

Alzheimer’s Disease Task Force

This legislation requires the state to bring together state leaders, long-term care industry representatives, social services organizations serving persons with dementia, and families living with dementia to create a comprehensive state government strategy to serve people with dementia. The strategy is required to identify service gaps and provide date-specific recommendations, including suggested legislation, in order to fill those service gaps.

Submitted as:

Tennessee

[Public Chapter 566](#)

Status: Enacted into law in 2007.

Suggested State Legislation

(Title, enacting clause, etc.)

1 Section 1. [*Short Title.*] This Act shall be cited as “An Act to Create an Alzheimer’s
2 Disease Task Force.”

3
4 Section 2. [*Alzheimer’s Disease Task Force Established.*]

5 (a) A [state] Alzheimer’s Disease Task Force is established. This task force shall consist of
6 [fourteen (14)] volunteer members, which shall include the [chairs of the Senate General Welfare
7 Committee and the House Health and Human Resources Committee or their designees, one
8 member of the Senate to be appointed by the Speaker of the Senate, one member of the House of
9 Representatives to be appointed by the Speaker of the House of Representatives, at least one
10 person with Alzheimer’s disease, one caregiver of a person with Alzheimer’s disease, a
11 representative of the Health Care Association, a representative of the Association of Homes and
12 Services for the Aging, a representative of the Association for Adult Day Services, a
13 representative of the medical care provider community, an Alzheimer’s disease researcher, and
14 [two (2)] representatives of the Alzheimer’s Association]. Non-legislative members of the task
15 force shall be appointed by the [governor].

16 (b) Appointments shall be made within [sixty (60)] days after the effective date of this Act.
17 The [governor] shall designate the chair of the task force and shall set the date of the first meeting
18 of the task force. At the organizational meeting, a vice chair and secretary shall be elected from
19 the committee's membership.
20

21 Section 3. [*Task Force Administrative Support.*]

22 (a) The [executive director] of the [Commission on Aging and Disability] shall provide
23 necessary administrative support to the Alzheimer’s Disease Task Force. The task force is also
24 authorized to request and receive assistance from any department, agency or entity of state
25 government, upon request of the chair.

26 (b) Members of the task force are volunteers and serve without pay, except that non-
27 legislative members may be reimbursed for travel expenses in accordance with travel regulations
28 promulgated by the [Commissioner of Finance and Administration] and approved by the [attorney
29 general]. Members of the [general assembly] shall be compensated in accordance with the
30 provisions of [insert citation]. In order to encourage participation by persons with Alzheimer’s
31 disease and their caretakers, a reasonable allowance may be made to reimburse travel expenses
32 and respite care in circumstances of need for such people.
33

34 Section 4. [*Duties of Alzheimer’s Disease Task Force.*]

35 (a) The Alzheimer’s Disease Task Force is directed to assess the current and future impact
36 of Alzheimer’s disease on residents in this state; to examine the existing industries, services and
37 resources addressing the needs of people with Alzheimer’s, their families, and caregivers; and to
38 develop a strategy to mobilize a state response to this public health crisis.

39 (b) The Alzheimer’s Disease Task Force shall include an examination of the following in
40 its assessment and recommendations:

41 (1) Trends in state Alzheimer’s population and needs, including the changing
42 population with dementia, including, but not limited to:

43 (A) State role in long-term care, family caregiver support, and assistance to
44 people with early-stage and early onset of Alzheimer’s; and

45 (B) State policy regarding people with Alzheimer’s and developmental
46 disabilities.

47 (2) Existing services, resources, and capacity, including, but not limited to the:

48 (A) Type, cost and availability of dementia services;

49 (B) Dementia-specific training requirements for long-term care staff;

50 (C) Quality care measures for residential care facilities;

51 (D) Capacity of public safety and law enforcement to respond to people
52 with Alzheimer’s;

53 (E) Availability of home- and community-based resources for people with
54 Alzheimer’s and respite care to assist families;

55 (F) Inventory of long-term care dementia care units;

56 (G) Adequacy and appropriateness of geriatric-psychiatric units for people
57 with behavioral disorders associated with Alzheimer’s and related dementia;

58 (H) Assisted living residential options for people with dementia; and

59 (I) State support of Alzheimer’s research through universities and other
60 resources; and

61 (3) Needed state policies or responses, including, but not limited to directions for
62 the provision of clear and coordinated services and supports to people and families living with
63 Alzheimer’s and related disorders and strategies to address any identified gaps in services.

64 (c) The Alzheimer’s Disease Task Force shall hold public meetings and use technological
65 means, such as web casts, to gather feedback on the recommendations from people and families
66 affected by Alzheimer’s disease and the general public. The task force shall conduct at least [one
67 (1)] public hearing in each of the state’s [three (3) grand divisions]. The primary purpose of such
68 public hearings shall be the receipt of public testimony relevant to the task force’s assigned topics
69 of inquiry. Public hearings and all other meetings of the task force shall comply with the
70 provisions of [insert citation].

71 (d) The Alzheimer’s Disease Task Force shall submit a progress report of its findings to
72 the [general assembly] no later than [February 15, 2008]. The Alzheimer’s Disease Task Force
73 shall also submit a report of its findings and date-specific recommendations, including any
74 suggested legislation, to the [general assembly and the governor] in the form of a State
75 Alzheimer’s Plan no later than [February 15, 2009].

76 (e) The Alzheimer’s Disease Task Force shall meet after the state plan is submitted at least
77 [annually] to review the need for new components to the state plan.

78
79 Section 5. [*Severability.*] [Insert severability clause.]

80
81 Section 6. [*Repealer.*] [Insert repealer clause.]

82
83 Section 7. [*Effective Date.*] [Insert effective date.]