

**Senate File 269 - Introduced**

SENATE FILE 269  
BY COMMITTEE ON HUMAN  
RESOURCES

(SUCCESSOR TO SF 199)

**A BILL FOR**

1 An Act relating to the state comprehensive Alzheimer's disease  
2 response strategy.  
3 BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF IOWA:

1 Section 1. NEW SECTION. 135P.1 Definitions.

2 As used in this chapter, unless the context otherwise  
3 requires:

4 1. "*Alzheimer's disease*" or "*Alzheimer's*" means a  
5 progressive, degenerative, fatal disorder that results in loss  
6 of memory, loss of thinking and language skills, and behavioral  
7 changes. "*Alzheimer's disease*" includes related dementias  
8 including vascular dementia, Parkinson's disease, dementia with  
9 Lewy bodies, frontotemporal dementia, Crutzfeldt-Jakob disease,  
10 normal pressure hydrocephalus, and mixed dementia.

11 2. "*Department*" means the department of public health.

12 Sec. 2. NEW SECTION. 135P.2 Alzheimer's disease —  
13 state-level coordination and comprehensive response strategy.

14 1. The department shall develop and administer, and  
15 provide for state-level coordination of, a comprehensive  
16 Alzheimer's disease response strategy in accordance with the  
17 recommendations of the stakeholder workgroup convened pursuant  
18 to 2011 Iowa Acts, chapter 61. The response strategy shall  
19 include development and monitoring of short-term and long-term  
20 objectives and action steps to ensure that individuals with  
21 Alzheimer's disease have access to the highest quality and  
22 most appropriate care at all stages of the disease and in  
23 all settings across the service and supports continuum. The  
24 response strategy may include prioritization of objectives  
25 and action steps to most efficiently utilize resources and  
26 funding. The department shall update the initial response  
27 strategy biennially and shall submit a progress report annually  
28 in January to the governor and the general assembly.

29 2. In providing state-level coordination, the department  
30 shall integrate public and private resources and programs,  
31 reduce duplication, evaluate programs and services to ensure  
32 that evidence-based, high-quality programs and services are  
33 available to maximize the positive impact for individuals with  
34 Alzheimer's and their families and caregivers, and promote  
35 public awareness.

1 3. In developing the comprehensive Alzheimer's disease  
2 response strategy, the department shall do all of the  
3 following:

4 a. Establish an Alzheimer's disease coordinator position  
5 in the department in a manner similar to those positions  
6 that address other chronic conditions in the state. The  
7 coordinator, in partnership with public and private entities  
8 and the multidisciplinary advisory council convened pursuant to  
9 paragraph "b", shall do all of the following:

10 (1) Implement the recommendations of the Alzheimer's  
11 disease stakeholder workgroup convened pursuant to 2011 Iowa  
12 Acts, chapter 61, and establish standards for the comprehensive  
13 Alzheimer's disease response strategy.

14 (2) Inform, educate, and empower the public regarding the  
15 impact of Alzheimer's disease, in order to increase awareness  
16 of the disease and in particular the benefits of early  
17 detection, while working to decrease the stigma associated with  
18 Alzheimer's disease.

19 (3) Monitor the prevalence of Alzheimer's disease and  
20 cognitive impairment in the state through data collection and  
21 coordination efforts. Such data shall be made available to  
22 and used to assist public and private efforts in developing  
23 evidence-based programs and policies that address Alzheimer's  
24 disease.

25 (4) Evaluate, and promote the improved effectiveness,  
26 accessibility, and quality of, clinical and population-based  
27 Alzheimer's services. The evaluation and promotion efforts  
28 shall include coordination of services to reach rural and  
29 underserved areas of the state.

30 (5) Ensure a competent public and private sector workforce  
31 specific to the challenges of Alzheimer's disease. The effort  
32 shall include coordinating existing state efforts to develop,  
33 implement, and evaluate curricula and training requirements  
34 for providers of services who interact with individuals with  
35 Alzheimer's disease.

1 (6) Act as a liaison to the aging and disabilities resource  
2 centers, area agencies on aging, Alzheimer's association  
3 chapters, the health and long-term care access advisory council  
4 created by the department to implement the directives of  
5 sections 135.163 and 135.164, and other entities to ensure  
6 Alzheimer's disease is appropriately addressed in the state.

7 (7) Secure public and private funding relating to dementia  
8 to fulfill the duties specified under this chapter.

9 b. Convene a multidisciplinary advisory council. The  
10 council shall assist and advise the department and the  
11 coordinator; develop partnerships to provide coordination,  
12 collaboration, and support for Alzheimer's-related services  
13 and programs throughout the state; and advocate on behalf of  
14 persons with Alzheimer's disease and their families. The  
15 advisory council shall, at a minimum, include representation  
16 from individuals with Alzheimer's disease and their families;  
17 caregivers and other providers of services and supports;  
18 medical providers including primary and specialty care  
19 providers, which shall include geriatricians, neurologists,  
20 and others with expertise in Alzheimer's disease; the  
21 Alzheimer's association; community-based organizations and  
22 other organizations with interest or expertise in Alzheimer's  
23 disease; academic institutions and programs with a focus  
24 on Alzheimer's disease and dementia; and appropriate state  
25 agencies including but not limited to the department on  
26 aging, the department of human services, the department of  
27 inspections and appeals, the department of public safety, and  
28 the department of workforce development. The department shall  
29 enlist private entities in providing staff support for the  
30 council.

31 Sec. 3. REPEAL. Section 135.171, Code 2013, is repealed.

32 Sec. 4. INCORPORATION OF EXISTING STATE DUTIES. The  
33 department of public health shall incorporate the requirements  
34 specified in section 135.171, Code 2013, into the comprehensive  
35 Alzheimer's disease strategy developed and administered

1 pursuant to this Act.

2

EXPLANATION

3 This bill relates to state-level coordination of and a  
4 comprehensive response strategy for Alzheimer's disease. The  
5 bill creates a new Code chapter, Code chapter 135P, to direct  
6 that the department of public health (DPH) is to develop and  
7 administer, and provide for state-level coordination of, a  
8 comprehensive Alzheimer's disease response strategy. The bill  
9 provides a definition of Alzheimer's disease which includes  
10 related dementias.

11 The bill directs DPH to develop and administer a  
12 comprehensive Alzheimer's disease response strategy, to update  
13 the strategy biennially, and to submit a progress report  
14 annually in January to the governor and the general assembly.  
15 The response strategy may include prioritization of objectives  
16 and action steps to most efficiently utilize resources and  
17 funding.

18 In providing state-level coordination, DPH is directed  
19 to integrate public and private resources and programs,  
20 reduce duplication, evaluate programs and services to ensure  
21 that evidence-based, high-quality programs and services are  
22 available to maximize the positive impact for individuals with  
23 Alzheimer's and their families and caregivers, and promote  
24 public awareness.

25 In developing and administering the comprehensive  
26 Alzheimer's disease response strategy, DPH is directed to  
27 establish an Alzheimer's disease coordinator within the  
28 department and to convene a multidisciplinary advisory council.

29 The coordinator, in partnership with public and private  
30 entities and the multidisciplinary advisory council, is  
31 directed to implement the recommendations of the 2011  
32 Alzheimer's disease stakeholder workgroup, and establish  
33 standards for the comprehensive Alzheimer's disease response  
34 strategy; inform, educate, and empower the public regarding  
35 the impact of Alzheimer's disease, in order to increase

1 awareness of the disease and in particular the benefits  
2 of early detection, while working to decrease the stigma  
3 associated with Alzheimer's disease; monitor the prevalence  
4 of Alzheimer's disease and cognitive impairment in the state  
5 through data collection and coordination efforts and make  
6 the data available to assist public and private efforts in  
7 developing evidence-based programs and policies that address  
8 Alzheimer's disease; evaluate, and promote the improved  
9 effectiveness, accessibility and quality of, clinical and  
10 population-based Alzheimer's services, including coordination  
11 of services to reach rural and underserved areas of the  
12 state; ensure a competent public and private sector workforce  
13 specific to the challenges of Alzheimer's disease including  
14 through coordination of state efforts regarding curricula and  
15 training requirements for providers of services who interact  
16 with individuals with Alzheimer's disease; act as a liaison to  
17 various entities to ensure Alzheimer's disease is appropriately  
18 addressed in the state; and secure public and private funding  
19 relating to dementia to fulfill the duties specified under this  
20 chapter.

21 The multidisciplinary advisory council is to assist and  
22 advise the department and the coordinator; develop partnerships  
23 related to Alzheimer's-related services and programs throughout  
24 the state; and advocate on behalf of persons with Alzheimer's  
25 disease and their families. The bill specifies the minimum  
26 representation to be included in the advisory council.

27 The bill repeals the Code section relating to a directive  
28 to DPH to analyze Iowa's population to determine the existing  
29 service utilization and future service needs of persons with  
30 Alzheimer's disease and similar forms of irreversible dementia  
31 (Code section 135.171). DPH is required to incorporate this  
32 directive into the comprehensive Alzheimer's disease response  
33 strategy developed and administered under the bill.