CHAPTER 233

HEALTH AND ENVIRONMENT

SENATE BILL 08-058

BY SENATOR(S) Boyd, Bacon, Gordon, Isgar, Penry, Spence, Tochtrop, Gibbs, Groff, Morse, Shaffer, Veiga, Ward, Williams, and Windels:

also REPRESENTATIVE(S) Riesberg, Gagliardi, Green, Kerr J., Mitchell V., Todd, Buescher, Butcher, Carroll M., Carroll T., Gallegos, Garza-Hicks, Hodge, Kefalas, Kerr A., Levy, Madden, McFadyen, McGihon, Merrifield, Middleton, Peniston, Primavera, Roberts, Romanoff, Solano, and Stafford.

AN ACT

CONCERNING THE CREATION OF THE COLORADO ALZHEIMER'S COORDINATING COUNCIL TO DEVELOP A STATE PLAN TO ADDRESS THE INCREASE IN THE INCIDENCE OF ALZHEIMER'S DISEASE IN THE STATE.

Be it enacted by the General Assembly of the State of Colorado:

SECTION 1. Title 25, Colorado Revised Statutes, is amended BY THE ADDITION OF A NEW ARTICLE to read:

ARTICLE 38 Colorado Alzheimer's Coordinating Council

25-38-101. Short title. This article shall be known and may be cited as the "Colorado Alzheimer's Coordinating Council Act".

25-38-102. Legislative declaration. (1) The General assembly hereby finds and declares that:

- (a) Currently, approximately sixty-five thousand Coloradans are living with Alzheimer's disease, and that number is projected to increase one hundred twenty-four percent by the year 2025, affecting an estimated one hundred forty thousand people in the state;
- (b) NEARLY SIXTY PERCENT OF ALL NURSING HOME RESIDENTS IN COLORADO HAVE ALZHEIMER'S DISEASE OR ANOTHER FORM OF DEMENTIA, WITH NEARLY FIFTY PERCENT OF THE COSTS OF THOSE RESIDENTS PAID FOR THROUGH THE STATE

Capital letters indicate new material added to existing statutes; dashes through words indicate deletions from existing statutes and such material not part of act.

MEDICAID PROGRAM;

- (c) ADDITIONALLY, THE DISEASE HAS A DEVASTATING EFFECT ON FAMILIES, WITH NEARLY SEVENTY PERCENT OF INDIVIDUALS WITH THE DISEASE LIVING AT HOME AND NEARLY FORTY PERCENT OF FAMILY CAREGIVERS REPORTING HIGH LEVELS OF EMOTIONAL AND FINANCIAL STRESS THAT IMPACTS THEIR JOB PERFORMANCE;
- (d) THE LOST PRODUCTIVITY OF EMPLOYEES WHO ARE CAREGIVERS OF ALZHEIMER'S DISEASE PATIENTS AND THE COSTS OF THE RESULTANT HEALTH CARE AND LONG-TERM CARE ADD SUBSTANTIALLY TO THE COST OF DOING BUSINESS IN THE STATE;
- (e) The epidemic growth in the number of individuals diagnosed with Alzheimer's disease and the resultant health care costs associated with the treatment and care of diagnosed individuals threatens the public and private health care systems in the state; and
- (f) ALZHEIMER'S DISEASE COSTS THE STATE AND PRIVATE BUSINESSES BILLIONS OF DOLLARS EACH YEAR.
- (2) THE GENERAL ASSEMBLY FURTHER FINDS AND DECLARES THAT IT IS IMPORTANT:
- (a) FOR THE PUBLIC AND PRIVATE SECTORS TO COORDINATE EXPERTISE OVER A BROAD SPECTRUM AND PROVIDE COLORADO WITH SHORT- AND LONG-TERM PLANNING TO RESPOND TO THE ALZHEIMER'S DISEASE EPIDEMIC; AND
- (b) TO DEVELOP A COLORADO-SPECIFIC ALZHEIMER'S DISEASE PLAN TO IDENTIFY THE INFRASTRUCTURE AND ACCOUNTABILITY NECESSARY TO BUILD DEMENTIA-CAPABLE PROGRAMS TO HELP COLORADO DEAL WITH THE GROWING NUMBER OF ALZHEIMER'S DISEASE PATIENTS AND TO MANAGE THE IMPACT ON FAMILY CAREGIVERS, PATIENTS, AND PUBLIC AND PRIVATE EMPLOYERS IN THE STATE.
- (3) THE GENERAL ASSEMBLY FURTHER DETERMINES THAT IT IS NECESSARY TO CREATE A COUNCIL OF STAKEHOLDERS AND POLICYMAKERS TO DEVELOP A COMPREHENSIVE STATE PLAN ON A RANGE OF ISSUES THAT IMPACT PUBLIC POLICY DECISIONS, INCLUDING, WITHOUT LIMITATION:
 - (a) THE AVAILABILITY OF DIAGNOSTIC SERVICES;
- (b) THE SAFETY OF PERSONS WITH ALZHEIMER'S DISEASE WHO WANDER AWAY FROM THEIR HOME OR OTHER LOCATION;
 - (c) STATE INSTITUTION-BASED RESEARCH;
- (d) MEDICAID COVERAGE FOR LONG-TERM CARE FOR THOSE ALZHEIMER'S DISEASE PATIENTS AND FAMILIES THAT CANNOT AFFORD THE COSTS OF LONG-TERM CARE; AND
 - (e) THE QUALITY AND AVAILABILITY OF HEALTH CARE SERVICES FOR

ALZHEIMER'S DISEASE PATIENTS AND THEIR CAREGIVERS.

- **25-38-103. Definitions.** As used in this article, unless the context otherwise requires:
- (1) "COUNCIL" MEANS THE COLORADO ALZHEIMER'S COORDINATING COUNCIL CREATED IN SECTION 25-38-104.
- (2) "DESIGNATED ORGANIZATION" MEANS THE NONPROFIT OR PRIVATE ORGANIZATION DESIGNATED BY THE PRESIDENT OF THE SENATE AND THE SPEAKER OF THE HOUSE OF REPRESENTATIVES PURSUANT TO SECTION 25-38-107 (1) AS THE CUSTODIAN OF FUNDS FOR THE COUNCIL.
- (3) "PARTICIPATING STATE DEPARTMENTS" MEANS THE DEPARTMENTS OF HUMAN SERVICES, HEALTH CARE POLICY AND FINANCING, PUBLIC HEALTH AND ENVIRONMENT, PUBLIC SAFETY, AND LABOR AND EMPLOYMENT, OR THEIR SUCCESSOR DEPARTMENTS.
- (4) "STATE PLAN" MEANS THE COLORADO STATE PLAN FOR ALZHEIMER'S DISEASE DEVELOPED BY THE COUNCIL PURSUANT TO THIS ARTICLE.
- **25-38-104.** Colorado Alzheimer's coordinating council creation membership procedures. (1) There is hereby created in the legislative branch the Colorado Alzheimer's coordinating council, which shall be charged with assessing the current and future impact of Alzheimer's disease in Colorado and formulating a Colorado state plan for Alzheimer's disease to address the impacts of the disease in the state.
 - (2) THE COUNCIL SHALL BE COMPOSED OF TWENTY-TWO MEMBERS AS FOLLOWS:
- (a) The president of the senate and the speaker of the house of representatives shall jointly appoint eleven members as follows:
 - (I) ONE MEMBER WHO IS DIAGNOSED WITH EARLY-STAGE ALZHEIMER'S DISEASE;
- (II) ONE MEMBER WHO IS OR HAS BEEN THE CAREGIVER OF A PERSON WITH ALZHEIMER'S DISEASE;
 - (III) ONE MEMBER WHO REPRESENTS THE NURSING HOME INDUSTRY;
 - (IV) ONE MEMBER WHO REPRESENTS THE ASSISTED LIVING INDUSTRY;
 - (V) ONE MEMBER WHO REPRESENTS THE ADULT DAY SERVICES INDUSTRY;
 - (VI) ONE MEMBER WHO REPRESENTS THE MEDICAL CARE PROVIDER COMMUNITY;
- (VII) ONE MEMBER WHO REPRESENTS A HOSPITAL LICENSED OR CERTIFIED IN THE STATE;
 - (VIII) ONE MEMBER WHO IS AN ALZHEIMER'S DISEASE RESEARCHER;

- (IX) ONE MEMBER WHO REPRESENTS THE ALZHEIMER'S ASSOCIATION COLORADO CHAPTER;
 - (X) ONE MEMBER REPRESENTING THE BUSINESS COMMUNITY; AND
- (XI) THE STATE LONG-TERM CARE OMBUDSMAN, AS DEFINED IN SECTION 26-11.5-103, C.R.S., OR A LOCAL OMBUDSMAN, AS DEFINED IN SECTION 26-11.5-103, C.R.S., THAT IS RECOMMENDED TO THE PRESIDENT AND THE SPEAKER BY THE STATE LONG-TERM CARE OMBUDSMAN;
- (b) The president of the senate shall appoint one member who serves in the senate;
- (c) The speaker of the house of representatives shall appoint one member who serves in the house of representatives:
- (d) The minority leader of the senate shall appoint one member who serves in the senate;
- (e) THE MINORITY LEADER OF THE HOUSE OF REPRESENTATIVES SHALL APPOINT ONE MEMBER WHO SERVES IN THE HOUSE OF REPRESENTATIVES;
- (f) The Governor shall appoint two members, one of whom shall be a mental health professional and one of whom shall represent home care agencies; and
- (g) The executive directors of each of the five participating state departments or their designees.
- (3) The appointing authorities shall make appointments to the council by December 1, 2008, to allow the council to begin meeting no later than March 1, 2009.
- (4) THE COUNCIL SHALL ELECT A CHAIR AND VICE-CHAIR FROM AMONG ITS MEMBERS. MEMBERS OF THE COUNCIL SHALL SERVE WITHOUT COMPENSATION BUT MAY BE REIMBURSED FOR ALL ACTUAL AND NECESSARY EXPENSES INCURRED IN THE PERFORMANCE OF THEIR DUTIES.
- (5) THE COUNCIL SHALL MEET AT LEAST QUARTERLY OR MORE OFTEN AS DEEMED NECESSARY BY THE COUNCIL. MEETINGS OF THE COUNCIL SHALL BE OPEN TO THE PUBLIC IN ACCORDANCE WITH PART 4 OF ARTICLE 6 OF TITLE 24, C.R.S., AND RECORDS OF THE COUNCIL SHALL BE OPEN FOR PUBLIC INSPECTION IN ACCORDANCE WITH PART 2 OF ARTICLE 72 OF TITLE 24, C.R.S.
 - (6) THE COUNCIL MAY:
- (a) Adopt rules of procedure it deems necessary to facilitate the orderly conduct of its business;
- (b) ESTABLISH TASK FORCES OR COMMITTEES OF ITS MEMBERS AND OTHERS TO ASSIST IN THE PERFORMANCE OF THE COUNCIL'S DUTIES; AND

(c) ACCEPT WRITTEN OR ORAL INPUT FROM THE PUBLIC AND ANY RELEVANT SOURCE.

25-38-105. Council duties and responsibilities - assessment of Alzheimer's disease - development of plan. (1) THE COUNCIL SHALL:

- (a) ASSESS THE CURRENT AND FUTURE IMPACT OF ALZHEIMER'S DISEASE ON THE RESIDENTS OF COLORADO:
- (b) SOLICIT AND GATHER INFORMATION NECESSARY FOR REVIEW AND DISCUSSION BY THE COUNCIL;
- (c) GATHER FEEDBACK FROM INDIVIDUALS AND FAMILIES AFFECTED BY ALZHEIMER'S DISEASE AS WELL AS FROM THE GENERAL PUBLIC;
- (d) REVIEW THE AVAILABILITY OF EXISTING INDUSTRIES, SERVICES, AND RESOURCES ADDRESSING THE NEEDS OF INDIVIDUALS WITH ALZHEIMER'S DISEASE, THEIR FAMILIES, AND THEIR CAREGIVERS;
- (e) DEVELOP A STRATEGY TO MOBILIZE A STATE RESPONSE TO THE INCREASING INCIDENCE OF ALZHEIMER'S DISEASE IN COLORADO;
- (f) Consider other issues related to Alzheimer's disease that are identified by the council;
- (g) FORMULATE A COMPREHENSIVE STATE PLAN FOR ADDRESSING ALZHEIMER'S DISEASE THAT INCLUDES A SHORT- AND LONG-TERM PLAN FOR CONFRONTING THE CHALLENGES PRESENTED BY THE RAPID GROWTH IN THE ALZHEIMER'S DISEASE POPULATION; AND
- (h) Submit a report of its findings and date-specific recommendations for statutory, administrative rule, and procedure changes to the governor, general assembly, and participating state departments, in the form of a Colorado state plan for Alzheimer's disease.
- (2) THE COUNCIL'S ASSESSMENT AND RECOMMENDATIONS SHALL INCLUDE AN EXAMINATION OF AT LEAST THE FOLLOWING:
- (a) TRENDS IN THE STATE'S ALZHEIMER'S DISEASE POPULATION AND NEEDS, INCLUDING THE CHANGING SIZE AND NATURE OF THE POPULATION WITH DEMENTIA. IN ITS EXAMINATION OF THESE TRENDS, THE COUNCIL SHALL REVIEW:
- (I) THE STATE'S ROLE IN LONG-TERM CARE, FAMILY CAREGIVER SUPPORT, AND ASSISTANCE TO PERSONS WITH EARLY-STAGE AND EARLY ONSET OF ALZHEIMER'S DISEASE; AND
- (II) THE STATE'S POLICY REGARDING PERSONS WITH ALZHEIMER'S DISEASE AND DEVELOPMENTAL DISABILITIES.
- (b) EXISTING SERVICES, RESOURCES, AND CAPACITY, INCLUDING, BUT NOT LIMITED TO, THE FOLLOWING:

- (I) THE TYPE, COSTS, AND AVAILABILITY OF DEMENTIA SERVICES;
- (II) DEMENTIA-SPECIFIC TRAINING REQUIREMENTS FOR LONG-TERM CARE STAFF;
- (III) QUALITY CARE MEASURES FOR RESIDENTIAL CARE FACILITIES;
- (IV) THE CAPACITY OF PUBLIC SAFETY AND LAW ENFORCEMENT AGENCIES TO RESPOND TO INDIVIDUALS WITH ALZHEIMER'S DISEASE:
- (V) THE AVAILABILITY OF HOME- AND COMMUNITY-BASED RESOURCES FOR INDIVIDUALS WITH ALZHEIMER'S DISEASE AND THE AVAILABILITY OF RESPITE CARE TO ASSIST FAMILIES;
- (VI) AN INVENTORY OF LONG-TERM CARE FACILITIES OR DEMENTIA CARE UNITS IN THE STATE:
- (VII) THE ADEQUACY AND APPROPRIATENESS OF GERIATRIC-PSYCHIATRIC SERVICES FOR INDIVIDUALS WITH BEHAVIOR DISORDERS ASSOCIATED WITH ALZHEIMER'S DISEASE AND RELATED DEMENTIA;
- (VIII) Assisted-living residential options for individuals with dementia; and
- (IX) STATE SUPPORT OF ALZHEIMER'S DISEASE RESEARCH THROUGH THE STATE INSTITUTIONS OF HIGHER EDUCATION AND THROUGH OTHER RESOURCES;
- (c) EVIDENCE-BASED, BEST PRACTICE STRATEGIES DEVELOPED BY PROFESSIONAL ORGANIZATIONS OR IDENTIFIED BY ALZHEIMER'S DISEASE OR DEMENTIA PLANS IN OTHER STATES TO HELP REDUCE THE OVERWHELMING COSTS OF DEMENTIA; AND
- (d) Necessary state policies or responses, including, but not limited to, the following:
- (I) Directions for the provision of clear and coordinated services and support to individuals and families living with Alzheimer's disease and related disorders; and
- (II) STRATEGIES TO ADDRESS ANY IDENTIFIED GAPS IN SERVICES FOR ALZHEIMER'S DISEASE PATIENTS AND THEIR FAMILIES AND CAREGIVERS.
- (3) THE COUNCIL SHALL NOT PARTICIPATE IN INFORMATION GATHERING, DISCUSSIONS, OR DECISIONS RELATING TO THE CARE OF INDIVIDUAL ALZHEIMER'S DISEASE PATIENTS.
- 25-38-106. Council report joint legislative meeting. (1) NO LATER THAN EIGHTEEN MONTHS AFTER THE COUNCIL'S FIRST MEETING, THE COUNCIL SHALL SUBMIT AN INITIAL REPORT OF ITS FINDINGS AND DATE-SPECIFIC RECOMMENDATIONS FOR STATUTORY, ADMINISTRATIVE RULE, AND PROCEDURE CHANGES TO THE GOVERNOR, THE GENERAL ASSEMBLY, AND THE PARTICIPATING STATE DEPARTMENTS, IN THE FORM OF A STATE PLAN FOR ALZHEIMER'S DISEASE. THE INITIAL REPORT SHALL INCLUDE THE EXAMINATION OF THE ISSUES DESCRIBED IN

SECTION 25-38-105 (2) AND THE COUNCIL'S RECOMMENDATIONS BASED ON SUCH EXAMINATIONS. THE COUNCIL MAY SUBMIT SUPPLEMENTAL REPORTS OR DATA AS NECESSARY TO CLARIFY OR EXPAND UPON ISSUES IN THE INITIAL REPORT OR UPON REQUEST OF THE PERSONS OR ENTITIES REVIEWING THE INITIAL REPORT.

- (2) WITHIN SIX MONTHS AFTER SUBMISSION OF THE COUNCIL'S INITIAL REPORT, THE CHAIRS OF THE HEALTH AND HUMAN SERVICES COMMITTEES OF THE SENATE AND HOUSE OF REPRESENTATIVES OR THEIR SUCCESSOR COMMITTEES SHALL CONVENE AT LEAST ONE JOINT MEETING OF THEIR RESPECTIVE COMMITTEES, THE GOVERNOR OR THE GOVERNOR'S DESIGNEE, AND THE PARTICIPATING STATE DEPARTMENTS TO REVIEW THE COUNCIL'S INITIAL REPORT AND ANY SUPPLEMENTAL REPORTS OR DATA SUBMITTED BY THE COUNCIL AND CONSIDER THE COUNCIL'S RECOMMENDATIONS THAT MAY IMPACT THE STATE'S HEALTH CARE SYSTEM AND THE STATE BUDGET. BASED ON THEIR REVIEW OF THE COUNCIL'S REPORT, MEMBERS OF THE GENERAL ASSEMBLY, THE GOVERNOR, OR THE PARTICIPATING STATE DEPARTMENTS MAY RECOMMEND STRATEGIES TO IMPROVE SERVICES AND SUPPORT TO INDIVIDUALS AND FAMILIES LIVING WITH ALZHEIMER'S DISEASE.
- 25-38-107. Alzheimer's coordinating council designation of organization to accept donations authority to engage staff support creation of cash fund. (1) (a) The speaker of the house of representatives and the president of the senate shall designate a nonprofit or private organization as the custodian of funds for the council. The designated organization is authorized to receive and expend any funds necessary for the operation of the council and may solicit and accept monetary and in-kind gifts, grants, and donations for use in furtherance of the council's duties and responsibilities. Any moneys donated or awarded to the designated organization for the benefit of the council are not subject to appropriation by the general assembly, and any such moneys that are unexpended and unencumbered at the time the council is dissolved or this article repeals pursuant to section 25-38-108 shall be returned to the donors or grantors on a pro rata basis, as determined by the designated organization.
- (b) The designated organization, on behalf of the council, may accept in-kind staff support from nonprofit agencies or private groups or may contract with nonprofit agencies or private groups for the purpose of providing staff support to assist the council in conducting its duties and responsibilities. Any staff support personnel provided by a nonprofit agency or private group, either donated or engaged through a contract, shall not be considered employees of the council or the designated organization.
- (c) The designated organization shall prepare an operating budget for the council. Prior to expending any of the moneys it receives, the council shall transmit a copy of the budget to the president of the senate and the speaker of the house of representatives and shall certify that there is adequate funding available to cover the expenses of the council as identified in the budget.
 - (2) (a) There is hereby created in the state treasury the Alzheimer's

COORDINATING COUNCIL CASH FUND, WHICH SHALL ONLY CONSIST OF ANY MONEYS APPROPRIATED TO THE FUND BY THE GENERAL ASSEMBLY. MONEYS IN THE FUND SHALL BE SUBJECT TO ANNUAL APPROPRIATION BY THE GENERAL ASSEMBLY TO THE COUNCIL FOR THE PURPOSES SET FORTH IN THIS ARTICLE.

(b) Any unencumbered or unexpended moneys remaining in the fund at the end of any fiscal year shall remain in the fund and shall not revert to the general fund. If, at the time this article is repealed pursuant to section 25-38-108, the fund contains a balance of unencumbered and unexpended moneys, those moneys shall revert to the general fund.

25-38-108. Repeal of article. This article is repealed, effective July 1, 2012.

SECTION 2. Effective date. This act shall take effect at 12:01 a.m. on the day following the expiration of the ninety-day period after final adjournment of the general assembly that is allowed for submitting a referendum petition pursuant to article V, section 1 (3) of the state constitution, (August 6, 2008, if adjournment sine die is on May 7, 2008); except that, if a referendum petition is filed against this act or an item, section, or part of this act within such period, then the act, item, section, or part, if approved by the people, shall take effect on the date of the official declaration of the vote thereon by proclamation of the governor.

Approved: May 20, 2008