

# SENATE BILL REPORT

## SSB 6124

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As Passed Senate, February 14, 2014

**Title:** An act relating to developing a state Alzheimer's plan.

**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).

**Brief History:**

**Committee Activity:** Health Care: 1/30/14, 2/06/14 [DPS].

Passed Senate: 2/14/14, 47-1.

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### SENATE COMMITTEE ON HEALTH CARE

**Majority Report:** That Substitute Senate Bill No. 6124 be substituted therefor, and the substitute bill do pass.

Signed by Senators Becker, Chair; Dammeier, Vice Chair; Pedersen, Ranking Member; Angel, Bailey, Cleveland, Keiser and Parlette.

**Staff:** Kathleen Buchli (786-7488)

**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

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

**Summary of Substitute Bill:** The Department of Social and Health Services (DSHS) 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.

**Appropriation:** None.

**Fiscal Note:** Available.

**Committee/Commission/Task Force Created:** No.

**Effective Date:** Ninety days after adjournment of session in which bill is passed.

**Staff Summary of Public Testimony on Proposed Substitute as Heard in Committee:**  
PRO: Many states have Alzheimer's plans and they have been very successful in streamlining services and reducing duplication of services. This will lead to a more efficient way to provide services in this state. This was the top priority of the Governor's Aging Summit. It is an important step to build capacity in the state to assist people with Alzheimer's disease and their caregivers. It is important to coordinate services. We would like to amend the bill to call out the need to promote early detection and diagnosis. This will have a diverse stakeholder group and will produce a comprehensive plan for the state. We need to reduce the stigma toward those who have this disease and help those people who live alone or do not live in dementia-friendly neighborhoods. We support providing resources to DSHS to help implement the bill and put together the workgroup. This will provide a way for the state to respond to the age wave in a thoughtful manner. Caregivers should be supported and they need to be trained in the particular behavioral issues of patients.

**Persons Testifying:** PRO: Senator Keiser, prime sponsor; Bill Moss, DSHS, Assistant Secretary; Bob Le Roy, Alzheimer's Assn. Western and Central WA Chapter, Executive Director; Myriam Marquez, Alzheimer's Assn. Western and Central WA Chapter; Roy Walker, WA Assn. of Area Agencies on Aging, Executive Director; Peggy Quan, American Assn. of Retired Persons.

**Signed In, Unable to Testify & Submitted Written Testimony:** John Ficker, Executive Director, WA State Residential Care Council.