

1 A bill to be entitled
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
12 Legislature; providing for implementation of the
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;
18 amending s. 400.1755, F.S.; specifying the types of
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

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29 requirements; providing an effective date.

30
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,

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57 | that persons begin to benefit most when these medications are
58 | taken in the early stages of a memory disorder, and that this
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:

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85 Section 1. Section 430.5025, Florida Statutes, is created
86 to read:

87 430.5025 Memory-impairment screening; grants.-

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
102 entities" means public and nonprofit private entities that
103 provide services and care to individuals who have Alzheimer's
104 disease or related disorders and their caregivers and families.

105 (4) When awarding grants under this section, the
106 department 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

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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
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
122 15 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
 145 grant program created under s. 430.5025, Florida Statutes, is
 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 hospice ~~adult family-care home~~. 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
 167 related disorders; staff training requirements; certain
 168 disclosures.—

169 (1) A hospice licensed under this part must provide the
 170 following staff training:

171 (h) Upon completing any training described in this
 172 section, the employee or direct caregiver shall be issued a
 173 certificate that includes the name of the training provider, the
 174 topic covered, and the date and signature of the training
 175 provider. The certificate is evidence of completion of training
 176 in the identified topic, and the employee or direct caregiver is
 177 not required to repeat training in that topic if the employee or
 178 direct caregiver changes employment to a different hospice or to
 179 a home health agency, assisted living facility, nursing home, or
 180 adult day care center. The direct caregiver must comply with
 181 other applicable continuing education requirements.

182 Section 5. Subsection (4) of section 429.178, Florida
 183 Statutes, is amended to read:

184 429.178 Special care for persons with Alzheimer's disease
 185 or other related disorders.—

186 (4) Upon completing any training listed in subsection (2),
 187 the employee or direct caregiver shall be issued a certificate
 188 that includes the name of the training provider, the topic
 189 covered, and the date and signature of the training provider.
 190 The certificate is evidence of completion of training in the
 191 identified topic, and the employee or direct caregiver is not
 192 required to repeat training in that topic if the employee or
 193 direct caregiver changes employment to a different assisted
 194 living facility or nursing home, hospice, adult day care center,
 195 or home health agency facility. The employee or direct caregiver
 196 must comply with other applicable continuing education

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197 | requirements.

198 | Section 6. This act shall take effect July 1, 2012.