WEST VIRGINIA CODE: §16-5R-8

§16-5R-8. State Alzheimer’s Plan Task Force.

(a) There is created the Alzheimer's Disease and Other Dementia Advisory Council.

(b) (1) The Alzheimer's Disease and Other Dementia Advisory Council consists of the following voting members:

(A) One individual living with Alzheimer's disease or another dementia or a family member of such an individual;

(B) One individual who is the family caregiver of an individual living with Alzheimer's disease or another dementia;

(C) One individual who represents nursing homes;

(D) One individual who represents assisted living facilities;

(E) One individual who represents providers of adult day care services;

(F) One individual who represents the home care providers;

(G) One physician who has experience diagnosing and treating Alzheimer's;

(H) One individual who conducts research regarding Alzheimer's disease or other dementias at West Virginia University;

(I) One individual who conducts research regarding Alzheimer's disease or other dementias at Marshall University;

(J) At least one individual who represents the Alzheimer's Association West Virginia Chapter;

(K) One individual who represents the Area Agencies on Aging;

(L) One individual who represents an organization that advocates for older adults;

(M) One individual who represents veterans' nursing home.

(2) The following five members shall be considered nonvoting members:

(A) The Secretary of the Department of Health or the Secretary's designee;

(B) The Commissioner of the Bureau for Public Health or the Commissioner's designee;

(C) The Commissioner of the Bureau of Senior Services or the Commissioner's designee;

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(D) The Commissioner of the Bureau for Medical Services or the Commissioner's designee; and

(E) The State Long-Term Care Ombudsman or the Ombudsman's designee.

(c) A voting member shall be appointed by the Secretary of the Department of Health. Appointments shall be made not later than 30 days after the effective date of this act. Vacancies shall be filled in the same manner as original appointments.

(d) Non-governmental members of the council shall not be compensated. The Department of Health shall finance any costs of the council with existing funds.

(e) The members of the council shall select the chairperson and vice chairperson who are not be employees of the state. The council shall hold its first meeting not later than 30 days after the appointment of its members. For purposes of the first meeting, the Secretary of Health or the Secretary's designee shall call and preside over the first meeting until a chair is selected. Thereafter, the council shall meet at the call of the chairperson or at least once per quarter.

(f) A majority of the voting members shall constitute a quorum for the conduct of meetings.

(g) The Department of Health may provide staff support to the council as necessary to assist the council in the performance of its duties.

(h) The Alzheimer's Disease and Other Dementias Advisory Council shall have the following responsibilities:

(1) Examine the needs of individuals living with Alzheimer's disease or other dementias;

(2) Review the services available in the state for those individuals and their family caregivers; and

(3) Assess the ability of health care providers and facilities to meet the individuals' current and future needs.

(i) The advisory council shall consider and make findings and recommendations on all of the following topics:

(1) Trends in the state's Alzheimer's disease and other dementias populations and service needs, including:

(A) The state's role in providing or facilitating long-term care, family caregiver support, and assistance to those with Alzheimer's disease or other dementias;

(B) The state's policies regarding individuals with Alzheimer's disease or other dementias;

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(C) The fiscal impact of Alzheimer's disease and other dementias on publicly funded health care programs;

(D) The state's policies on access to treatment for Alzheimer's disease and other dementias;

(E) The state's role in facilitating risk reduction to the general public; and

(F) Updates to the surveillance system to better determine the number of individuals diagnosed with Alzheimer's disease or other dementias and to monitor changes to such numbers.

(2) Existing resources, services, and capacity relating to the diagnosis and care of individuals living with Alzheimer's disease or other dementias, including:

(A) The type, cost, availability, and accessibility of dementia care services;

(B) The availability of health care workers who can serve people with dementia including, but not limited to, neurologists, geriatricians, and direct care workers;

(C) Dementia-specific training requirements for public and private employees who interact with people living with Alzheimer’s or other dementias, which shall include but not be limited to long-term care workers, case managers, adult protective services, law enforcement, and first responders;

(D) Home and community-based services, including respite care, for individuals diagnosed with Alzheimer's disease or other dementias and their families;

(E) Quality care measures for home and community-based services and residential care facilities; and

(F) State-supported Alzheimer's and other dementias research conducted at universities located in this state.

(3) Policies and strategies that address the following:

(A) Educating providers to increase early detection and diagnosis of Alzheimer's disease and other dementias;

(B) Improving the health care received by individuals diagnosed with Alzheimer's disease or other dementias;

(C) Evaluating the capacity of the health care system in meeting the growing number and needs of those with Alzheimer's disease and other dementias;

(D) Increasing the number of health care professionals necessary to treat the growing aging and Alzheimer's disease and dementia populations;

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(E) Improving services and access to the services provided in the home and community to delay and decrease the need for institutionalized care for individuals with Alzheimer's disease or other dementias;

(F) Improving long-term care, including assisted living, for those with Alzheimer's disease or other dementias;

(G) Assisting unpaid Alzheimer's disease or dementia caregivers;

(H) Increasing public awareness of Alzheimer's disease and other dementias;

(I) Increasing and improving research on Alzheimer's disease and other dementias;

(J) Promoting activities to maintain and improve brain health;

(K) Improving access to treatments for Alzheimer's disease and other dementias;

(L) Improving the collection of data and information related to Alzheimer's disease and other dementias and their public health burdens;

(M) Improving public safety and addressing the safety-related needs of those with Alzheimer's disease or other dementias;

(N) Addressing legal protections for, and legal issues faced by, individuals with Alzheimer's disease or other dementias; and

(O) Improving the ways in which the government evaluates and adopts policies to assist individuals diagnosed with Alzheimer's disease or other dementias and their families.

(j) No later than 24 months, the council shall submit a State Alzheimer's Plan to the Joint Committee on Health and to the Governor. The Alzheimer's Disease and Other Dementia Advisory Council will serve an advisory role in implementation of the State Alzheimer’s Plan. The Alzheimer’s Disease and Other Dementia Advisory Council terminates on July 31, 2030.

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