

FINAL BILL REPORT

SSB 6124

C 89 L 14
Synopsis as Enacted

Brief Description: Developing a state Alzheimer's plan.

Sponsors: Senate Committee on Health Care (originally sponsored by Senators Keiser, Dammeier, Hargrove, Ranker, McCoy, Hasegawa, Conway, Darneille, McAuliffe, Cleveland, Billig, Rolfes, Nelson, Mullet, Fraser, Frockt, Eide, Kohl-Welles, Kline, Hobbs, Pedersen, Hatfield, Parlette, Roach and Becker).

Senate Committee on Health Care
House Committee on Health Care & Wellness

Background: Alzheimer's is a type of dementia that causes problems with memory, thinking, and behavior. Symptoms usually develop slowly and get worse over time. In the early stages, memory loss is mild, but with late-stage Alzheimer's, individuals lose the ability to carry on a conversation and respond to their environment. Alzheimer's is the sixth-leading cause of death in the United States and the third-leading cause of death in Washington State. Currently, more than 150,000 people in Washington State have Alzheimer's disease or another form of dementia. For most of these people, care is provided by a family member.

Forty-four states have enacted or are in the process of enacting Alzheimer's state plans. In general, state plans:

- work with stakeholders affected by Alzheimer's disease, including people who have been diagnosed with the disease as well as their caregivers;
- develop public awareness programs to help people recognize the signs of Alzheimer's disease and the services that are available for people with Alzheimer's disease as well as their caregivers;
- develop ways to support unpaid caregivers;
- encourage increased detection and diagnosis of Alzheimer's disease;
- address the stigma related to the diagnosis of Alzheimer's disease and provide information to overcome misperceptions related to the disease;
- address ways to improve individual health care of people with Alzheimer's disease;
- explore ways to expand the capacity of the health care system to meet the growing number and needs of people with Alzheimer's disease, including increasing the health care workforce;
- develop ways to train health care professionals in working with people with Alzheimer's disease;

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- seek ways to improve services provided in the home and community to delay the need for institutionalize care as well as improving services in assisted living facilities; and
- address public safety issues relating to people with Alzheimer's disease.

Summary: The Department of Social and Health Services must develop a workgroup of stakeholders to develop an Alzheimer's plan for the state of Washington. The workgroup must consider and make recommendations on the following:

- promotion of early detection and diagnosis of Alzheimer's disease and dementia;
- trends in the state's Alzheimer's population and service needs;
- the state's role in long-term care, family caregiver support, and assistance to people with early-stage and early onset of Alzheimer's disease; and
- estimates of the future impacts of the disease on the state.

The workgroup must also address existing resources, services, and capacity relating to Alzheimer's disease. This includes the type, cost, and availability of dementia services, and dementia-specific training requirements for caregivers of those at all stages of Alzheimer's disease as well as quality care measures for assisted living facilities and the adequacy of services and assisted living options for people with the disease.

Stakeholders included in the workgroup represent state agencies, health care providers, adult family home providers, people with Alzheimer's disease and their families and caregivers, health care policy advocates, and researchers.

Votes on Final Passage:

Senate	47	1
House	90	6

Effective: June 12, 2014