**By** the Committee on Children, Families, and Elder Affairs; and Senator Wise

A bill to be entitled

586-00843-12

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2012316c1

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 creating the memory-impairment screening grant 7 program; providing criteria for awarding grants; 8 providing a definition; requiring grant recipients to 9 submit an evaluation of certain activities to the 10 department; authorizing the department to provide 11 technical support; requiring an annual report to the Legislature; providing for implementation of the 12 13 public education program to operate within existing 14 resources of the department; providing that 15 implementation of the memory-impairment screening 16 grant program is contingent upon an appropriation of 17 state funds or the availability of private resources; amending s. 400.1755, F.S.; specifying the types of 18 19 facilities where an employee or direct caregiver 20 providing care for persons with Alzheimer's disease 21 may begin employment without repeating certain 22 training requirements; amending s. 400.6045, F.S.; 23 requiring direct caregivers to comply with certain 24 continuing education requirements; amending s. 25 429.178, F.S.; specifying the types of facilities 26 where an employee or direct caregiver providing care 27 for persons with Alzheimer's disease may begin 28 employment without repeating certain training 29 requirements; providing an effective date.

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31	WHEREAS, Alzheimer's disease is a slow, progressive
32	disorder of the brain which results in loss of memory and other
33	cognitive functions, is the eighth leading cause of death in the
34	United States, and currently affects an estimated 5 million
35	Americans, with that number expected to increase to 16 million
36	by mid-century, and
37	WHEREAS, Alzheimer's disease strikes approximately 1 in 10
38	people over the age of 65 and nearly one-half of those who are
39	age 85 or older, although some people develop symptoms as young
40	as age 40, and
41	WHEREAS, Alzheimer's disease takes an enormous toll on
42	family members who are the caregivers for individuals having the
43	disease, and
44	WHEREAS, caregivers for individuals who have Alzheimer's
45	disease suffer more stress, depression, and health problems than
46	caregivers for individuals who have other illnesses, and
47	WHEREAS, Alzheimer's disease costs United States businesses
48	more than \$60 billion annually due to lost productivity and
49	absenteeism by primary caregivers and increased insurance costs,
50	and
51	WHEREAS, recent advancements in scientific research have
52	demonstrated the benefits of early medical treatment for persons
53	who have Alzheimer's disease and the benefits of early access to
54	counseling and other support services for their caregivers, and
55	WHEREAS, research shows that several medications have been
56	developed which can reduce the symptoms of Alzheimer's disease,
57	that persons begin to benefit most when these medications are
58	taken in the early stages of a memory disorder, and that this

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59	intervention may extend the period during which patients can be
60	cared for at home, thereby significantly reducing the costs of
61	institutional care, and
62	WHEREAS, with early diagnosis, patients can participate in
63	decisions regarding their care and their families can take
64	advantage of support services that can reduce caregiver
65	depression and related health problems, and
66	WHEREAS, in direct response to research breakthroughs,
67	National Memory Screening Day was established as a collaborative
68	effort by organizations and health care professionals across the
69	country to promote awareness and early detection of memory
70	impairments, and
71	WHEREAS, on National Memory Screening Day, which is held on
72	the third Tuesday of November in recognition of National
73	Alzheimer's Disease Month, health care professionals administer
74	free memory screenings at hundreds of sites throughout the
75	United States, and
76	WHEREAS, memory screening is used as an indicator of
77	whether a person might benefit from more extensive testing to
78	determine whether a memory or cognitive impairment exists and
79	identifies persons who may benefit from medical attention, but
80	is not used to diagnose any illness and in no way replaces
81	examination by a qualified physician, NOW, THEREFORE,
82	
83	Be It Enacted by the Legislature of the State of Florida:
84	
85	Section 1. Section 430.5025, Florida Statutes, is created
86	to read:
87	430.5025 Memory-impairment screening; grants

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88	(1) The Department of Elderly Affairs shall develop and
89	implement a public education program relating to screening for
90	memory impairment and the importance of early diagnosis and
91	treatment of Alzheimer's disease and related disorders.
92	(2)(a) The memory-impairment screening grant program is
93	created and shall be administered by the department.
94	(b) The department may award grants to qualifying entities
95	to support the development, expansion, or operation of programs
96	that provide:
97	1. Information and education on the importance of memory
98	screening for early diagnosis and treatment of Alzheimer's
99	disease and related disorders.
100	2. Screenings for memory impairment.
101	(3) As used in this section, the term "qualifying entities"
102	means public and nonprofit private entities that provide
103	services and care to individuals who have Alzheimer's disease or
104	related disorders and their caregivers and families.
105	(4) When awarding grants under this section, the department
106	shall give preference to applicants that:
107	(a) Have demonstrated experience in promoting public
108	education and awareness of the importance of memory screening or
109	providing memory-screening services.
110	(b) Have established arrangements with health care
111	providers and other organizations to provide screenings for
112	memory impairment in a manner that is convenient to individuals
113	in the communities served by the applicants.
114	(c) Provide matching funds.
115	(5) A qualifying entity that receives a grant under this
116	section shall submit to the department an annual evaluation that

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117	describes activities carried out with funds received under this
118	section, the long-term effectiveness of such activities in
119	promoting early detection of memory impairment, and any other
120	information that the department requires.
121	(6) The department may set aside an amount not to exceed 15
122	percent of the total amount appropriated to the memory-
123	impairment screening grant program for the fiscal year to
124	provide grantees with technical support in the development,
125	implementation, and evaluation of memory-impairment screening
126	programs.
127	(7) A grant may be awarded under subsection (2) only if an
128	application for the grant is submitted to the department and the
129	application is in the form, is made in the manner, and contains
130	the agreements, assurances, and information that the department
131	determines are necessary to carry out the purposes of this
132	section.
133	(8) The department shall annually submit to the President
134	of the Senate and the Speaker of the House of Representatives a
135	report on the activities carried out under this section,
136	including provisions describing the extent to which the
137	activities have affected the rate of screening for memory
138	impairment and have improved outcomes for patients and
139	caregivers.
140	Section 2. Implementation.—
141	(1) Implementation of the public education program created
142	under s. 430.5025, Florida Statutes, shall operate within
143	existing resources of the Department of Elderly Affairs.
144	(2) Implementation of the memory-impairment screening grant
145	program created under s. 430.5025, Florida Statutes, is

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146	contingent upon appropriation of state funds or the availability
147	of private resources.
148	Section 3. Subsection (6) of section 400.1755, Florida
149	Statutes, is amended to read:
150	400.1755 Care for persons with Alzheimer's disease or
151	related disorders
152	(6) Upon completing any training listed in this section,
153	the employee or direct caregiver shall be issued a certificate
154	that includes the name of the training provider, the topic
155	covered, and the date and signature of the training provider.
156	The certificate is evidence of completion of training in the
157	identified topic, and the employee or direct caregiver is not
158	required to repeat training in that topic if the employee or
159	direct caregiver changes employment to a different facility or
160	to an assisted living facility, home health agency, adult day
161	care center, or <u>hospice</u> <del>adult family-care home</del> . The direct
162	caregiver must comply with other applicable continuing education
163	requirements.
164	Section 4. Paragraph (h) of subsection (1) of section
165	400.6045, Florida Statutes, is amended to read:
166	400.6045 Patients with Alzheimer's disease or other related
167	disorders; staff training requirements; certain disclosures
168	(1) A hospice licensed under this part must provide the
169	following staff training:
170	(h) Upon completing any training described in this section,
171	the employee or direct caregiver shall be issued a certificate
172	that includes the name of the training provider, the topic
173	covered, and the date and signature of the training provider.
174	The certificate is evidence of completion of training in the

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175	identified topic, and the employee or direct caregiver is not
176	required to repeat training in that topic if the employee or
177	direct caregiver changes employment to a different hospice or to
178	a home health agency, assisted living facility, nursing home, or
179	adult day care center. The direct caregiver must comply with
180	other applicable continuing education requirements.
181	Section 5. Subsection (4) of section 429.178, Florida
182	Statutes, is amended to read:
183	429.178 Special care for persons with Alzheimer's disease
184	or other related disorders
185	(4) Upon completing any training listed in subsection (2),
186	the employee or direct caregiver shall be issued a certificate
187	that includes the name of the training provider, the topic
188	covered, and the date and signature of the training provider.
189	The certificate is evidence of completion of training in the
190	identified topic, and the employee or direct caregiver is not
191	required to repeat training in that topic if the employee or
192	direct caregiver changes employment to a different <u>assisted</u>
193	living facility or nursing home, hospice, adult day care center,
194	or home health agency facility. The employee or direct caregiver
195	must comply with other applicable continuing education
196	requirements.
197	Section 6. This act shall take effect July 1, 2012.

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