

# HOUSE . . . . . No. 4116

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## The Commonwealth of Massachusetts

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HOUSE OF REPRESENTATIVES, January 16, 2018.

The committee Elder Affairs to whom were referred the petition (accompanied by bill, Senate, No. 341) of Patricia D. Jehlen, Jason M. Lewis, Marjorie C. Decker, James B. Eldridge and other members of the General Court for legislation relative to training of elder services workers in dementia and Alzheimer's, the petition (accompanied by bill, Senate, No. 1224) of Barbara A. L'Italien, Brian M. Ashe, Colleen M. Garry, Jason M. Lewis and other members of the General Court for legislation to improve treatment for Alzheimer's and dementia, the petition (accompanied by bill, Senate, No. 1239) of Michael O. Moore, James M. Cantwell, Barbara A. L'Italien, John W. Scibak and other members of the General Court for legislation relative to the Massachusetts Alzheimers Project, the petition (accompanied by bill, Senate, No. 1264) of Michael F. Rush, Timothy R. Whelan and Paul McMurtry for legislation relative to the safety of Alzheimer's disease patients, the joint petition (accompanied by bill, House, No. 335) of Bruce J. Ayers and John F. Keenan relative to services provided through the MassHealth frail elder home and community-based services waiver regarding early-onset Alzheimer's disease, the petition (accompanied by bill, House, No. 1200) of Paul McMurtry and others that continuing education necessary for the renewal of a physician's certificate of registration include courses on Alzheimer's disease, dementia and other cognitive impairments, the petition (accompanied by bill, House, No. 1223) of John W. Scibak and others for legislation to establish an Alzheimer's project in the Office of the Secretary of Health and Human Services and the petition (accompanied by bill, House, No. 2884) of Paul Brodeur and others that the Department of Elder Affairs be authorized to provide training to protective services caseworkers in recognizing signs and symptoms of cognitive impairments, including Alzheimer's disease, reports recommending that the accompanying bill (House, No. 4116) ought to pass.

For the committee,

DANIELLE W. GREGOIRE.

**HOUSE . . . . . No. 4116**

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**The Commonwealth of Massachusetts**

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**In the One Hundred and Ninetieth General Court  
(2017-2018)**  
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An Act relative to Alzheimer’s and related dementias in the Commonwealth.

*Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:*

1           SECTION 1. Chapter 6A of the General Laws is hereby amended by inserting after  
2 section 16Z the following section:-

3           Section 16AA. (a) The executive office of health and human services, hereinafter the  
4 executive office, shall develop and carry out an assessment of all state programs that address  
5 Alzheimer’s disease and shall create and maintain an integrated state plan to overcome  
6 Alzheimer's disease. The state plan shall include implementation steps and recommendations for  
7 priority actions based on the assessment. The purposes of the state plan shall be, but shall not be  
8 limited to, the following:

9           (1) accelerate the development of treatments that would prevent, halt or reverse the  
10 course of Alzheimer's disease;

11           (2) help coordinate the health care and treatment of individuals with Alzheimer's disease;

12 (3) ensure the inclusion of ethnic and racial populations, who have a higher risk for  
13 Alzheimer's disease or are least likely to receive care in clinical, research and service efforts,  
14 with the purpose of decreasing health disparities in Alzheimer's disease;

15 (4) coordinate with federal government bodies to integrate and inform the fight against  
16 Alzheimer's disease;

17 (5) provide information and coordination of Alzheimer's disease research and services  
18 across all state agencies; and

19 (6) implement a strategy to increase the diagnostic rate in the commonwealth.

20 (b) There is hereby established an advisory council on Alzheimer's disease research and  
21 treatment.

22 (1) The advisory council shall consist of the following persons: the secretary of health  
23 and human services, or a designee; the secretary of elder affairs, or a designee; the commissioner  
24 of public health, or a designee; the secretary of veterans' services, or a designee; the director of  
25 the office of Medicaid, or a designee; the House Chair of the Joint Committee on Elder Affairs,  
26 or a designee; the Senate Chair of the Joint Committee on Elder Affairs, or a designee; and 10  
27 persons to be appointed by the governor, as follows: 2 Alzheimer's disease patient advocates; 2  
28 Alzheimer's disease caregivers; 2 health care providers; 2 researchers with Alzheimer-related  
29 expertise in basic, translational, clinical or drug development science; and 2 voluntary health  
30 association representatives, including a representative from a state Alzheimer's disease  
31 organization that funds research and has demonstrated experience in care and patient services  
32 and a representative from a state based advocacy organization that provides services to families

33 and professionals, including information and referral, support groups, care consultation,  
34 education and safety services.

35 (2) The advisory council shall meet quarterly and such meetings shall be open to the  
36 public.

37 (3) The advisory council shall advise the executive office and the legislature on the state's  
38 Alzheimer's disease policy.

39 (4) The advisory council shall work with the secretary of health and human services to  
40 determine the number of persons diagnosed each year with early-onset Alzheimer's disease  
41 regardless of their age, as well as identify resources available and services needed for these  
42 individuals and associated costs.

43 (5) The advisory council shall annually provide to the executive office and the legislature  
44 a report which shall include: (i) information and recommendations on Alzheimer's disease  
45 policy; (ii) an evaluation of all state-funded efforts in Alzheimer's disease research, clinical care,  
46 institutional, home-based and community-based programs; (iii) the outcomes of such efforts; and  
47 (iv) any proposed updates to the state plan, which the advisory council shall annually review.

48 SECTION 2. Section 16 of chapter 19A of the General Laws, as appearing in the 2016  
49 Official Edition, is hereby amended by adding the following subsection:-

50 (f) The department shall require that all designated local agencies of the department  
51 provide training to their protective services caseworkers specifically focused on recognizing the  
52 signs and symptoms of cognitive impairments, including Alzheimer's disease, and understanding  
53 how cognitive impairment may affect screening, investigation and service planning.

54 SECTION 3. Section 2 of chapter 112 of the General Laws, as so appearing, is hereby  
55 amended by adding the following paragraph:-

56 The board shall require that any continuing education requirements necessary for the  
57 renewal of a physician's certificate of registration shall include the one-time completion of a  
58 course of training and education on the diagnosis, treatment, and care of patients with cognitive  
59 impairments, including, but not limited to, Alzheimer's disease and dementia; provided,  
60 however, that such course requirement shall only apply to physicians serving adult populations.

61 SECTION 4. Section 9F of said chapter 112, as so appearing, is hereby amended by  
62 adding the following paragraph:-

63 The board shall require that any continuing education requirements necessary for the  
64 renewal of a physician's assistant's certificate of registration shall include the one-time  
65 completion of a course of training and education on the diagnosis, treatment, and care of patients  
66 with cognitive impairments, including, but not limited to, Alzheimer's disease and dementia;  
67 provided, however, that such course requirement shall only apply to physician's assistants  
68 serving adult populations.

69 SECTION 5. Section 74 of said chapter 112, as so appearing, is hereby amended by  
70 adding the following paragraph:-

71 The board shall require that any continuing education requirements necessary for the  
72 renewal of a registered nurse's certificate of registration shall include the one-time completion of  
73 a course of training and education on the diagnosis, treatment, and care of patients with cognitive  
74 impairments, including, but not limited to, Alzheimer's disease and dementia; provided,

75 however, that such course requirement shall only apply to registered nurses serving adult  
76 populations.

77 SECTION 6. Section 74A of said chapter 112, as so appearing, is hereby amended by  
78 adding the following paragraph:-

79 The board shall require that any continuing education requirements necessary for the  
80 renewal of a practical nurse's certificate of licensure shall include the one-time completion of a  
81 course of training and education on the diagnosis, treatment, and care of patients with cognitive  
82 impairments, including, but not limited to, Alzheimer's disease and dementia; provided,  
83 however, that such course requirement shall only apply to practical nurses serving adult  
84 populations.

85 SECTION 7. Said chapter 112 is hereby amended by inserting after section 12G the  
86 following section:-

87 Section 12G1/2. A physician registered under this chapter, upon express or implied  
88 consent of a patient diagnosed with Alzheimer's disease, pursuant to and consistent with any  
89 federal or state law or regulation, shall report the Alzheimer's diagnosis to a family member or  
90 legal personal representative of the patient, and provide to said family member or legal personal  
91 representative information about care planning services, including assistance understanding the  
92 diagnosis as well as the medical and non-medical options for ongoing treatment, services, and  
93 supports, and information about how to obtain such treatments, services and supports.

94 SECTION 8. Notwithstanding any general or special law to the contrary, a hospital  
95 licensed pursuant to section 51 of chapter 111 of the General Laws, shall implement an  
96 operational plan for the recognition and management of patients with dementia or delirium in

97 acute-care settings. Said plan shall consider applicable recommendations made by the  
98 Alzheimer's and related dementias acute care advisory committee established pursuant to chapter  
99 228 of the acts of 2014. Said plan shall be completed and implemented by October 1, 2021, kept  
100 on file by each hospital and made available to the department of public health upon request.

101 SECTION 9. All physicians, physician's assistants, registered nurses and practical nurses  
102 required to complete the continuing education requirement of a one-time course of training and  
103 education on the diagnosis, treatment, and care of patients with cognitive impairments including,  
104 but not limited to, Alzheimer's disease and dementia pursuant to sections 2, 9F, 74 and 74A of  
105 chapter 112 of the General Laws shall complete such one-time course requirement on or before 4  
106 years from the effective date of this act.