

# WEST VIRGINIA CODE: §16-14-1

## §16-14-1. Legislative findings.

(a) (1) The Legislature finds that individuals living with Amyotrophic Lateral Sclerosis (ALS) face significant financial and medical burdens, requiring targeted state support to improve their quality of life and to help them remain in their homes under family-based care.

(2) ALS clinics reduce the cost of care for Medicaid and other insurers by consolidating multidisciplinary services into a single location, thereby minimizing the need for repeated specialist visits and emergency room visits. By providing comprehensive, coordinated care, these clinics improve patient outcomes, reduce hospital admissions, and decrease reliance on costly long-term care facilities. Additionally, ALS clinics facilitate access to clinical trials and advanced treatment options, potentially slowing disease progression and reducing overall healthcare expenditures.

(3) As the disease progresses, the needs of individuals living with ALS increase, making it critical to keep patients in their homes with family-based care. Home-based care improves patient outcomes, enhances emotional well-being, and reduces overall healthcare costs by preventing unnecessary hospitalizations and delaying or eliminating the need for long-term institutional care. By supporting in-home caregiving solutions, the state can ensure that individuals with ALS receive compassionate, cost-effective care in a familiar environment.