As Reported by the Senate Health, Human Services and Aging Committee

133rd General Assembly Regular Session 2019-2020

Am. S. B. No. 24

Senators Wilson, Yuko

Cosponsors: Senators Eklund, Kunze, Hackett, Terhar, Antonio, Fedor, Thomas, Williams

A BILL

To establish	the Alzheimer's	Disease and	Related 1	
Dementias	Task Force.		2	2

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF OHIO:

Section 1. (A) There is hereby established within the	3
Department of Aging the Alzheimer's Disease and Related	4
Dementias Task Force, consisting of all of the following	5
members:	6
(1) One individual who has been diagnosed with Alzheimer's	7
disease or related dementia or a family member of such an	8
individual;	9
(2) One individual who is the caregiver of an individual diagnosed with Alzheimer's disease or related dementia;	10 11
(3) One individual who represents nursing homes;	12
(4) One individual who represents residential care	13
facilities;	14
(5) One individual who represents providers of adult day	15

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habilitation services;	16	
(6) One individual who represents providers of medical care;	17 18	
(7) One physician who has experience diagnosing, treating, and researching Alzheimer's disease;	19 20	
(8) One psychologist who specializes in dementia care;	21	
(9) One individual who conducts research regarding Alzheimer's disease or related dementias;	22 23	
(10) Two individuals, each of whom represents an organization that advocates on behalf of individuals diagnosed with Alzheimer's disease or related dementias;	24 25 26	
(11) Two individuals, each of whom has experience in Alzheimer's-related care, treatment, research, education, or advocacy;	27 28 29	
(12) One individual who represents LeadingAge Ohio;	30	
(13) One individual who represents the Ohio Health Care Association;	31 32	
(14) One individual who represents the Ohio Assisted Living Association;	33 34	
(15) One individual who represents the Ohio Council for Home Care and Hospice;	35 36	
(16) One individual who represents the Association of Area Agencies on Aging;	37 38	
(17) The Director of Health or the Director's designee;	39	
(18) The Director of Aging or the Director's designee;	40	
(19) The Medicaid Director or the Director's designee;	41	

(20) The Director of Veterans Services or the Director's	42	
designee;	43	
(21) The State Long-term Care Ombudsman or the Ombudsman's	44	
designee;	45	
(22) Two members of the Ohio Senate, one from the majority	46	
caucus and one from the minority caucus;	47	
caucad and one from the minority caucad,	17	
(23) Two members of the Ohio House of Representatives, one	48	
from the majority caucus and one from the minority caucus.	49	
(B) The Governor shall appoint the members described in	50	
divisions (A)(1) to (16) of this section. Of the members	51	
described in division (A)(10) of this section, the Governor	52	
shall appoint at least one individual selected by the	53	
Alzheimer's Association. The Senate President shall appoint the	54	
members described in division (A)(22) of this section and the	55	
Speaker of the House of Representatives shall appoint the		
members described in division (A)(23)of this section.	57	
Appointments shall be made not later than ninety days after the		
effective date of this act. Vacancies shall be filled in the		
same manner as original appointments.	60	
(C) Members shall serve without compensation, except to	61	
the extent that serving on the Task Force is considered part of	62	
the member's regular duties of employment, but shall be	63	
reimbursed for actual and necessary expenses incurred in the	64	
performance of official duties.	65	
(D) The Director of Aging or Director's designee shall	66	
serve as the Task Force's chairperson. The Director of Health or	67	
the Director's designee shall serve as the Task Force's vice		

the Director's designee shall serve as the Task Force's vice68chairperson. The Task Force shall hold its first meeting not69later than 30 days after the appointment of its members.70

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Thereafter, the Task Force shall meet at the call of the 71 chairperson. 72

(E) A majority of the members constitutes a quorum for the conduct of meetings. The Task Force shall comply with public records and open meetings requirements as described in sections 121.22 and 149.43 of the Revised Code.

Section 2. The Alzheimer's Disease and Related Dementias 77 Task Force shall examine the needs of individuals diagnosed with 78 Alzheimer's disease or related dementias, the services available 79 in this state for those individuals, and the ability of health 80 care providers and facilities to meet the individuals' current 81 and future needs. The Task Force shall consider and make 82 findings and recommendations on all of the following topics: 83

(A) Trends in the state's Alzheimer's disease and related dementias populations and service needs, including:

(1) The state's role in providing or facilitating longterm care, family caregiver support, and assistance to those
with early-stage or early-onset Alzheimer's disease or related
dementias;

(2) The state's policies regarding individuals with90Alzheimer's disease or related dementias;91

(3) The fiscal impact of Alzheimer's disease and related92dementias on publicly funded health care programs;93

(4) The establishment of a surveillance system to better
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determine the number of individuals diagnosed with Alzheimer's
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disease or related dementias and to monitor changes to such
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numbers.

(B) Existing resources, services, and capacity relating to

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the care of individuals diagnosed with Alzheimer's disease or 99 related dementias, including: 100 (1) The type, cost, and availability of dementia care 101 services: 102 (2) Dementia-specific training requirements for employees 103 of long-term care facilities; 104 (3) Quality care measures for residential care facilities; 105 (4) Home and community-based services, including respite 106 care, for individuals diagnosed with Alzheimer's disease or 107 related dementias and their families; 108 (5) Number and availability of long-term care dementia 109 units or providers; 110 (6) The adequacy and appropriateness of geriatric 111 psychiatric units for individuals with behavioral disorders 112 associated with Alzheimer's disease and related dementias; 113 (7) Assisted living options for individuals diagnosed with 114 Alzheimer's disease or related dementias; 115 (8) State-supported Alzheimer's and related dementias 116 research conducted at universities located in this state. 117 (C) Policies and strategies that address the following: 118 (1) Increasing public awareness of Alzheimer's disease and 119 related dementias; 120 (2) Encouraging improved detection and diagnosis of 121 Alzheimer's disease and related dementias; 122 (3) Improving the health care received by individuals 123 diagnosed with Alzheimer's disease or related dementias; 124

(4) Improving the quality of the health care system in 125 serving individuals diagnosed with Alzheimer's disease or 126 related dementias; 127 (5) Evaluating the capacity of the health care system in 128 meeting the growing number and needs of those with Alzheimer's 129 disease and related dementias; 130 (6) Equipping health care professionals and others to 131 better care for individuals with Alzheimer's disease or related 132 dementias; 133 (7) Increasing the number of health care professionals 134 necessary to treat the growing aging and Alzheimer's disease and 135 dementia populations; 136 (8) Improving services provided in the home and community 137 to delay and decrease the need for institutionalized care for 138 individuals with Alzheimer's disease or related dementias; 139 (9) Improving long-term care, including assisted living, 140 for those with Alzheimer's disease or related dementias; 141 (10) Assisting unpaid Alzheimer's disease or dementia 142 caregivers; 143 (11) Increasing and improving research on Alzheimer's 144 disease and related dementias; 145 (12) Promoting activities to maintain and improve brain 146 health; 147 (13) Improving the collection of data and information 148 related to Alzheimer's disease and related dementias and their 149 public health burdens; 150

(14) Improving public safety and addressing the safety- 151

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related needs of those with Alzheimer's disease or related 152 dementias; 153 (15) Addressing legal protections for, and legal issues 154 faced by, individuals with Alzheimer's disease or related 155 dementias; 156 (16) Improving the ways in which the government evaluates 157 and adopts policies to assist individuals diagnosed with 158 Alzheimer's disease or related dementias and their families. 159 Section 3. Not later than eighteen months after the 160 effective date of this act, the Task Force shall submit to the 161 Governor and General Assembly a report detailing its findings 162 and recommendations. The report shall be submitted to the 163 General Assembly in accordance with section 101.68 of the 164 Revised Code. On submission of its report, the Task Force shall 165 cease to exist. 166 Section 4. The Department of Aging shall provide meeting 167 space and staff and administrative support for the Task Force. 168

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