

Aging Committee JOINT FAVORABLE REPORT

Bill No.: SB-827

AN ACT CONCERNING ALZHEIMER'S DISEASE AND DEMENTIA TRAINING

Title: AND BEST PRACTICES.

Vote Date: 2/26/2019

Vote Action: Joint Favorable Substitute

PH Date: 2/19/2019

File No.:

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SPONSORS OF BILL:

Aging Committee

REASONS FOR BILL:

This legislation requires that certain health care people who provide primary care or emergency treatment for adults to receive training in recognizing the signs and symptoms of Alzheimer's disease and dementia. Also they are to establish a working group to come up with recommendations on improving the care of Alzheimer's disease and dementia patients.

The Commissioner of Rehabilitation Services is directed to establish a working group to review the recommendations of the task force established to section 1 of SA 13-11, determine gaps in implementation of the task force's recommendations and make recommendations concerning best practices for Alzheimer's disease and dementia care.

The **Joint Favorable Substitute** language adds language that would include delirium and related cognitive impairments and geriatric depression. It also directs the Dept. of Public Health promulgate other regulations necessary for the implementation of the bill.

RESPONSE FROM ADMINISTRATION/AGENCY:

No testimony submitted

NATURE AND SOURCES OF SUPPORT:

Representative Christine Palm, 38th Assembly District: She submitted testimony in support of this proposal offering personal comments about her mother who suffered from a disease that claimed the dignity and quality of life of a formerly productive person. It was

made worse by the fact that her mother's personal doctor, who was a compassionate and professional, was unable to prove clinically that her mother was slipping into dementia simply because he did not have the training to give her anything beyond the basic 10-point questionnaire provided to physicians to ascertain the presence of deteriorating memory. She believes that if her mother's doctor had been better equipped he would have been able to diagnose her mother's illness earlier and could have prescribed medication to slow down the process of mental deterioration.

Mr. Steve Hernandez, Executive Director, Connecticut Commission on Women, Children and Seniors: He offered testimony in support of this legislation. According to the Alzheimer's Association there are 77,000 people in Connecticut and they anticipate that the number will rise to 91,000 by 2025.

While doctors can almost always determine if a person has dementia it is difficult to determine the exact cause and it is often not enough with a onetime visit to a general practitioner. Additional education and training for clinicians to recognize the signs and symptoms of dementia will help in obtaining an early and accurate diagnosis which could lead to early treatment. If those with Alzheimer's disease were diagnosed early it could collectively save between \$7 to almost \$8 trillion in health and long-term care costs.

They are asking that the legislature authorize a small working group of stakeholders to review the current report, determine gaps in implementation and make recommendations concerning best practices for Alzheimer's disease and dementia care.

Dr. George Kuchel, M.D, FRCP, AGSF, Director of UConn Center on Aging, UCONN Health: They offered testimony and additional information in support of this bill. Early diagnosis of Alzheimer's disease and related conditions associated with cognitive impairment has a major impact on treatment options and on the progress of research into these conditions. Consistent, evidence-based training of medical professionals in Connecticut on the diagnosis, treatment and care of these conditions would go a long way to improve these problems and in improving the care received by these patients.

They suggest that the Committee broaden the scope of the bill as it is currently written. To have a real effect on the cognitive health of our citizens, and to reflect where the science lies in the year 2019, training should not be limited only to Alzheimer's and dementia but should also include the broader umbrella of related conditions associated with cognitive impairment. They also suggest that the presence of depression in the context of Alzheimer's disease and other dementias can worsen cognitive symptoms so any educational program on Alzheimer's disease, dementia, delirium and related cognitive disorders should include training on geriatric depression.

They point out that they have strengths in these areas and they would welcome an invitation to participate if the bill moves forward.

D. Christopher van Dyck, Alzheimer's disease Research Unit, Yale University School of Medicine: He offered testimony in support of this proposal. They have known that physician and other healthcare professionals who provide primary care or emergency treatment need more training to recognize the signs and symptoms of Alzheimer's disease and dementia. Their efforts to provide this training through voluntary education programs have had much

success but only for those who attend their programs. As a researcher and doctor, and someone who has been personally affected by this disease he knows firsthand that early detection and diagnosis are essential to enable individuals and their families to understand what is happening to them and to plan for their future needs. Alzheimer's specialists depend on primary care and emergency healthcare professionals to detect the earliest signs and symptoms of the disease and to make the appropriate referrals. The proposed legislation will promote early detection and diagnosis, improve communication with the person with dementia, and reduce the risk and stigma associated with it and help to prevent avoidable hospitalizations.

Mr. Bob Savage and Ms. Stephani Shivers, LiveWell: They appeared today to testify in support of this proposal. Mr. Savage shared his own experience with Alzheimer's disease. He was diagnosed 4 years ago and he is still able to testify before the Committee today. He believes we need to be educating the public, to creating and leading advocacy efforts, influencing change, policy, services and supports. He believes that persons living well with dementia can be empowered by having a seat at the table on the work group.

Ms. Christy Kovel, Interim Executive Director/Director of Public Policy, Alzheimer's Association, Connecticut Chapter: They testified in support of this bill. According to their 2018 Alzheimer's Association Alzheimer's Disease Facts and Figures Special Report, early diagnosis saves costs of medical and long-term care for both families and the government. Among all American's alive today, if those who will get Alzheimer's' disease were diagnosed when they had mild cognitive impairment, before dementia it would collectively save \$7 trillion to almost \$8 trillion in health care and long-term costs.

They are asking that the legislature to authorize a small working group of stakeholder to review the current comprehensive report, determine gaps in implementation and make recommendations concerning best practices for Alzheimer's disease and dementia care.

Kristen Cusato, Director of Communications, Alzheimer's Association Connecticut Chapter: Ms. Cusato testified in support of this bill and related her own personal experience with her mother's diagnosis and journey with this disease. After her mother fell and was taken to the emergency room the ER staff were talking about giving her something to calm her down and she had to tell them not to give her Haldol because of an adverse effect it could have had on her, possibly life-threatening. They were unaware that some medications could have serious side effects on someone with dementia. She hopes the Committee will approve the bill so those in the health care field can be better educated about this disease.

Ms. Mag Morelli, President, LeadingAge Connecticut: She offered testimony in support of this legislation. They are particularly in favor of establishing a work group to review and update the current set of recommendations established by the Task Force on Alzheimer's disease and Dementia established in 2013. They participated on that task force and would like to be involved again. They support the suggestion by LiveWell to include persons living with dementia on the work group membership.

Dr. Kate Wessling, Family Physician, Higganum: Her e-mail testimony indicated her support for this bill. The proposal suggests a onetime course of no more than eight hours as a requirement for license renewal. She would amend the bill so that this should be a session of one hour and repeated every 6 years.

No testimony submitted in opposition

**Reported by: Gaia McDermott, Clerk
Richard Ferrari, Assistant Clerk**

3/1/19