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576-03285-19

Proposed Committee Substitute by the Committee on Appropriations
(Appropriations Subcommittee on Health and Human Services)

A bill to be entitled

An act relating to Alzheimer's disease; amending s.
430.501, F.S.; increasing membership of the
Alzheimer's Disease Advisory Committee; revising
representative requirements of the committee;
requiring the committee to submit an annual report to
specified parties which includes certain information
and recommendations; requiring the Department of
Elderly Affairs to review and update the Alzheimer's
disease state plan every 3 years in collaboration with
certain parties; providing requirements for the plan;
amending s. 430.502, F.S.; establishing a specified
memory disorder clinic; providing that certain clinics
shall not receive decreased funding for a specified
reason; providing an effective date.

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

Section 1. Subsections (2) and (3) of section 430.501,
Florida Statutes, are amended to read:

430.501 Alzheimer's Disease Advisory Committee; research
grants.-

(2) There is created an Alzheimer's Disease Advisory
Committee, composed of 15 ~~10~~ members ~~to be selected by the~~
~~Governor~~, which shall advise the Department of Elderly Affairs
in the performance of its duties under this act. All members
must be residents of the state. The committee shall advise the



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28 department regarding legislative, programmatic, and
29 administrative matters that relate to persons living with
30 Alzheimer's disease victims and their caretakers.

31 (3) (a) The committee membership shall include the following
32 ~~be representative as follows:~~

33 1. Eleven members appointed by the Governor.

34 a. At least 4 of the 11 ~~10~~ members must be licensed
35 pursuant to chapter 458 or chapter 459 or hold a Ph.D. degree
36 and be currently involved in the research of Alzheimer's
37 disease.

38 ~~b.2. The 10 members must include~~ At least 4 of the 11
39 members must be persons who have been caregivers of persons
40 living with victims of Alzheimer's disease.

41 ~~c.3.~~ Whenever possible, the ~~10~~ members appointed by the
42 Governor shall include one ~~±~~ each of the following
43 professionals: a gerontologist, a geriatric psychiatrist, a
44 geriatrician, a neurologist, a social worker, ~~and~~ a registered
45 nurse, and a first responder.

46 2. Two members appointed by the President of the Senate,
47 one of whom must be a sitting member of the Senate, and two
48 members appointed by the Speaker of the House of
49 Representatives, one of whom must be a sitting member of the
50 House of Representatives.

51 (b)1. The Governor shall appoint members from a broad
52 cross-section of public, private, and volunteer sectors. All
53 nominations shall be forwarded to the Governor by the Secretary
54 of Elderly Affairs in accordance with this subsection.

55 2. Members shall be appointed to 4-year staggered terms in
56 accordance with s. 20.052, except for the sitting members of the



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57 Senate and House of Representatives, who shall be appointed to a
58 term corresponding to their term of office.

59 3. The Secretary of Elderly Affairs shall serve as an ex
60 officio member of the committee.

61 4. The committee shall elect one of its members to serve as
62 chair for a term of 1 year.

63 5. The committee may establish subcommittees as necessary
64 to carry out the functions of the committee.

65 6. The committee shall meet quarterly, or as frequently as
66 needed.

67 7. The committee shall submit an annual report to the
68 Governor, the President of the Senate, the Speaker of the House
69 of Representatives, and the Secretary of Elderly Affairs on or
70 before each September 1. The annual report shall include
71 information and recommendations on Alzheimer's disease policy;
72 all state-funded efforts in Alzheimer's disease research,
73 clinical care, institutional, home-based, and community-based
74 programs and the outcomes of such efforts; and any proposed
75 updates to the Alzheimer's disease state plan submitted under
76 subparagraph 8.

77 8. Beginning in 2020, and every third year thereafter, on
78 or before November 1, the Department of Elderly Affairs shall
79 review the Alzheimer's disease state plan and submit an updated
80 state plan to the Governor, the President of the Senate, and the
81 Speaker of the House of Representatives. The Department of
82 Elderly Affairs shall utilize the annual reports submitted by
83 the committee and collaborate with state Alzheimer's disease
84 organizations and professionals when considering such updates to
85 the Alzheimer's disease state plan. The state plan shall:



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86 a. Assess the current and future impact on the state of
87 Alzheimer's disease and related forms of dementia.

88 b. Examine the existing industries, services, and resources
89 addressing the needs of persons having Alzheimer's disease or a
90 related form of dementia and their family caregivers.

91 c. Examine the needs of persons of all cultural backgrounds
92 having Alzheimer's disease or a related form of dementia and how
93 their lives are affected by the disease from early-onset,
94 through mid-stage, to late-stage.

95 d. Develop a strategy to mobilize a state response to this
96 public health crisis.

97 e. Provide information regarding:

98 (I) State trends with respect to persons having Alzheimer's
99 disease or a related form of dementia and their needs,
100 including, but not limited to:

101 (A) The role of the state in providing community-based
102 care, long-term care, and family caregiver support, including
103 respite, education, and assistance to persons who are in the
104 early stages of Alzheimer's disease, who have early-onset
105 Alzheimer's disease, or who have a related form of dementia.

106 (B) The development of state policy with respect to persons
107 who have Alzheimer's disease or a related form of dementia.

108 (C) Surveillance of persons who have Alzheimer's disease or
109 a related form of dementia for the purpose of accurately
110 estimating the number of such persons in the state at present
111 and projected population levels.

112 (II) Existing services, resources, and capacity, including,
113 but not limited to:

114 (A) The type, cost, and availability of dementia-specific



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115 services throughout the state.

116 (B) Policy requirements and effectiveness for dementia-
117 specific training for professionals providing care.

118 (C) Quality care measures employed by providers of care,
119 including providers of respite, adult day care, assisted living
120 facility, skilled nursing facility, and hospice services.

121 (D) The capability of public safety workers and law
122 enforcement officers to respond to persons having Alzheimer's
123 disease or a related form of dementia, including, but not
124 limited to, responding to their disappearance, search and
125 rescue, abuse, elopement, exploitation, or suicide.

126 (E) The availability of home and community-based services
127 and respite care for persons having Alzheimer's disease or a
128 related form of dementia and education and support services to
129 assist their families and caregivers.

130 (F) An inventory of long-term care facilities and
131 community-based services serving persons who have Alzheimer's
132 disease or a related form of dementia.

133 (G) The adequacy and appropriateness of geriatric-
134 psychiatric units for persons who have behavior disorders
135 associated with Alzheimer's disease or a related form of
136 dementia.

137 (H) Residential assisted living options for persons who
138 have Alzheimer's disease or a related form of dementia.

139 (I) The level of preparedness of service providers before,
140 during, and after a catastrophic emergency involving a person
141 who have Alzheimer's disease or a related form of dementia and
142 their caregivers and families.

143 (III) Needed state policies or responses, including, but



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144 not limited to, directions for the provision of clear and
145 coordinated care, services, and support to persons who have
146 Alzheimer's disease or a related form of dementia and their
147 caregivers and families and strategies to address any identified
148 gaps in the provision of services.

149 ~~9.7.~~ The Department of Elderly Affairs shall provide staff
150 support to assist the committee in the performance of its
151 duties.

152 ~~10.8.~~ Members of the committee and subcommittees shall
153 receive no salary, but are entitled to reimbursement for travel
154 and per diem expenses, as provided in s. 112.061, while
155 performing their duties under this section.

156 Section 2. Subsection (1) of section 430.502, Florida
157 Statutes, is amended to read:

158 430.502 Alzheimer's disease; memory disorder clinics and
159 day care and respite care programs.—

160 (1) There is established:

161 (a) A memory disorder clinic at each of the three medical
162 schools in this state;

163 (b) A memory disorder clinic at a major private nonprofit
164 research-oriented teaching hospital, and may fund a memory
165 disorder clinic at any of the other affiliated teaching
166 hospitals;

167 (c) A memory disorder clinic at the Mayo Clinic in
168 Jacksonville;

169 (d) A memory disorder clinic at the West Florida Regional
170 Medical Center;

171 (e) A memory disorder clinic operated by Health First in
172 Brevard County;



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- 173 (f) A memory disorder clinic at the Orlando Regional
174 Healthcare System, Inc.;
- 175 (g) A memory disorder center located in a public hospital
176 that is operated by an independent special hospital taxing
177 district that governs multiple hospitals and is located in a
178 county with a population greater than 800,000 persons;
- 179 (h) A memory disorder clinic at St. Mary's Medical Center
180 in Palm Beach County;
- 181 (i) A memory disorder clinic at Tallahassee Memorial
182 Healthcare;
- 183 (j) A memory disorder clinic at Lee Memorial Hospital
184 created by chapter 63-1552, Laws of Florida, as amended;
- 185 (k) A memory disorder clinic at Sarasota Memorial Hospital
186 in Sarasota County;
- 187 (l) A memory disorder clinic at Morton Plant Hospital,
188 Clearwater, in Pinellas County;
- 189 (m) A memory disorder clinic at Florida Atlantic
190 University, Boca Raton, in Palm Beach County; ~~and~~
- 191 (n) A memory disorder clinic at Florida Hospital in Orange
192 County; and
- 193 (o) A memory disorder clinic at Miami Jewish Health Systems
194 in Miami-Dade County,
195
- 196 for the purpose of conducting research and training in a
197 diagnostic and therapeutic setting for persons suffering from
198 Alzheimer's disease and related memory disorders. However,
199 memory disorder clinics ~~funded as of June 30, 1995,~~ shall not
200 receive decreased funding due solely to subsequent additions of
201 memory disorder clinics in this subsection.



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Section 3. This act shall take effect July 1, 2019.