

1 AN ACT relating to services for Alzheimer's and related dementias.

2 *Be it enacted by the General Assembly of the Commonwealth of Kentucky:*

3 ➔Section 1. KRS 194A.601 is amended to read as follows:

4 (1) The Office of Dementia Services is established within the cabinet. The purpose of
5 the office is to oversee information and resources related to policy and services
6 affecting residents of Kentucky with dementia, and the caregivers and families of
7 the residents.

8 (2) The dementia services coordinator shall be a full-time, permanent employee and
9 shall be responsible for the staffing and operational details of the office.

10 (3) *The dementia services coordinator shall prepare an annual report on the*
11 *operations of the office and council, which shall include but not be limited to a*
12 *progress update on the implementation of the Kentucky Alzheimer's and Related*
13 *Dementias State Plan and any state plan amendments or recommendations. The*
14 *report shall be submitted to the Legislative Research Commission for referral*
15 ~~A report on the operations of the office shall be made to the secretary within ninety~~
16 ~~(90) days of June 29, 2021. An annual report on the operation of the office shall be~~
17 ~~made~~ to the Interim Joint Committee on Health Services by December 1 of each
18 year.

19 (4){(3)} The duties of the office shall include but not be limited to:

20 (a) Creating, implementing, and updating the Kentucky Alzheimer's and Related
21 Dementias State Plan;

22 (b) Coordinating and managing the Alzheimer's Disease and Related Disorders
23 Advisory Council;

24 (c) Assessing and analyzing dementia-specific data collected by the cabinet,
25 including the behavioral risk factor surveillance system, and data from other
26 relevant departments and divisions;

27 (d) Evaluating of state-funded dementia services;

- 1 (e) Identifying and supporting the development of dementia-specific trainings;
- 2 (f) Streamlining all applicable state government services to increase efficiency
- 3 and improve the quality of care in residential and home and community-based
- 4 settings;
- 5 (g) Identifying any duplicative services to eliminate all unnecessary costs;
- 6 (h) Identifying and applying for grant opportunities to expand the scope of
- 7 services while reducing state costs; and
- 8 (i) Completing other duties relevant to supporting policy development and
- 9 implementation to support individuals with dementia and their ~~family~~
- 10 caregivers.

11 ➔Section 2. KRS 194A.603 is amended to read as follows:

- 12 (1) The Alzheimer's Disease and Related Disorders Advisory Council is created. The
- 13 council shall report directly to the office.
- 14 (2) The council shall be composed of the following ~~sixteen (16)~~~~fifteen (15)~~ members:
 - 15 (a) The secretary of the Cabinet for Health and Family Services or his or her
 - 16 designee;
 - 17 (b) The commissioner of the Department for Aging and Independent Living or his
 - 18 or her designee;
 - 19 (c) The commissioner of the Department for Public Health or his or her designee;
 - 20 (d) The commissioner of the Department for Medicaid Services or his or her
 - 21 designee;
 - 22 (e) The state long-term care ombudsman or his or her designee;
 - 23 (f) The executive director of the Area Agencies on Aging or his or her designee;
 - 24 (g) Two (2) unaffiliated individuals who are current or former unpaid
 - 25 caregivers for individuals~~One (1) individual who is the family caregiver of~~
 - 26 ~~an individual~~ living with Alzheimer's disease or another dementia, appointed
 - 27 by the Governor from a list of names of qualified persons submitted by any

1 expenses.

2 (4) The council shall meet at least quarterly and at other such times as it determines
3 necessary to perform its duties. A majority of the members shall constitute a
4 quorum for the transaction of the council's business.

5 (5) The council shall:

6 (a) Elect its own chairperson and establish other officers and subcommittees as
7 needed to execute the duties of the council;

8 (b) Adopt bylaws and operate under its bylaws;

9 (c) By December 1, 2029, and by December 1~~[Starting on July 1, 2021, and
repeating]~~ every four (4) years thereafter~~[after that date]~~, submit an updated
10 Kentucky Alzheimer's and Related Dementias State Plan to the Legislative
11 Research Commission for referral to the Interim Joint Committee on
12 Health Services~~[Governor for his or her approval and thereafter make it
13 available to the General Assembly]~~. If the council determines that
14 amendments need to be made to the state plan, an amended Kentucky
15 Alzheimer's and Related Dementia State Plan may be presented to the
16 Legislative Research Commission for referral to the Interim Joint
17 Committee on Health Services~~[Governor for review and approval]~~;

18 (d) Beginning December 1 of each year, develop and implement a year-long
19 initiative that advances a key area of the Kentucky Alzheimer's and Related
20 Dementias State Plan. The key area to be addressed each year shall be
21 determined by a vote of the council, unless otherwise provided by law.
22 Completed initiatives may be reviewed by the council annually. After review,
23 at the discretion of the council, completed initiatives may be updated as
24 necessary;~~[Starting on July 1, 2021, and repeating every year after that date,~~
25 submit an annual report on the implementation progress of the Kentucky
26 Alzheimer's and Related Dementias State Plan to the Governor. This annual

1 ~~report shall include a summary of the progress toward implementation of the~~
2 ~~state plan and recommendations for amendments to the state plan;}~~ and

3 (e) Serve in an advisory capacity to the Governor, the General Assembly, the
4 cabinet and all other state agencies on matters relating to the Kentucky
5 Alzheimer's and Related Dementias State Plan. The council shall review and
6 make recommendations regarding progress towards the goals of the state plan
7 and on progress in implementing resources and services to serve individuals
8 with dementia and related diseases across Kentucky in the future.

9 (6) Members shall serve for a term of two (2) years and may be reappointed. All
10 subsequent appointments or reappointments shall be for terms of two (2) years. If
11 an appointee resigns or is otherwise unable to complete the appointed term, the
12 Governor shall appoint a new individual whose expertise or experience satisfies the
13 vacated position within ninety (90) days.

14 ➔Section 3. (1) Beginning December 1, 2026, the Alzheimer's Disease and
15 Related Disorders Advisory Council, with support from the Office of Dementia Services,
16 shall develop and implement a health care provider toolkit on the early detection and
17 diagnosis of Alzheimer's and related disorders as the initial year-long initiative required
18 under subsection (5)(d) of Section 2 of this Act. The toolkit shall include but not be
19 limited to:

20 (a) Validated cognitive assessments, including during annual Medicare wellness
21 visits;

22 (b) Best practices for person-centered care planning, including but not limited to:
23 1. The Medicaid care plan billing code for individuals with cognitive
24 impairment; and

25 2. Referral pathways to community-based services and care planning resources;

26 (c) Risk factors for Alzheimer's disease and related dementias, including chronic
27 disease;

1 (d) Risk-reduction strategies, including information on lifestyle interventions to
2 reduce dementia risk;

3 (e) The importance of early detection and diagnosis of Alzheimer's disease and
4 related dementias;

5 (f) Continuing education opportunities related to dementia care best practices;

6 (g) Information on approved diagnostics and treatments; and

7 (h) Resources for caregivers.

8 (2) The council shall complete the toolkit by December 1, 2027. The Office of
9 Dementia Services, in coordination with the Department for Public Health and with
10 support from the council, shall distribute the toolkit across healthcare sectors, including
11 but not limited to the following:

12 (a) Managed care organizations;

13 (b) Academic research institutions;

14 (c) Federally qualified health centers;

15 (d) Associations representing hospitals and health systems;

16 (e) Associations representing physicians and physician assistants;

17 (f) Associations representing nurses;

18 (g) Associations representing health care professionals; and

19 (h) Any other public or private organization, entity, or part of an organization or
20 entity the council deems necessary.