



General Assembly

Substitute Bill No. 6912

January Session, 2025



AN ACT ESTABLISHING AN ALZHEIMER'S DISEASE AND DEMENTIA TASK FORCE.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. (NEW) (*Effective October 1, 2025*) (a) There is established an
2 Alzheimer's Disease and Dementia task force. The task force shall:

3 (1) Examine (A) the needs of persons living with Alzheimer's disease
4 or dementia in the state, (B) the services available to such persons and
5 their family caregivers, and (C) the ability of health care providers and
6 institutions to meet the needs of such persons; and

7 (2) Develop a State Alzheimer's Plan, which shall make findings and
8 recommendations regarding:

9 (A) State residents living with Alzheimer's disease and dementia and
10 their service needs, including, but not limited to, (i) the state's role in
11 providing or facilitating long-term care, family caregiver support and
12 assistance to persons with early-stage and early-onset Alzheimer's
13 disease or dementia, (ii) state policies regarding persons living with
14 Alzheimer's disease or dementia, and (iii) the fiscal impact of
15 Alzheimer's disease and dementia on publicly funded health care
16 programs;

17 (B) Existing resources, services and capacity relating to the diagnosis

18 and care of persons living with Alzheimer's disease or dementia,
19 including, but not limited to, (i) the type, cost and availability of
20 dementia care services, (ii) the availability of health care providers who
21 can provide Alzheimer's disease or dementia-related services,
22 including, but not limited to, neurologists, geriatricians and direct care
23 workers, (iii) dementia-specific training requirements for public and
24 private employees who interact with persons living with Alzheimer's
25 disease or dementia, including, but not limited to, long-term care
26 providers, case managers, adult protective services employees and law
27 enforcement personnel and other first responders, (iv) home and
28 community-based services, including, but not limited to, respite care
29 services, (v) quality of care measures for home and community-based
30 services and residential care facilities, and (vi) state-supported
31 Alzheimer's disease and dementia research conducted at higher
32 education institutions located in the state; and

33 (C) Policies and strategies that (i) increase public awareness of
34 Alzheimer's disease and dementia, (ii) educate health care providers to
35 increase early detection and diagnosis of Alzheimer's disease and
36 dementia, (iii) improve health care services for persons living with
37 Alzheimer's disease or dementia, (iv) evaluate the capacity of the health
38 care system in meeting the growing number and needs of persons living
39 with Alzheimer's disease or dementia, (v) increase the number of health
40 care providers available to treat the growing aging population and
41 populations living with Alzheimer's disease or dementia, (vi) improve
42 services provided in the home and community to delay and decrease
43 the need for institutionalized care for persons living with Alzheimer's
44 disease or dementia, (vii) improve long-term care services, including,
45 but not limited to, assisted living services for persons living with
46 Alzheimer's disease or dementia, (viii) assist unpaid Alzheimer's
47 disease and dementia caregivers, (ix) increase and improve research on
48 Alzheimer's disease and dementia, (x) promote activities to maintain
49 and improve brain health, (xi) improve data and information collection
50 relating to Alzheimer's disease and dementia and the public health
51 burdens associated with such diseases, (xii) improve public safety and

52 address the safety-related needs of persons living with Alzheimer's
53 disease or dementia, (xiii) address legal protections for, and legal issues
54 faced by, persons living with Alzheimer's disease or dementia, and (xiv)
55 improve methods through which the state evaluates and adopts policies
56 to assist persons living with Alzheimer's disease or dementia.

57 (b) The task force shall consist of the following members:

58 (1) Eleven members appointed by the Governor, (A) one of whom
59 shall be a person living with early-stage or early-onset Alzheimer's
60 disease or dementia, (B) one of whom shall be a family caregiver of a
61 person living with Alzheimer's disease or dementia, (C) one of whom
62 shall represent a municipality that provides services to senior citizens,
63 (D) one of whom shall represent home health care agencies, (E) two of
64 whom shall be health care providers with experience diagnosing and
65 treating Alzheimer's disease, (F) one of whom shall represent a national
66 organization that advocates on behalf of persons living with
67 Alzheimer's disease or dementia, (G) one of whom shall represent the
68 area agencies on aging, established pursuant to section 17a-850 of the
69 general statutes, (H) one of whom shall represent long-term care
70 facilities, (I) one of whom shall have expertise in aging policy issues, and
71 (J) one of whom shall represent homemaker-companion agencies;

72 (2) The Commissioner of Aging and Disability Services, or the
73 commissioner's designee;

74 (3) The Commissioner of Public Health, or the commissioner's
75 designee;

76 (4) The Commissioner of Social Services, or the commissioner's
77 designee; and

78 (5) The State Ombudsman, or the State Ombudsman's designee.

79 (c) All initial appointments to the task force shall be made not later
80 than January 1, 2026. Task force members first appointed pursuant to
81 subparagraphs (A) to (D), inclusive, of subdivision (1) of subsection (b)

82 of this section shall serve for a term of two years. Task force members
 83 first appointed pursuant to subparagraphs (E) to (J), inclusive, of
 84 subdivision (1) of subsection (b) of this section shall serve for a term of
 85 three years. Any subsequent task force member appointed pursuant to
 86 subdivision (1) of subsection (b) of this section shall serve for a term of
 87 two years, or until such member's successor is appointed. If the
 88 Governor determines that no suitable successor candidate exists to
 89 appoint to the task force, the Governor may reappoint an existing task
 90 force member for one two-year term.

91 (d) The Commissioner of Aging and Disability Services, or the
 92 commissioner's designee, shall convene the first meeting of the task
 93 force not later than thirty days after all task force members are
 94 appointed. At such meeting, the members of the task force shall select a
 95 chairperson and vice chairperson from among the members of the task
 96 force. The chairperson and vice chairperson may serve in such roles not
 97 more than two consecutive years. The task force shall meet not less than
 98 once every calendar quarter.

99 (e) The administrative staff of the joint standing committee of the
 100 General Assembly having cognizance of matters relating to aging shall
 101 serve as administrative staff of the task force.

102 (f) Not later than January 1, 2027, and annually thereafter, the task
 103 force shall submit a report on the State Alzheimer's Plan to the Governor
 104 and, in accordance with the provisions of section 11-4a of the general
 105 statutes, the joint standing committees of the General Assembly having
 106 cognizance of matters relating to aging, public health and human
 107 services. Such report shall include recommendations for the
 108 implementation of the State Alzheimer's Plan and identify any barriers
 109 to the implementation of such plan. The task force shall update the State
 110 Alzheimer's Plan every four years.

This act shall take effect as follows and shall amend the following sections:		
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Section 1	October 1, 2025	New section
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Statement of Legislative Commissioners:

In Subsec. (f), the second reference to "State Alzheimer's Plan" in the first sentence was deleted for clarity.

AGE *Joint Favorable Subst.*