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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
02/09/2012	.	
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The Committee on Budget Subcommittee on Health and Human Services Appropriations (Richter) recommended the following:

**Senate Amendment**

Delete lines 122 - 184  
and insert:

(b) Assess the current and future impact of Alzheimer's disease and related forms of dementia on the state.

(c) Examine the existing industries, services, and resources addressing the needs of persons having Alzheimer's disease or a related form of dementia and their family caregivers.

(d) Examine the needs of persons of all cultural backgrounds having Alzheimer's disease or a related form of



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13 dementia and how their lives are affected by the disease from  
14 younger-onset, through mid-stage, to late-stage.

15 (e) Develop a strategy to mobilize a state response to this  
16 public health crisis.

17 (f) Provide information regarding:

18 1. State trends with respect to persons having Alzheimer's  
19 disease or a related form of dementia and their needs,  
20 including, but not limited to:

21 a. The role of the state in providing community-based care,  
22 long-term care, and family caregiver support, including respite,  
23 education, and assistance to persons who are in the early stages  
24 of Alzheimer's disease, who have younger-onset Alzheimer's  
25 disease, or who have a related form of dementia.

26 b. The development of state policy with respect to persons  
27 having Alzheimer's disease or a related form of dementia.

28 c. The surveillance of persons having Alzheimer's disease  
29 or a related form of dementia for the purpose of accurately  
30 estimating the number of such persons in the state at present  
31 and projected population levels.

32 2. Existing services, resources, and capacity, including,  
33 but not limited to:

34 a. The type, cost, and availability of dementia-specific  
35 services throughout the state.

36 b. Policy requirements and effectiveness for dementia-  
37 specific training for professionals providing care.

38 c. Quality care measures employed by providers of care,  
39 including providers of respite, adult day care, assisted living  
40 facility, skilled nursing facility, and hospice services.

41 d. The capability of public safety workers and law



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42 enforcement officers to respond to persons having Alzheimer's  
43 disease or a related form of dementia, including, but not  
44 limited to, responding to their disappearance, search and  
45 rescue, abuse, elopement, exploitation, or suicide.

46 e. The availability of home and community-based services  
47 and respite care for persons having Alzheimer's disease or a  
48 related form of dementia and education and support services to  
49 assist their families and caregivers.

50 f. An inventory of long-term care facilities and community-  
51 based services serving persons having Alzheimer's disease or a  
52 related form of dementia.

53 g. The adequacy and appropriateness of geriatric-  
54 psychiatric units for persons having behavior disorders  
55 associated with Alzheimer's disease or a related form of  
56 dementia.

57 h. Residential assisted living options for persons having  
58 Alzheimer's disease or a related form of dementia.

59 i. The level of preparedness of service providers before,  
60 during, and after a catastrophic emergency involving persons  
61 having Alzheimer's disease or a related form of dementia and  
62 their caregivers and families.

63 3. Needed state policies or responses, including, but not  
64 limited to, directions for the provision of clear and  
65 coordinated care, services, and support for persons having  
66 Alzheimer's disease or a related form of dementia and their  
67 caregivers and families and strategies to address any identified  
68 gaps in the provision of services.

69 (g) Hold public meetings and employ technological means to