Stricken language would be deleted from and underlined language would be added to present law.

For An Act To Be Entitled

AN ACT TO CREATE THE ALZHEIMER’S DISEASE AND DEMENTIA ADVISORY COUNCIL; TO PROVIDE FOR THE POWERS AND DUTIES OF THE ALZHEIMER’S DISEASE AND DEMENTIA ADVISORY COUNCIL; TO PROVIDE FOR THE IMPLEMENTATION OF A STATE ALZHEIMER’S PLAN; AND FOR OTHER PURPOSES.

Subtitle

TO CREATE THE ALZHEIMER’S DISEASE AND DEMENTIA ADVISORY COUNCIL; AND TO PROVIDE FOR THE IMPLEMENTATION OF A STATE ALZHEIMER’S PLAN.

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

SECTION 1. Arkansas Code Title 20, Chapter 8, is amended to add an additional subchapter to read as follows:

Subchapter 11—Alzheimer’s Disease and Dementia Advisory Council

20-8-1101. Alzheimer’s Disease and Dementia Advisory Council—Creation—Membership.

(a) There is created the Alzheimer’s Disease and Dementia Advisory Council, which shall consist of the following members:

(1) A member of the House of Representatives, to be appointed by the Speaker of the House of Representatives, who shall serve as a cochair of the council;

(2) A member of the Senate, to be appointed by the President Pro
Tempore of the Senate, who shall serve as a cochair of the council;

(3) One (1) individual who is a family caregiver of an individual living with Alzheimer's disease or another dementia, to be appointed by the Secretary of the Department of Health;

(4) The Executive Director of the Arkansas Healthcare Association or his or her designee;

(5) The Executive Director of Alzheimer's Arkansas Programs and Services or his or her designee;

(6) The Executive Director of the Arkansas Chapter of the Alzheimer's Association or his or her designee;

(7) The Arkansas State Director of the Arkansas State Office of AARP, Inc. or his or her designee;

(8) The Executive Director of the Arkansas Minority Health Commission or his or her designee;

(9) The Executive Director of The Broyles Foundation or his or her designee;

(10) The President of the Arkansas Hospital Association or his or her designee;

(11) The President of the Arkansas Medical Society or his or her designee;

(12) One (1) individual representing the Arkansas Association of Area Agencies on Aging, to be appointed by the Secretary of the Department of Health;

(13) One (1) individual who represents home care providers, to be appointed by the Secretary of the Department of Health;

(14) One (1) physician who has experience diagnosing and caring for patients with Alzheimer's disease, to be appointed by the Secretary of the Department of Health;

(15) One (1) individual representing the University of Arkansas for Medical Sciences Centers on Aging, to be appointed by the Secretary of the Department of Health;

(16) One (1) individual who conducts research regarding Alzheimer's disease or other dementias, to be appointed by the Secretary of the Department of Health;

(17) One (1) individual from a statewide association representing the interests of nursing professionals, to be appointed by the
Secretary of the Department of Health;

(18) The Secretary of the Department of Health or his or her
designee, who shall be a nonvoting member;

(19) The Secretary of the Department of Human Services or his or
her designee, who shall be a nonvoting member; and

(20) The long-term care ombudsman for the Division of Aging,
Adult, and Behavioral Health Services of the Department of Human Services or
his or her designee, who shall be a nonvoting member.

(b)(1)(A) Each voting member shall serve for a term of two (2) years.

(B) If a suitable successor who meets the requirements of
this section is not available to be appointed to a position on the council,
the current member may be reappointed for an additional term of two (2)
years.

(2) If a vacancy occurs on the council, the vacancy shall be
filled by the same process as the original appointment.

(c)(1) The legislative members of the commission shall be paid per
diem and mileage as authorized by law for attendance at meetings of interim
committees of the General Assembly.

(2) Nonlegislative members of the council shall not be
compensated but may be reimbursed under § 25-16-901 et seq. for expenses
actually incurred in the performance of their duties.

(d)(1) The cochairs of the council shall call the first meeting of the
council within thirty (30) days of the initial appointment of members.

(2) Meetings of the council shall be held at least one (1) time
every quarter but may occur more often at the call of the cochairs.

(3) The council shall establish rules and procedures for
conducting its business.

(4)(A) A majority of the voting members of the council shall
constitute a quorum for transacting business of the council.

(B) An affirmative vote of a majority of a quorum present
shall be required for the passage of a motion or other council action.

(5) The Bureau of Legislative Research shall provide staff for
the council as necessary to assist the council in the performance of its
duties.

20-8-1102. Duties.
The Alzheimer’s Disease and Dementia Advisory Council shall:

(1) Examine the:

(A) Needs of individuals living with Alzheimer’s disease or other dementias;

(B) Services available in the state for individuals living with Alzheimer’s disease or other dementias and their family caregivers; and

(C) Ability of healthcare providers and facilities to meet the current and future needs of individuals living with Alzheimer's disease or other dementias;

(2) Consider and make findings and recommendations on the following, which shall be known as the "State Alzheimer’s Plan":

(A) Trends in the state’s Alzheimer’s disease and other dementias populations and service needs, including without limitation:

   (i) The state’s role in providing or facilitating long-term care, family caregiver support, and assistance to those individuals with early-stage or early-onset Alzheimer’s disease or other dementias;

   (ii) The state’s policies regarding individuals with Alzheimer's disease or other dementias;

   (iii) The fiscal impact of Alzheimer’s disease and other dementias on publicly funded healthcare programs; and

   (iv) The establishment of a surveillance system to better determine the number of individuals diagnosed with Alzheimer’s disease or other dementias and to monitor changes to the number of individuals diagnosed with Alzheimer’s disease or other dementias;

(B) Existing resources, services, and capacity relating to the diagnosis and care of individuals living with Alzheimer’s disease or other dementias, including without limitation:

   (i) The type, cost, and availability of Alzheimer’s disease and other dementias care services;

   (ii) The availability of healthcare workers who can serve people with dementia, including without limitation neurologists, geriatricians, and direct care workers;

   (iii) Dementia-specific training requirements for public and private employees who interact with people living with Alzheimer’s or other dementias, including without limitation long-term care workers, case managers, adult protective services, law enforcement, and first responders;
(iv) Home-based and community-based services, including without limitation respite care for individuals diagnosed with Alzheimer’s disease or other dementias and their families;

(v) Quality care measures for home-based and community-based services and residential care facilities; and

(vi) State-supported Alzheimer’s and other dementias research conducted at universities located in this state;

(C) Policies and strategies that address:

(i) Increasing public awareness of Alzheimer’s disease and other dementias;

(ii) Educating healthcare providers to increase early detection and diagnosis of Alzheimer’s disease and other dementias;

(iii) Improving the health care received by individuals diagnosed with Alzheimer’s disease and other dementias;

(iv) Evaluating the capacity of the healthcare system in meeting the growing number and needs of those individuals with Alzheimer’s disease and other dementias;

(v) Increasing the number of healthcare professionals available to treat the growing aging and Alzheimer’s disease and dementia populations;

(vi) Improving services provided in the home and community to delay and decrease the need for institutionalized care for individuals with Alzheimer’s disease or other dementias;

(vii) Improving long-term care, including without limitation assisted living, for those individuals with Alzheimer’s disease or other dementias;

(viii) Assisting unpaid Alzheimer's disease and other dementias caregivers;

(ix) Increasing and improving research on Alzheimer’s disease and other dementias;

(x) Promoting activities to maintain and improve brain health;

(xi) Improving the collection of data and information related to Alzheimer’s disease and other dementias and their public health burdens;

(xii) Improving public safety for and addressing the
safety-related needs of those individuals with Alzheimer's disease or other dementias;

(xiii) Addressing legal protections for and legal issues faced by individuals with Alzheimer’s disease or other dementias; and

(xiv) Improving the ways in which the state government evaluates and adopts policies to assist individuals diagnosed with Alzheimer’s disease or other dementias and their families.

20-8-1103. Reports.
(a) By October 1, 2022, and by October 1 of each subsequent year, the Alzheimer’s Disease and Dementia Advisory Council shall submit to the Governor, the Speaker of the House of Representatives, and the President Pro Tempore of the Senate an annual report on the status of implementation of the State Alzheimer’s Plan recommendations under § 20-8-1102, any barriers to implementation, and any proposed legislation.

(b) Every four (4) years, the council shall issue an updated plan addressing the items in § 20-8-1102 and any other issues the council deems necessary and relevant toward addressing Alzheimer’s disease and other dementias.

20-8-1104. Implementation reports.
(a) By October 1 of each even-numbered year, the state agencies identified in the State Alzheimer’s Plan shall submit a report to the Governor, the Speaker of the House of Representatives, and the President Pro Tempore of the Senate that includes without limitation:

(1) The steps the state agency has taken to implement the recommendations in the plan; and

(2) If applicable, the state agency’s reasons for failing to implement all or any part of the plan.

(b) The Alzheimer’s Disease and Dementia Advisory Council shall include the council’s analysis of the status of state agencies’ implementation of the plan in the report required under § 20-8-1103.

SECTION 2. DO NOT CODIFY. Initial appointments to Alzheimer's Disease and Dementia Advisory Council.
Members of the Alzheimer’s Disease and Dementia Advisory Council shall
be appointed within ninety (90) days of the effective date of this act.

APPROVED: 3/17/21