



**VETO MESSAGE:** No

**GOVERNOR'S PRESS RELEASE ON SIGNING:** No

**FOLLOWING WERE PRINTED:**

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**REPORTS:** No

**HEARINGS:** No

**NEWSPAPER ARTICLES:** Yes

Alzheimer bill mentioned in:

"Christie signs Schultz's law, upgrading penalties for killing police and rescue dogs," NewJerseyNewsroom.com, 6-23-11

LAW/RWH

P.L.2011, CHAPTER 76, *approved June 21, 2011*  
Senate, No. 125 (*First Reprint*)

1 **AN ACT** establishing the New Jersey Alzheimer's Disease Study  
2 Commission and supplementing Title 26 of the Revised Statutes.

3  
4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6  
7 1. The Legislature finds and declares that:

8 a. Alzheimer's disease is a progressive, degenerative, and  
9 irreversible neurological disease. It is one of a group of dementias  
10 referred to as Alzheimer's disease and related disorders that:  
11 develops over a period of years; is of undetermined origin; and is  
12 characterized by a progressive decline in intellectual or cognitive  
13 functioning that begins with gradual short-term memory loss and  
14 progresses to include a deterioration in all areas of cognition and  
15 executive functioning, such as analytical ability and reasoning,  
16 language and communication, perception and judgment, personality,  
17 and eventual inability to perform physical functions, including, but  
18 not limited to, activities of daily living such as ambulation,  
19 dressing, feeding, and bathing;

20 b. According to the report of the Alzheimer's Association, 2009  
21 *Alzheimer's Disease Facts and Figures*, it is estimated that 5.3  
22 million persons in the United States currently have Alzheimer's  
23 disease. Every 70 seconds someone develops Alzheimer's disease;  
24 by mid-century someone will develop Alzheimer's disease every 33  
25 seconds. Men 55 years of age or older now have a one in eight  
26 chance of developing Alzheimer's disease; and women 55 years of  
27 age or older now have a one in five chance of developing  
28 Alzheimer's disease. By 2010, there will be nearly a half million  
29 new cases of Alzheimer's disease each year; and by 2050, there will  
30 be nearly a million new cases per year, and between 11 and 16  
31 million persons with Alzheimer's disease;

32 c. Currently in New Jersey, by extrapolation based on age and  
33 demographics, the conservative estimate is that there are 150,000  
34 residents with Alzheimer's disease. Because of the progressive  
35 deteriorative nature of the disease, it is necessary when considering  
36 its impact, to include a minimum of at least one primary caregiver  
37 for each person with Alzheimer's disease as also being directly

**EXPLANATION** – Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted in the law.

Matter underlined thus is new matter.

Matter enclosed in superscript numerals has been adopted as follows:

<sup>1</sup>Senate SHH committee amendments adopted February 4, 2010.

1 impacted by the disease; accordingly, the current number of New  
2 Jersey residents directly impacted by Alzheimer's disease is  
3 350,000;

4 d. Alzheimer's disease is the sixth leading cause of death in the  
5 United States. However, this ranking may be an underestimate due  
6 to both the failure to properly diagnose the patient's condition and  
7 the failure for the disease to be noted on the death certificate as the  
8 primary contributing factor to death;

9 e. Since a diagnosis of Alzheimer's disease cannot be determined  
10 definitively until an autopsy is performed, the disease is determined  
11 through a process of differential diagnosis that includes a  
12 comprehensive medical history and a physical examination and  
13 assessment, including blood testing, brain scans such as  
14 computerized axial tomography (CT), positron emission  
15 tomography (PET), and magnetic resonance imaging (MRI), and  
16 psychological and neurological testing;

17 f. Alzheimer's disease generally progresses over time in a  
18 gradual and insidious manner. Typically, persons with dementia  
19 (PWD) can live from eight to 10 years after receiving their  
20 diagnosis, but depending on the overall health status, some  
21 individuals live up to 20 years after receiving their diagnosis;

22 g. During this time, PWD and their families need continuous  
23 support, education, and assistance to help them identify and access  
24 proper care and support services. These specialized services can be  
25 difficult to find and very expensive, especially when the length of  
26 time the services are needed is taken into consideration. As the  
27 needs of the PWD intensify with the disease progression, there is a  
28 direct correlation to the associated burden and expense for the PWD  
29 and the person's family caregivers. Family caregivers become  
30 overwhelmed and emotionally and physically taxed by the heavy  
31 demands associated with providing care 24 hours per day, seven  
32 days per week for their family member with Alzheimer's disease.  
33 Caregiver stress and associated health decline become of paramount  
34 consideration;

35 h. Frequently, family caregivers develop chronic and life  
36 impacting illnesses; older spouses may frequently pre-decease the  
37 PWD for whom they are caring. And, if caregivers are working  
38 outside the home, they may have difficulty managing family life  
39 and work responsibilities, and may lose time from work or become  
40 unable to perform their responsibilities at the level they were once  
41 able to, which can result in employment termination and loss of  
42 family income;

43 i. The direct and indirect costs of Alzheimer's disease and other  
44 dementias amount to more than \$148 billion annually. In 2004,  
45 total per-person payments from all sources for health and long-term  
46 care were three times higher for Medicare beneficiaries 65 years of

1 age or older with Alzheimer's disease than for other Medicare  
2 beneficiaries in this age group; and

3 j. It is in the public interest for the State to establish a  
4 commission, similar to the one which was established under  
5 P.L.1983, c.352 but which has since expired, to study the current  
6 issues in the State associated with Alzheimer's disease in order to  
7 help raise awareness about one of this country's most significant  
8 health epidemics, to facilitate the continued development of  
9 integrated and responsive community-based services, and ease the  
10 burden of the disease on persons with Alzheimer's disease and their  
11 family members and caregivers through expanded support.

12

13 2. a. There is established the New Jersey Alzheimer's Disease  
14 Study Commission in the Department of Health and Senior  
15 Services.

16 b. The commission shall consist of 15 members as follows:

17 (1) the Commissioners of Health and Senior Services '[,] and'  
18 Human Services, '[and Community Affairs,]' or their designees,  
19 who shall serve ex officio;

20 (2) two members of the Senate, to be appointed by the President  
21 of the Senate, who shall not be of the same political party;

22 (3) two members of the General Assembly, to be appointed by  
23 the Speaker of the General Assembly, who shall not be of the same  
24 political party; and

25 (4) '[eight] nine' members appointed by the Governor, as  
26 follows: two persons recommended by the Alzheimer's Association,  
27 one of whom shall be a representative of the Greater New Jersey  
28 Chapter and one of whom shall be a representative of the  
29 Alzheimer's Association Delaware Valley Chapter; '[two] three'  
30 health care professionals who are currently involved in the  
31 provision of direct services, one of whom shall be a representative  
32 of an agency that provides home care services to persons with  
33 dementia', one of whom shall be a representative of an assisted  
34 living facility that provides specialized services to persons with  
35 dementia', and one of whom shall be a representative of a licensed  
36 nursing home '[or assisted living facility]' that provides  
37 specialized services to persons with dementia; one representative  
38 from the clergy who has experience providing emotional and  
39 spiritual care and support for persons with Alzheimer's disease and  
40 their families; two persons who by reason of family relationship or  
41 legal guardianship bear or have borne responsibility in caring for a  
42 person with Alzheimer's disease; and one attorney who is currently  
43 licensed and practicing in New Jersey, has expertise in legal and  
44 financial planning and elder care issues, and has extensive  
45 community-based experience working with persons with  
46 Alzheimer's disease and their families.

- 1 c. Vacancies in the membership of the commission shall be filled  
2 in the same manner provided for the original appointments.
- 3 d. The commission shall organize as soon as practicable  
4 following the appointment of its members and shall select a  
5 chairperson from among the members. The chairperson shall  
6 appoint a secretary who need not be a member of the commission.
- 7 e. Members of the commission shall serve without compensation,  
8 but shall be reimbursed for necessary expenses incurred in the  
9 performance of their duties as members of the commission, within  
10 the limits of funds appropriated or otherwise made available to the  
11 commission for its purposes.
- 12 f. The commission shall be entitled to call to its assistance and  
13 avail itself of the services of the employees of any State, county, or  
14 municipal department, board, bureau, commission, or agency as it  
15 may require and as may be available to it for its purposes.
- 16 g. The Department of Health and Senior Service shall provide  
17 staff support to the commission, as necessary.
- 18
- 19 3. It shall be the duty of the commission to:
- 20 a. study the current impact and incidence of Alzheimer's disease  
21 among State residents, and make projections about the future impact  
22 and incidence among State residents;
- 23 b. study the State's role in long-term care, family caregiver  
24 support, and assistance to persons with early stage and early onset  
25 of Alzheimer's disease;
- 26 c. consider the capacity of public safety and law enforcement  
27 officials to respond to persons with Alzheimer's disease and for  
28 these officials to have proper education and training;
- 29 d. study the needs of persons with Alzheimer's disease and their  
30 family members and caregivers, assess the availability and  
31 affordability of existing services, programs, facilities, and agencies  
32 to meet those needs, and make recommendations for improving,  
33 expanding, or changing such services, programs, facilities, and  
34 agencies, as appropriate;
- 35 e. gather and disseminate data and information relative to the  
36 care of persons with Alzheimer's disease in order to provide health  
37 care professionals and governmental policymakers, as appropriate,  
38 with accurate data about the disease and its impact on these persons  
39 and their family members and caregivers;
- 40 f. identify the adequacy, appropriateness, and best practice-based  
41 geriatric and psychiatric services and interventions; and
- 42 g. consider such other issues as the commission may identify as  
43 necessary to ease the burden for persons with Alzheimer's disease  
44 and their family members and caregivers in the State.
- 45
- 46 4. The commission may meet and hold hearings at such places  
47 and times as it shall designate, and shall report its findings and

1 recommendations to the Governor, and to the Legislature pursuant  
2 to section 2 of P.L.1991, c.164 (C.52:14-19.1), within two years of  
3 the appointment of a majority of the public members of the  
4 commission.

5

6 5. This act shall take effect immediately and shall expire upon  
7 the submission by the commission of its report.

8

9

10

11

12 Establishes NJ Alzheimer's Disease Study Commission.

# SENATE, No. 125

## STATE OF NEW JERSEY 214th LEGISLATURE

PRE-FILED FOR INTRODUCTION IN THE 2010 SESSION

**Sponsored by:**

**Senator CHRISTOPHER J. CONNORS**

**District 9 (Atlantic, Burlington and Ocean)**

**Senator JEFF VAN DREW**

**District 1 (Cape May, Atlantic and Cumberland)**

**SYNOPSIS**

Establishes NJ Alzheimer's Disease Study Commission.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel





1 AN ACT establishing the New Jersey Alzheimer's Disease Study  
2 Commission and supplementing Title 26 of the Revised Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

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7 1. The Legislature finds and declares that:

8 a. Alzheimer's disease is a progressive, degenerative, and  
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12 characterized by a progressive decline in intellectual or cognitive  
13 functioning that begins with gradual short-term memory loss and  
14 progresses to include a deterioration in all areas of cognition and  
15 executive functioning, such as analytical ability and reasoning,  
16 language and communication, perception and judgment, personality,  
17 and eventual inability to perform physical functions, including, but  
18 not limited to, activities of daily living such as ambulation,  
19 dressing, feeding, and bathing;

20 b. According to the report of the Alzheimer's Association, 2009  
21 *Alzheimer's Disease Facts and Figures*, it is estimated that 5.3  
22 million persons in the United States currently have Alzheimer's  
23 disease. Every 70 seconds someone develops Alzheimer's disease;  
24 by mid-century someone will develop Alzheimer's disease every 33  
25 seconds. Men 55 years of age or older now have a one in eight  
26 chance of developing Alzheimer's disease; and women 55 years of  
27 age or older now have a one in five chance of developing  
28 Alzheimer's disease. By 2010, there will be nearly a half million  
29 new cases of Alzheimer's disease each year; and by 2050, there will  
30 be nearly a million new cases per year, and between 11 and 16  
31 million persons with Alzheimer's disease;

32 c. Currently in New Jersey, by extrapolation based on age and  
33 demographics, the conservative estimate is that there are 150,000  
34 residents with Alzheimer's disease. Because of the progressive  
35 deteriorative nature of the disease, it is necessary when considering  
36 its impact, to include a minimum of at least one primary caregiver  
37 for each person with Alzheimer's disease as also being directly  
38 impacted by the disease; accordingly, the current number of New  
39 Jersey residents directly impacted by Alzheimer's disease is  
40 350,000;

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42 United States. However, this ranking may be an underestimate due  
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44 the failure for the disease to be noted on the death certificate as the  
45 primary contributing factor to death;

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18 direct correlation to the associated burden and expense for the PWD  
19 and the person's family caregivers. Family caregivers become  
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30 unable to perform their responsibilities at the level they were once  
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37 age or older with Alzheimer's disease than for other Medicare  
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43 help raise awareness about one of this country's most significant  
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45 integrated and responsive community-based services, and ease the  
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47 family members and caregivers through expanded support.

- 1       2. a. There is established the New Jersey Alzheimer's Disease  
2 Study Commission in the Department of Health and Senior  
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- 4       b. The commission shall consist of 15 members as follows:
- 5       (1) the Commissioners of Health and Senior Services, Human  
6 Services, and Community Affairs, or their designees, who shall  
7 serve ex officio;
- 8       (2) two members of the Senate, to be appointed by the President  
9 of the Senate, who shall not be of the same political party;
- 10       (3) two members of the General Assembly, to be appointed by  
11 the Speaker of the General Assembly, who shall not be of the same  
12 political party; and
- 13       (4) eight public members appointed by the Governor, as follows:  
14 two persons recommended by the Alzheimer's Association, one of  
15 whom shall be a representative of the Greater New Jersey Chapter  
16 and one of whom shall be a representative of the Alzheimer's  
17 Association Delaware Valley Chapter; two health care professionals  
18 who are currently involved in the provision of direct services, one  
19 of whom shall be a representative of an agency that provides home  
20 care services to persons with dementia and one of whom shall be a  
21 representative of a licensed nursing home or assisted living facility  
22 that provides specialized services to persons with dementia; one  
23 representative from the clergy who has experience providing  
24 emotional and spiritual care and support for persons with  
25 Alzheimer's disease and their families; two persons who by reason  
26 of family relationship or legal guardianship bear or have borne  
27 responsibility in caring for a person with Alzheimer's disease; and  
28 one attorney who is currently licensed and practicing in New Jersey,  
29 has expertise in legal and financial planning and elder care issues,  
30 and has extensive community-based experience working with  
31 persons with Alzheimer's disease and their families.
- 32       c. Vacancies in the membership of the commission shall be filled  
33 in the same manner provided for the original appointments.
- 34       d. The commission shall organize as soon as practicable  
35 following the appointment of its members and shall select a  
36 chairperson from among the members. The chairperson shall  
37 appoint a secretary who need not be a member of the commission.
- 38       e. Members of the commission shall serve without compensation,  
39 but shall be reimbursed for necessary expenses incurred in the  
40 performance of their duties as members of the commission, within  
41 the limits of funds appropriated or otherwise made available to the  
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- 43       f. The commission shall be entitled to call to its assistance and  
44 avail itself of the services of the employees of any State, county, or  
45 municipal department, board, bureau, commission, or agency as it  
46 may require and as may be available to it for its purposes.

1 g. The Department of Health and Senior Service shall provide  
2 staff support to the commission, as necessary.

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4 3. It shall be the duty of the commission to:

5 a. study the current impact and incidence of Alzheimer's disease  
6 among State residents, and make projections about the future impact  
7 and incidence among State residents;

8 b. study the State's role in long-term care, family caregiver  
9 support, and assistance to persons with early stage and early onset  
10 of Alzheimer's disease;

11 c. consider the capacity of public safety and law enforcement  
12 officials to respond to persons with Alzheimer's disease and for  
13 these officials to have proper education and training;

14 d. study the needs of persons with Alzheimer's disease and their  
15 family members and caregivers, assess the availability and  
16 affordability of existing services, programs, facilities, and agencies  
17 to meet those needs, and make recommendations for improving,  
18 expanding, or changing such services, programs, facilities, and  
19 agencies, as appropriate;

20 e. gather and disseminate data and information relative to the  
21 care of persons with Alzheimer's disease in order to provide health  
22 care professionals and governmental policymakers, as appropriate,  
23 with accurate data about the disease and its impact on these persons  
24 and their family members and caregivers;

25 f. identify the adequacy, appropriateness, and best practice-based  
26 geriatric and psychiatric services and interventions; and

27 g. consider such other issues as the commission may identify as  
28 necessary to ease the burden for persons with Alzheimer's disease  
29 and their family members and caregivers in the State.

30  
31 4. The commission may meet and hold hearings at such places  
32 and times as it shall designate, and shall report its findings and  
33 recommendations to the Governor, and to the Legislature pursuant  
34 to section 2 of P.L.1991, c.164 (C.52:14-19.1), within two years of  
35 the appointment of a majority of the public members of the  
36 commission.

37  
38 5. This act shall take effect immediately and shall expire upon  
39 the submission by the commission of its report.

40  
41  
42 STATEMENT

43  
44 This bill establishes a 15-member Alzheimer's Disease Study  
45 Commission. The duties of the commission are to:

- 1       • Study the current impact and incidence of Alzheimer's  
2       disease among State residents, and make projections about  
3       the future impact and incidence among State residents;
- 4       • Study the State's role in long-term care, family caregiver  
5       support, and assistance to persons with early stage and early  
6       onset of Alzheimer's disease;
- 7       • Consider the capacity of public safety and law enforcement  
8       officials to respond to persons with Alzheimer's disease and  
9       for these officials to have proper education and training;
- 10      • Study the needs of persons with Alzheimer's disease and  
11      their family members and caregivers, assess the availability  
12      and affordability of existing services, programs, facilities,  
13      and agencies to meet those needs, and make  
14      recommendations for improving, expanding, or changing  
15      such services, programs, facilities, and agencies, as  
16      appropriate;
- 17      • Gather and disseminate data and information relative to the  
18      care of persons with Alzheimer's disease in order to provide  
19      health care professionals and governmental policymakers, as  
20      appropriate, with accurate data about the disease and its  
21      impact on these persons and their family members and  
22      caregivers;
- 23      • Identify the adequacy, appropriateness, and best practice-  
24      based geriatric and psychiatric services and interventions;  
25      and
- 26      • Consider such other issues as the commission may identify  
27      as necessary to ease the burden for persons with Alzheimer's  
28      disease and their family members and caregivers in the  
29      State.

30       The commission may meet and hold hearings at such places and  
31       times as it shall designate, and shall report its findings and  
32       recommendations to the Governor and Legislature within two years  
33       of the appointment of a majority of the public members of the  
34       commission. The bill would take effect immediately and expire  
35       upon the submission by the commission of its report.

36       The members of the commission would include:

37       the Commissioners of Health and Senior Services, Human  
38       Services, and Community Affairs, or their designees, who shall  
39       serve ex officio;

40       two members of the Senate, to be appointed by the President of  
41       the Senate, who shall not be of the same political party;

42       two members of the General Assembly, to be appointed by the  
43       Speaker of the General Assembly, who shall not be of the same  
44       political party; and

45       eight public members appointed by the Governor, as follows:  
46       two members recommended by the Alzheimer's Association, one of  
47       whom shall represent the Greater New Jersey Chapter (which serves

1 the majority of the State's population and geography), and one of  
2 whom shall represent the Alzheimer's Association Delaware Valley  
3 Chapter (which serves the seven most southern counties of the  
4 State); two health care professionals who are currently involved in  
5 direct services, one of whom shall be a representative of an agency  
6 that provides home care services to persons with dementia and one  
7 of whom shall be a representative of a licensed nursing home or  
8 assisted living facility that provides specialized services to persons  
9 with dementia; one representative from the clergy who has  
10 experience providing emotional and spiritual care and support for  
11 persons with Alzheimer's disease and their families; two persons  
12 who by reason of family relationship or legal guardianship bear or  
13 have borne responsibility in caring for a person with Alzheimer's  
14 disease; and one attorney who is currently licensed and practicing in  
15 New Jersey, has expertise in legal and financial planning and elder  
16 care issues, and has extensive community-based experience  
17 working with persons with Alzheimer's disease and their families.

18 A similar commission to study Alzheimer's disease was  
19 established under P.L.1983, c.352 but has since expired. This bill  
20 will establish a new commission to study current issues with regard  
21 to Alzheimer's disease, which has increased in prevalence over the  
22 years. According to the report of the Alzheimer's Association, *2009*  
23 *Alzheimer's Disease Facts and Figures*, by 2010, there will be  
24 nearly a half million new cases of Alzheimer's disease each year;  
25 and by 2050, there will be nearly a million new cases per year, and  
26 between 11 and 16 million persons with Alzheimer's Disease.

SENATE HEALTH, HUMAN SERVICES AND SENIOR  
CITIZENS COMMITTEE

STATEMENT TO

**SENATE, No. 125**

with committee amendments

**STATE OF NEW JERSEY**

DATED: FEBRUARY 4, 2010

The Senate Health, Human Services and Senior Citizens Committee reports favorably and with amendments Senate Bill No. 125.

As amended by committee, this bill establishes a 15-member Alzheimer's Disease Study Commission. The duties of the commission are to:

- Study the current impact and incidence of Alzheimer's disease among State residents, and make projections about the future impact and incidence among State residents;
- Study 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;
- Consider the capacity of public safety and law enforcement officials to respond to persons with Alzheimer's disease and for these officials to have proper education and training;
- Study the needs of persons with Alzheimer's disease and their family members and caregivers, assess the availability and affordability of existing services, programs, facilities, and agencies to meet those needs, and make recommendations for improving, expanding, or changing such services, programs, facilities, and agencies, as appropriate;
- Gather and disseminate data and information relative to the care of persons with Alzheimer's disease in order to provide health care professionals and governmental policymakers, as appropriate, with accurate data about the disease and its impact on these persons and their family members and caregivers;
- Identify the adequacy, appropriateness, and best practice-based geriatric and psychiatric services and interventions; and
- Consider such other issues as the commission may identify as necessary to ease the burden for persons with Alzheimer's disease and their family members and caregivers in the State.

The commission may meet and hold hearings at such places and times as it shall designate, and shall report its findings and

recommendations to the Governor and Legislature within two years of the appointment of a majority of the public members of the commission. The bill would take effect immediately and expire upon the submission by the commission of its report.

The members of the commission would include:

the Commissioners of Health and Senior Services and Human Services or their designees, who shall serve *ex officio*;

-- two members of the Senate, to be appointed by the President of the Senate, who shall not be of the same political party;

-- two members of the General Assembly, to be appointed by the Speaker of the General Assembly, who shall not be of the same political party; and

-- nine public members appointed by the Governor, as follows: two members recommended by the Alzheimer's Association, one of whom shall represent the Greater New Jersey Chapter (which serves the majority of the State's population and geography), and one of whom shall represent the Alzheimer's Association Delaware Valley Chapter (which serves the seven most southern counties of the State); three health care professionals who are currently involved in direct services, one of whom shall be a representative of an agency that provides home care services to persons with dementia, one of whom shall be a representative of an assisted living facility that provides specialized services to persons with dementia, and one of whom shall be a representative of a licensed nursing home that provides specialized services to persons with dementia; one representative from the clergy who has experience providing emotional and spiritual care and support for persons with Alzheimer's disease and their families; two persons who by reason of family relationship or legal guardianship bear or have borne responsibility in caring for a person with Alzheimer's disease; and one attorney who is currently licensed and practicing in New Jersey, has expertise in legal and financial planning and elder care issues, and has extensive community-based experience working with persons with Alzheimer's disease and their families.

A similar commission to study Alzheimer's disease was established under P.L.1983, c.352 but has since expired.

The committee amended the bill to delete the Commissioner of Community Affairs as a member and increase the number of public members from eight to nine, by adding a health care professional who represents an assisted living facility.

This bill was pre-filed for introduction in the 2010-2011 session pending technical review. As reported, the bill includes the changes required by technical review, which has been performed.



# ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

## STATEMENT TO

[First Reprint]

**SENATE, No. 125**

# **STATE OF NEW JERSEY**

DATED: MAY 5, 2011

The Assembly Health and Senior Services Committee reports favorably Senate Bill No. 125 (1R).

This bill establishes the New Jersey Alzheimer's Disease Study Commission in the Department of Health and Senior Services (DHSS).

The bill provides specifically as follows:

- The commission is to consist of 15 members as follows:
  - the Commissioners of Health and Senior Services and Human Services, or their designees, as ex officio members;
  - two members each from the Senate and the General Assembly, to be appointed by the President of the Senate and the Speaker of the General Assembly, respectively, who in either case are not of the same political party;
  - nine public members appointed by the Governor, as follows: two persons recommended by the Alzheimer's Association, one of whom is a representative of the Greater New Jersey Chapter and one of whom is a representative of the Alzheimer's Association Delaware Valley Chapter; three health care professionals who are currently involved in the provision of direct services, one of whom is a representative of an agency that provides home care services to persons with dementia, one of whom is a representative of an assisted living facility that provides specialized services to persons with dementia, and one of whom is a representative of a licensed nursing home that provides specialized services to persons with dementia; one representative from the clergy who has experience providing emotional and spiritual care and support for persons with Alzheimer's disease and their families; two persons who by reason of family relationship or legal guardianship bear or have borne responsibility in caring for a person with Alzheimer's disease; and one attorney who is currently licensed and practicing in New Jersey, has expertise in legal and financial planning and elder care issues, and has extensive community-based experience working with persons with Alzheimer's disease and their families.
- The commission is to organize as soon as practicable following the appointment of its members and to select a chairperson from among

the members. The chairperson is to appoint a secretary who need not be a member of the commission.

- Members of the commission are to serve without compensation, but will be reimbursed for necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds appropriated or otherwise made available to the commission for its purposes.
- The commission is entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes.
- DHSS is to provide staff support to the commission, as necessary.
- It will be the duty of the commission to:
  - study the current impact and incidence of Alzheimer's disease among State residents, and make projections about the future impact and incidence among State residents;
  - study 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;
  - consider the capacity of public safety and law enforcement officials to respond to persons with Alzheimer's disease and for these officials to have proper education and training;
  - study the needs of persons with Alzheimer's disease and their family members and caregivers, assess the availability and affordability of existing services, programs, facilities, and agencies to meet those needs, and make recommendations for improving, expanding, or changing such services, programs, facilities, and agencies, as appropriate;
  - gather and disseminate data and information relative to the care of persons with Alzheimer's disease in order to provide health care professionals and governmental policymakers, as appropriate, with accurate data about the disease and its impact on these persons and their family members and caregivers;
  - identify the adequacy, appropriateness, and best practice-based geriatric and psychiatric services and interventions; and
  - consider such other issues as the commission may identify as necessary to ease the burden for persons with Alzheimer's disease and their family members and caregivers in the State.
- The commission may meet and hold hearings at such places and times as it designates, and is to report its findings and recommendations to the Governor and the Legislature within two years of the appointment of a majority of the public members of the commission.
- The bill expires upon the submission by the commission of its report.

This bill is identical to Assembly Bill No. 322 ACA (Rumpf/Milam/Albano/Vainieri Huttle), which the committee also reported on this date.

**ASSEMBLY, No. 322**

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**STATE OF NEW JERSEY**

**214th LEGISLATURE**

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PRE-FILED FOR INTRODUCTION IN THE 2010 SESSION

**Sponsored by:**

**Assemblyman BRIAN E. RUMPF**

**District 9 (Atlantic, Burlington and Ocean)**

**Assemblyman MATTHEW W. MILAM**

**District 1 (Cape May, Atlantic and Cumberland)**

**Assemblyman NELSON T. ALBANO**

**District 1 (Cape May, Atlantic and Cumberland)**

**Assemblywoman VALERIE VAINIERI HUTTLE**

**District 37 (Bergen)**

**Assemblyman HERB CONAWAY, JR.**

**District 7 (Burlington and Camden)**

**Co-Sponsored by:**

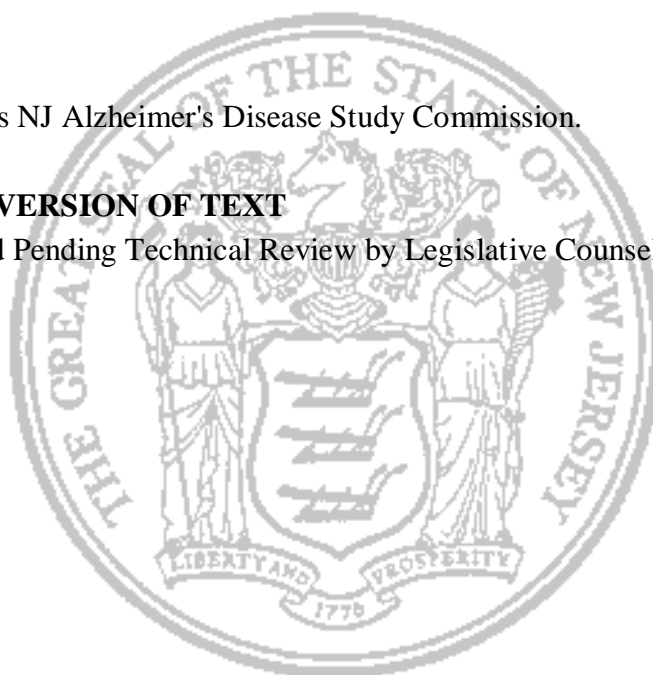
**Assemblywomen Angelini, Gove, Assemblymen DiCicco, Fuentes,  
Assemblywoman Quijano, Assemblymen Giblin, Peterson, Rudder and  
Delany**

**SYNOPSIS**

Establishes NJ Alzheimer's Disease Study Commission.

**CURRENT VERSION OF TEXT**

Introduced Pending Technical Review by Legislative Counsel



**(Sponsorship Updated As Of: 5/6/2011)**

1 AN ACT establishing the New Jersey Alzheimer's Disease Study  
2 Commission and supplementing Title 26 of the Revised Statutes.

3

4 **BE IT ENACTED** by the Senate and General Assembly of the State  
5 of New Jersey:

6

7 1. The Legislature finds and declares that:

8 a. Alzheimer's disease is a progressive, degenerative, and  
9 irreversible neurological disease. It is one of a group of dementias  
10 referred to as Alzheimer's disease and related disorders that:  
11 develops over a period of years; is of undetermined origin; and is  
12 characterized by a progressive decline in intellectual or cognitive  
13 functioning that begins with gradual short-term memory loss and  
14 progresses to include a deterioration in all areas of cognition and  
15 executive functioning, such as analytical ability and reasoning,  
16 language and communication, perception and judgment, personality,  
17 and eventual inability to perform physical functions, including, but  
18 not limited to, activities of daily living such as ambulation,  
19 dressing, feeding, and bathing;

20 b. According to the report of the Alzheimer's Association, 2009  
21 *Alzheimer's Disease Facts and Figures*, it is estimated that 5.3  
22 million persons in the United States currently have Alzheimer's  
23 disease. Every 70 seconds someone develops Alzheimer's disease;  
24 by mid-century someone will develop Alzheimer's disease every 33  
25 seconds. Men 55 years of age or older now have a one in eight  
26 chance of developing Alzheimer's disease; and women 55 years of  
27 age or older now have a one in five chance of developing  
28 Alzheimer's disease. By 2010, there will be nearly a half million  
29 new cases of Alzheimer's disease each year; and by 2050, there will  
30 be nearly a million new cases per year, and between 11 and 16  
31 million persons with Alzheimer's disease;

32 c. Currently in New Jersey, by extrapolation based on age and  
33 demographics, the conservative estimate is that there are 150,000  
34 residents with Alzheimer's disease. Because of the progressive  
35 deteriorative nature of the disease, it is necessary when considering  
36 its impact, to include a minimum of at least one primary caregiver  
37 for each person with Alzheimer's disease as also being directly  
38 impacted by the disease; accordingly, the current number of New  
39 Jersey residents directly impacted by Alzheimer's disease is  
40 350,000;

41 d. Alzheimer's disease is the sixth leading cause of death in the  
42 United States. However, this ranking may be an underestimate due  
43 to both the failure to properly diagnose the patient's condition and  
44 the failure for the disease to be noted on the death certificate as the  
45 primary contributing factor to death;

46 e. Since a diagnosis of Alzheimer's disease cannot be  
47 determined definitively until an autopsy is performed, the disease is

- 1 determined through a process of differential diagnosis that includes  
2 a comprehensive medical history and a physical examination and  
3 assessment, including blood testing, brain scans such as  
4 computerized axial tomography (CT), positron emission  
5 tomography (PET), and magnetic resonance imaging (MRI), and  
6 psychological and neurological testing;
- 7 f. Alzheimer's disease generally progresses over time in a  
8 gradual and insidious manner. Typically, persons with dementia  
9 (PWD) can live from eight to 10 years after receiving their  
10 diagnosis, but depending on the overall health status, some  
11 individuals live up to 20 years after receiving their diagnosis;
- 12 g. During this time, PWD and their families need continuous  
13 support, education, and assistance to help them identify and access  
14 proper care and support services. These specialized services can be  
15 difficult to find and very expensive, especially when the length of  
16 time the services are needed is taken into consideration. As the  
17 needs of the PWD intensify with the disease progression, there is a  
18 direct correlation to the associated burden and expense for the PWD  
19 and the person's family caregivers. Family caregivers become  
20 overwhelmed and emotionally and physically taxed by the heavy  
21 demands associated with providing care 24 hours per day, seven  
22 days per week for their family member with Alzheimer's disease.  
23 Caregiver stress and associated health decline become of paramount  
24 consideration;
- 25 h. Frequently, family caregivers develop chronic and life  
26 impacting illnesses; older spouses may frequently pre-decease the  
27 PWD for whom they are caring. And, if caregivers are working  
28 outside the home, they may have difficulty managing family life  
29 and work responsibilities, and may lose time from work or become  
30 unable to perform their responsibilities at the level they were once  
31 able to, which can result in employment termination and loss of  
32 family income;
- 33 i. The direct and indirect costs of Alzheimer's disease and  
34 other dementias amount to more than \$148 billion annually. In  
35 2004, total per-person payments from all sources for health and  
36 long-term care were three times higher for Medicare beneficiaries  
37 65 years of age or older with Alzheimer's disease than for other  
38 Medicare beneficiaries in this age group; and
- 39 j. It is in the public interest for the State to establish a  
40 commission, similar to the one which was established under  
41 P.L.1983, c.352 but which has since expired, to study the current  
42 issues in the State associated with Alzheimer's disease in order to  
43 help raise awareness about one of this country's most significant  
44 health epidemics, to facilitate the continued development of  
45 integrated and responsive community-based services, and ease the  
46 burden of the disease on persons with Alzheimer's disease and their  
47 family members and caregivers through expanded support.

A322 RUMPF, MILAM

- 1       2. a. There is established the New Jersey Alzheimer's Disease  
2 Study Commission in the Department of Health and Senior  
3 Services.
- 4       b. The commission shall consist of 15 members as follows:
- 5       (1) the Commissioners of Health and Senior Services, Human  
6 Services, and Community Affairs, or their designees, who shall  
7 serve ex officio;
- 8       (2) two members of the Senate, to be appointed by the President  
9 of the Senate, who shall not be of the same political party;
- 10       (3) two members of the General Assembly, to be appointed by  
11 the Speaker of the General Assembly, who shall not be of the same  
12 political party; and
- 13       (4) eight public members appointed by the Governor, as  
14 follows: two persons recommended by the Alzheimer's Association,  
15 one of whom shall be a representative of the Greater New Jersey  
16 Chapter and one of whom shall be a representative of the  
17 Alzheimer's Association Delaware Valley Chapter; two health care  
18 professionals who are currently involved in the provision of direct  
19 services, one of whom shall be a representative of an agency that  
20 provides home care services to persons with dementia and one of  
21 whom shall be a representative of a licensed nursing home or  
22 assisted living facility that provides specialized services to persons  
23 with dementia; one representative from the clergy who has  
24 experience providing emotional and spiritual care and support for  
25 persons with Alzheimer's disease and their families; two persons  
26 who by reason of family relationship or legal guardianship bear or  
27 have borne responsibility in caring for a person with Alzheimer's  
28 disease; and one attorney who is currently licensed and practicing in  
29 New Jersey, has expertise in legal and financial planning and elder  
30 care issues, and has extensive community-based experience  
31 working with persons with Alzheimer's disease and their families.
- 32       c. Vacancies in the membership of the commission shall be  
33 filled in the same manner provided for the original appointments.
- 34       d. The commission shall organize as soon as practicable  
35 following the appointment of its members and shall select a  
36 chairperson from among the members. The chairperson shall  
37 appoint a secretary who need not be a member of the commission.
- 38       e. Members of the commission shall serve without  
39 compensation, but shall be reimbursed for necessary expenses  
40 incurred in the performance of their duties as members of the  
41 commission, within the limits of funds appropriated or otherwise  
42 made available to the commission for its purposes.
- 43       f. The commission shall be entitled to call to its assistance and  
44 avail itself of the services of the employees of any State, county, or  
45 municipal department, board, bureau, commission, or agency as it  
46 may require and as may be available to it for its purposes.

- 1 g. The Department of Health and Senior Service shall provide  
2 staff support to the commission, as necessary.  
3
- 4 3. It shall be the duty of the commission to:
- 5 a. study the current impact and incidence of Alzheimer's  
6 disease among State residents, and make projections about the  
7 future impact and incidence among State residents;
- 8 b. study the State's role in long-term care, family caregiver  
9 support, and assistance to persons with early stage and early onset  
10 of Alzheimer's disease;
- 11 c. consider the capacity of public safety and law enforcement  
12 officials to respond to persons with Alzheimer's disease and for  
13 these officials to have proper education and training;
- 14 d. study the needs of persons with Alzheimer's disease and  
15 their family members and caregivers, assess the availability and  
16 affordability of existing services, programs, facilities, and agencies  
17 to meet those needs, and make recommendations for improving,  
18 expanding, or changing such services, programs, facilities, and  
19 agencies, as appropriate;
- 20 e. gather and disseminate data and information relative to the  
21 care of persons with Alzheimer's disease in order to provide health  
22 care professionals and governmental policymakers, as appropriate,  
23 with accurate data about the disease and its impact on these persons  
24 and their family members and caregivers;
- 25 f. identify the adequacy, appropriateness, and best practice-  
26 based geriatric and psychiatric services and interventions; and
- 27 g. consider such other issues as the commission may identify as  
28 necessary to ease the burden for persons with Alzheimer's disease  
29 and their family members and caregivers in the State.  
30
- 31 4. The commission may meet and hold hearings at such places  
32 and times as it shall designate, and shall report its findings and  
33 recommendations to the Governor, and to the Legislature pursuant  
34 to section 2 of P.L.1991, c.164 (C.52:14-19.1), within two years of  
35 the appointment of a majority of the public members of the  
36 commission.  
37
- 38 5. This act shall take effect immediately and shall expire upon  
39 the submission by the commission of its report.  
40  
41

42 STATEMENT

43  
44 This bill establishes a 15-member Alzheimer's Disease Study  
45 Commission. The duties of the commission are to:



- 1       • Study the current impact and incidence of Alzheimer’s  
2       disease among State residents, and make projections about  
3       the future impact and incidence among State residents;
- 4       • Study the State’s role in long-term care, family caregiver  
5       support, and assistance to persons with early stage and early  
6       onset of Alzheimer’s disease;
- 7       • Consider the capacity of public safety and law enforcement  
8       officials to respond to persons with Alzheimer’s disease and  
9       for these officials to have proper education and training;
- 10      • Study the needs of persons with Alzheimer’s disease and  
11      their family members and caregivers, assess the availability  
12      and affordability of existing services, programs, facilities,  
13      and agencies to meet those needs, and make  
14      recommendations for improving, expanding, or changing  
15      such services, programs, facilities, and agencies, as  
16      appropriate;
- 17      • Gather and disseminate data and information relative to the  
18      care of persons with Alzheimer’s disease in order to provide  
19      health care professionals and governmental policymakers, as  
20      appropriate, with accurate data about the disease and its  
21      impact on these persons and their family members and  
22      caregivers;
- 23      • Identify the adequacy, appropriateness, and best practice-  
24      based geriatric and psychiatric services and interventions;  
25      and
- 26      • Consider such other issues as the commission may identify  
27      as necessary to ease the burden for persons with Alzheimer’s  
28      disease and their family members and caregivers in the  
29      State.

30       The commission may meet and hold hearings at such places and  
31       times as it shall designate, and shall report its findings and  
32       recommendations to the Governor and Legislature within two years  
33       of the appointment of a majority of the public members of the  
34       commission. The bill would take effect immediately and expire  
35       upon the submission by the commission of its report.

36       The members of the commission would include:

37       the Commissioners of Health and Senior Services, Human  
38       Services, and Community Affairs, or their designees, who shall  
39       serve ex officio;

40       two members of the Senate, to be appointed by the President of  
41       the Senate, who shall not be of the same political party;

42       two members of the General Assembly, to be appointed by the  
43       Speaker of the General Assembly, who shall not be of the same  
44       political party; and

45       eight public members appointed by the Governor, as follows:  
46       two members recommended by the Alzheimer’s Association, one of  
47       whom shall represent the Greater New Jersey Chapter (which serves

1 the majority of the State's population and geography), and one of  
2 whom shall represent the Alzheimer's Association Delaware Valley  
3 Chapter (which serves the seven most southern counties of the  
4 State); two health care professionals who are currently involved in  
5 direct services, one of whom shall be a representative of an agency  
6 that provides home care services to persons with dementia and one  
7 of whom shall be a representative of a licensed nursing home or  
8 assisted living facility that provides specialized services to persons  
9 with dementia; one representative from the clergy who has  
10 experience providing emotional and spiritual care and support for  
11 persons with Alzheimer's disease and their families; two persons  
12 who by reason of family relationship or legal guardianship bear or  
13 have borne responsibility in caring for a person with Alzheimer's  
14 disease; and one attorney who is currently licensed and practicing in  
15 New Jersey, has expertise in legal and financial planning and elder  
16 care issues, and has extensive community-based experience  
17 working with persons with Alzheimer's disease and their families.

18 A similar commission to study Alzheimer's disease was  
19 established under P.L.1983, c.352 but has since expired. This bill  
20 will establish a new commission to study current issues with regard  
21 to Alzheimer's disease, which has increased in prevalence over the  
22 years. According to the report of the Alzheimer's Association, *2009*  
23 *Alzheimer's Disease Facts and Figures*, by 2010, there will be  
24 nearly a half million new cases of Alzheimer's disease each year;  
25 and by 2050, there will be nearly a million new cases per year, and  
26 between 11 and 16 million persons with Alzheimer's Disease.

# ASSEMBLY HEALTH AND SENIOR SERVICES COMMITTEE

## STATEMENT TO

### **ASSEMBLY, No. 322**

with committee amendments

# **STATE OF NEW JERSEY**

DATED: MAY 5, 2011

The Assembly Health and Senior Services Committee reports favorably and with committee amendments Assembly Bill No. 322.

As amended by the committee, this bill establishes the New Jersey Alzheimer's Disease Study Commission in the Department of Health and Senior Services (DHSS).

The bill provides specifically as follows:

- The commission is to consist of 15 members as follows:
  - the Commissioners of Health and Senior Services and Human Services, or their designees, as ex officio members;
  - two members each from the Senate and the General Assembly, to be appointed by the President of the Senate and the Speaker of the General Assembly, respectively, who in either case are not of the same political party;
  - nine public members appointed by the Governor, as follows: two persons recommended by the Alzheimer's Association, one of whom is a representative of the Greater New Jersey Chapter and one of whom is a representative of the Alzheimer's Association Delaware Valley Chapter; three health care professionals who are currently involved in the provision of direct services, one of whom is a representative of an agency that provides home care services to persons with dementia, one of whom is a representative of an assisted living facility that provides specialized services to persons with dementia, and one of whom is a representative of a licensed nursing home that provides specialized services to persons with dementia; one representative from the clergy who has experience providing emotional and spiritual care and support for persons with Alzheimer's disease and their families; two persons who by reason of family relationship or legal guardianship bear or have borne responsibility in caring for a person with Alzheimer's disease; and one attorney who is currently licensed and practicing in New Jersey, has expertise in legal and financial planning and elder care issues, and has extensive community-based experience working with persons with Alzheimer's disease and their families.

- The commission is to organize as soon as practicable following the appointment of its members and to select a chairperson from among the members. The chairperson is to appoint a secretary who need not be a member of the commission.
- Members of the commission are to serve without compensation, but will be reimbursed for necessary expenses incurred in the performance of their duties as members of the commission, within the limits of funds appropriated or otherwise made available to the commission for its purposes.
- The commission is entitled to call to its assistance and avail itself of the services of the employees of any State, county, or municipal department, board, bureau, commission, or agency as it may require and as may be available to it for its purposes.
- DHSS is to provide staff support to the commission, as necessary.
- It will be the duty of the commission to:
  - study the current impact and incidence of Alzheimer's disease among State residents, and make projections about the future impact and incidence among State residents;
  - study 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;
  - consider the capacity of public safety and law enforcement officials to respond to persons with Alzheimer's disease and for these officials to have proper education and training;
  - study the needs of persons with Alzheimer's disease and their family members and caregivers, assess the availability and affordability of existing services, programs, facilities, and agencies to meet those needs, and make recommendations for improving, expanding, or changing such services, programs, facilities, and agencies, as appropriate;
  - gather and disseminate data and information relative to the care of persons with Alzheimer's disease in order to provide health care professionals and governmental policymakers, as appropriate, with accurate data about the disease and its impact on these persons and their family members and caregivers;
  - identify the adequacy, appropriateness, and best practice-based geriatric and psychiatric services and interventions; and
  - consider such other issues as the commission may identify as necessary to ease the burden for persons with Alzheimer's disease and their family members and caregivers in the State.
- The commission may meet and hold hearings at such places and times as it designates, and is to report its findings and recommendations to the Governor and the Legislature within two years of the appointment of a majority of the public members of the commission.
- The bill expires upon the submission by the commission of its report.

As reported by the committee, this bill is identical to Senate Bill No. 125 (1R) (Connors/Van Drew), which the committee also reported on this date.

This bill was pre-filed for introduction in the 2010-2011 session pending technical review. As reported, the bill includes the changes required by technical review, which has been performed.

COMMITTEE AMENDMENTS

The committee amendments to the bill delete the Commissioner of Community Affairs as a member of the commission and increase the number of public members from eight to nine by adding a health care professional who represents an assisted living facility.