OLR Bill Analysis
sSB 827 (File 41, as amended by Senate "A")*

AN ACT CONCERNING ALZHEIMER'S DISEASE AND DEMENTIA TRAINING AND BEST PRACTICES.

SUMMARY

This bill modifies continuing education requirements for physicians and advanced practice registered nurses (APRNs). Current law requires these professionals to complete at least two contact hours of training or education during the first license renewal period in which continuing education is required and at least once every six years thereafter on mental health conditions common to veterans and their family members.

Starting January 1, 2020, the bill retains this continuing education requirement for APRNs, but allows physicians to instead complete at least two contact hours of training or education in the following:

1. diagnosing and treating cognitive conditions, including Alzheimer’s disease, dementia, delirium, related cognitive impairments, and geriatric depression or

2. diagnosing and treating any mental health conditions, instead of only those common to veterans and their family members.

It also allows, but does not require, APRNs to complete on the same schedule, at least two contact hours of training or education on diagnosing and treating cognitive and mental conditions, including those listed above.

By law, physicians and APRNs must generally complete 50 contact hours of continuing education every two years, starting with their second license renewal.

Additionally, the bill requires the executive director of the
Commission on Women, Children, and Seniors (CWCS) to establish a nine-member working group on Alzheimer’s Disease and Dementia. The working group must report its findings and recommendations by January 30, 2020, to the Aging Committee and terminates on the date it submits its report, or December 1, 2020, whichever is later.

“Senate Amendment “A” replaces the original bill (File 41). It eliminates the requirement that physicians; physician assistants; and advanced practice, licensed practical, and registered nurses applying for license renewal complete a one-time course of up to eight hours on Alzheimer’s disease, dementia, delirium, related cognitive impairments, and geriatric depression. It also (1) requires the CWCS executive director, instead of the Department of Rehabilitation Services commissioner, to establish the working group on Alzheimer’s Disease and Dementia and (2) extends the group’s reporting deadline.

EFFECTIVE DATE: January 1, 2020, except the provisions establishing the working group take effect upon passage.

WORKING GROUP ON ALZHEIMER’S DISEASE AND DEMENTIA

Duties

The bill requires the CWCS executive director to establish a nine-member working group to (1) review the recommendations of the Task Force on Alzheimer’s Disease and Dementia established by SA 13-11, (2) determine gaps in implementing these recommendations, and (3) make recommendations on best practices for Alzheimer’s disease and dementia care.

SA 13-11 created a 23-member Task Force on Alzheimer’s Disease and Dementia charged with analyzing and making recommendations on Alzheimer’s disease and dementia, including (1) service provision, (2) legislative policy changes, (3) state and private agency coordination, and (4) placement of individuals with these conditions in health care facilities and community settings. The task force reported its findings and recommendations to the legislature in 2014.

Membership
Under the bill, the working group consists of the following members:

1. the DORS commissioner, or her designee;

2. the executive directors of the Connecticut chapter of the Alzheimer’s Association; the Commission on Women, Children, and Seniors; and the Connecticut chapter of the American Association of Retired Persons, or their designees; and

3. the long-term care ombudsman, or her designee.

The working group also includes the following members appointed by the CWCS executive director:

1. one family representative each of a person with Alzheimer’s disease and a person with dementia;

2. one person diagnosed with Alzheimer’s disease or dementia; and

3. one health care professional with expertise in diagnosing and treating Alzheimer’s disease and dementia.

The bill requires the executive director of the Commission on Women, Children, and Seniors to (1) serve as the working group’s chair person, (2) make appointments to the working group within 30 days after the bill’s passage, and (3) fill any vacancy. The commission’s administrative staff serves in this capacity for the working group.

**COMMITTEE ACTION**

Aging Committee

Joint Favorable Substitute

Yea 11 Nay 0 (02/26/2019)