

SENATE BILL 313

J1
SB 725/20 – EHE

(PRE-FILED)

1lr0730
CF HB 119

By: **Senator Washington**

Requested: September 25, 2020

Introduced and read first time: January 13, 2021

Assigned to: Education, Health, and Environmental Affairs

Committee Report: Favorable

Senate action: Adopted

Read second time: February 5, 2021

CHAPTER _____

1 AN ACT concerning

2 **Maryland Department of Health – Public Health Outreach Programs – Cognitive**
3 **Impairment, Alzheimer’s Disease, and Other Types of Dementia**

4 FOR the purpose of requiring the Maryland Department of Health, in partnership with the
5 Department of Aging, the Virginia I. Jones Alzheimer’s Disease and Related
6 Disorders Council, and the Greater Maryland Chapter of the Alzheimer’s
7 Association, to incorporate certain information regarding cognitive impairment,
8 Alzheimer’s disease, and other types of dementia into relevant public health
9 outreach programs administered by the Maryland Department of Health; and
10 generally relating to public health outreach programs administered by the Maryland
11 Department of Health.

12 BY adding to
13 Article – Health – General
14 Section 18–110
15 Annotated Code of Maryland
16 (2019 Replacement Volume and 2020 Supplement)

17 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,
18 That the Laws of Maryland read as follows:

19 **Article – Health – General**

20 **18–110.**

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 **THE DEPARTMENT, IN PARTNERSHIP WITH THE DEPARTMENT OF AGING, THE**
2 **VIRGINIA I. JONES ALZHEIMER'S DISEASE AND RELATED DISORDERS COUNCIL,**
3 **AND THE GREATER MARYLAND CHAPTER OF THE ALZHEIMER'S ASSOCIATION,**
4 **SHALL INCORPORATE INFORMATION INTO RELEVANT PUBLIC HEALTH OUTREACH**
5 **PROGRAMS ADMINISTERED BY THE DEPARTMENT TO:**

6 **(1) EDUCATE HEALTH CARE PROVIDERS REGARDING:**

7 **(I) THE IMPORTANCE OF EARLY DETECTION AND TIMELY**
8 **DIAGNOSIS OF COGNITIVE IMPAIRMENT;**

9 **(II) VALIDATED ASSESSMENT TOOLS FOR THE DETECTION AND**
10 **DIAGNOSIS OF COGNITIVE IMPAIRMENT;**

11 **(III) THE VALUE OF A MEDICARE ANNUAL WELLNESS VISIT OR**
12 **OTHER ANNUAL PHYSICAL FOR AN INDIVIDUAL AT LEAST 65 YEARS OLD FOR**
13 **COGNITIVE HEALTH; AND**

14 **(IV) THE MEDICARE CARE PLANNING BILLING CODE FOR**
15 **INDIVIDUALS WITH COGNITIVE IMPAIRMENT; AND**

16 **(2) INCREASE UNDERSTANDING AND AWARENESS OF:**

17 **(I) THE EARLY WARNING SIGNS OF ALZHEIMER'S DISEASE AND**
18 **OTHER TYPES OF DEMENTIA;**

19 **(II) THE VALUE OF EARLY DETECTION AND DIAGNOSIS OF**
20 **ALZHEIMER'S DISEASE AND OTHER TYPES OF DEMENTIA; AND**

21 **(III) HOW TO REDUCE THE RISK OF COGNITIVE DECLINE,**
22 **PARTICULARLY AMONG INDIVIDUALS IN BLACK AND LATINO COMMUNITIES WHO**
23 **ARE AT GREATER RISK OF DEVELOPING ALZHEIMER'S DISEASE AND OTHER TYPES**
24 **OF DEMENTIA.**

25 **SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect**
26 **October 1, 2021.**