiver  
66 depression and related health problems, and

67 WHEREAS, in direct response to research breakthroughs,  
68 National Memory Screening Day was established as a collaborative  
69 effort by organizations and health care professionals across the  
70 country to promote awareness and early detection of memory  
71 impairment, and

72 WHEREAS, on National Memory Screening Day, which is held on  
73 the third Tuesday of November in recognition of National  
74 Alzheimer's Disease Month, health care professionals administer  
75 free memory screenings at hundreds of sites throughout the  
76 United States, and

77 WHEREAS, memory screening is used as an indicator of  
78 whether a person might benefit from more extensive testing to  
79 determine whether a memory or cognitive impairment exists and  
80 identifies persons who may benefit from medical attention but is  
81 not used to diagnose any illness and in no way replaces  
82 examination by a qualified physician, NOW, THEREFORE,

83

84 Be It Enacted by the Legislature of the State of Florida:

85  
86 Section 1. Section 430.5025, Florida Statutes, is created  
87 to read:

88 430.5025 Memory impairment screening; grant program.--

89 (1) The Department of Elderly Affairs shall develop and  
90 implement a public education program relating to screening for  
91 memory impairment and the importance of early diagnosis and  
92 treatment of Alzheimer's disease and related disorders.

93 (2) The department may award grants to qualifying entities  
94 to support the development, expansion, or operation of programs  
95 that provide:

96 (a) Information and education on the importance of memory  
97 screening for early diagnosis and treatment of Alzheimer's  
98 disease and related disorders.

99 (b) Screenings for memory impairment.

100 (3) As used in this section, the term "qualifying  
101 entities" means public and nonprofit private entities that  
102 provide services and care to individuals who have Alzheimer's  
103 disease or related disorders and their caregivers and families.

104 (4) When awarding grants under this section, the  
105 department shall give preference to applicants that:

106 (a) Have demonstrated experience in promoting public  
107 education and awareness of the importance of memory screening or  
108 providing memory screening services.

109 (b) Have established arrangements with health care  
110 providers and other organizations to provide screenings for  
111 memory impairment in a manner that is convenient to individuals  
112 in the communities served by the applicants.

113 (c) Provide matching funds.

114 (5) A qualifying entity that receives a grant under this  
115 section shall submit to the department an evaluation that  
116 describes activities carried out with funds received under this  
117 section, the long-term effectiveness of such activities in  
118 promoting early detection of memory impairment, and any other  
119 information that the department requires.

120 (6) The department may set aside an amount not to exceed  
121 15 percent of the total amount appropriated to the memory  
122 impairment screening grant program for the fiscal year to  
123 provide grantees with technical support in the development,  
124 implementation, and evaluation of memory impairment screening  
125 programs.

126 (7) A grant may be awarded under subsection (2) only if an  
127 application for the grant is submitted to the department and the  
128 application is in the form, is made in the manner, and contains  
129 the agreements, assurances, and information that the department  
130 determines are necessary to carry out the purposes of this  
131 section.

132 (8) The department shall annually submit to the President  
133 of the Senate and the Speaker of the House of Representatives a  
134 report on the activities carried out under this section,  
135 including provisions describing the extent to which the  
136 activities have affected the rate of screening for memory  
137 impairment and have improved outcomes for patients and  
138 caregivers.

139 Section 2. Study on screening for memory impairment.--

140 (1) The Department of Elderly Affairs shall conduct or

141 provide support for a study on screening for memory impairment.  
142 The study shall analyze scientific evidence regarding techniques  
143 for memory screening, assess the availability of memory  
144 screening on a nationwide basis, and identify strategies to  
145 expand memory screening services through public-private  
146 partnerships to improve outcomes for patients and caregivers.

147 (2) The department shall, not later than 12 months after  
148 this section becomes law, prepare and submit to the relevant  
149 substantive committees of the Senate and the House of  
150 Representatives a report that describes the results of the study  
151 conducted under this section. The report shall include specific  
152 recommendations to increase awareness of the importance of early  
153 detection of memory impairment and to improve access to memory  
154 screening services nationwide by supporting and expanding  
155 existing memory screening efforts in the private sector.

156 Section 3. Implementation.--

157 (1) Implementation of the public education program created  
158 under s. 430.5025, Florida Statutes, shall operate within  
159 existing resources of the Department of Elderly Affairs.

160 (2) Implementation of the memory impairment screening  
161 grant program created under s. 430.5025, Florida Statutes, is  
162 contingent upon appropriation of state funds or the availability  
163 of private resources.

164 (3) Implementation of the study on screening for memory  
165 impairment created under section 2 shall operate within existing  
166 resources of the Department of Elderly Affairs.

167 Section 4. Subsection (6) of section 400.1755, Florida  
168 Statutes, is amended to read:

169 400.1755 Care for persons with Alzheimer's disease or  
 170 related disorders.--

171 (6) Upon completing any training listed in this section,  
 172 the employee or direct caregiver shall be issued a certificate  
 173 that includes the name of the training provider, the topic  
 174 covered, and the date and signature of the training provider.  
 175 The certificate is evidence of completion of training in the  
 176 identified topic, and the employee or direct caregiver is not  
 177 required to repeat training in that topic if the employee or  
 178 direct caregiver changes employment to a different facility or  
 179 to an assisted living facility, home health agency, adult day  
 180 care center, or hospice ~~adult family care home~~. The direct  
 181 caregiver must comply with other applicable continuing education  
 182 requirements.

183 Section 5. Paragraph (h) of subsection (1) of section  
 184 400.6045, Florida Statutes, is amended to read:

185 400.6045 Patients with Alzheimer's disease or other  
 186 related disorders; staff training requirements; certain  
 187 disclosures.--

188 (1) A hospice licensed under this part must provide the  
 189 following staff training:

190 (h) Upon completing any training described in this  
 191 section, the employee or direct caregiver shall be issued a  
 192 certificate that includes the name of the training provider, the  
 193 topic covered, and the date and signature of the training  
 194 provider. The certificate is evidence of completion of training  
 195 in the identified topic, and the employee or direct caregiver is  
 196 not required to repeat training in that topic if the employee or

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197 direct caregiver changes employment to a different hospice or to  
198 a home health agency, assisted living facility, nursing home, or  
199 adult day care center. The direct caregiver must comply with  
200 other applicable continuing education requirements.

201 Section 6. Subsection (4) of section 429.178, Florida  
202 Statutes, is amended to read:

203 429.178 Special care for persons with Alzheimer's disease  
204 or other related disorders.--

205 (4) Upon completing any training listed in subsection (2),  
206 the employee or direct caregiver shall be issued a certificate  
207 that includes the name of the training provider, the topic  
208 covered, and the date and signature of the training provider.  
209 The certificate is evidence of completion of training in the  
210 identified topic, and the employee or direct caregiver is not  
211 required to repeat training in that topic if the employee or  
212 direct caregiver changes employment to a different assisted  
213 living facility or nursing home, hospice, adult day care center,  
214 or home health agency ~~facility~~. The employee or direct caregiver  
215 must comply with other applicable continuing education  
216 requirements.

217 Section 7. This act shall take effect July 1, 2009.