# COMMITTEE ON LEGISLATIVE RESEARCH OVERSIGHT DIVISION

### FISCAL NOTE

L.R. No.:1854-01Bill No.:Perfected SB 449Subject:Establishes an Alzheimer's Awareness Day and requires minimum training<br/>requirements for persons caring for individuals with dementia.Type:OriginalDate:March 14, 2001

# FISCAL SUMMARY

ESTIMATED NET EFFECT ON STATE FUNDS							
FUND AFFECTED	FY 2002	FY 2003	FY 2004				
Total Estimated							
Net Effect on <u>All</u> State Funds	\$0	\$0	\$0				

ESTIMATED NET EFFECT ON FEDERAL FUNDS							
FUND AFFECTED	FY 2002	FY 2003	FY 2004				
Total Estimated Net Effect on <u>All</u> Federal Funds	\$0	\$0	\$0				

ESTIMATED NET EFFECT ON LOCAL FUNDS							
FUND AFFECTED	FY 2002	FY 2003	FY 2004				
Local Government	(Unknown)	(Unknown)	(Unknown)				

Numbers within parentheses: () indicate costs or losses. This fiscal note contains 5 pages.

FISCAL ANALYSIS

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#### ASSUMPTION

Officials from the **Department of Health (DOH)** stated the proposed legislation would not be expected to significantly impact the operations of the DOH. If the proposal were to substantially impact the DOH programs, then the DOH would request funding through the appropriations process.

Officials from the **University of Missouri (UM)** stated the UM would incur no additional costs as a result of the proposed legislation as it is currently written.

Officials from the **Department of Public Safety - Veterans' Commission** and **Department of Economic Development** stated the proposed legislation would not have a fiscal impact on their organizations.

Officials from the **Department of Mental Health (DMH)** stated this bill does not require any action, or add any responsibilities to the DMH. The additional duties and responsibilities accrue to the Division of Aging. The DMH officials stated, therefore, there is no fiscal impact to the DMH.

Officials from the **Office of the Governor (GOV)** stated the proposed legislation would have no direct cost to the GOV.

Officials from the **Department of Social Services - Division of Aging (DA)** stated that currently the DA provides some technical assistance and training related to Alzheimer's disease and related dementia and is working with the Department of Mental Health (DMH) to develop dementia specific training materials for DA social workers and supervisors. Additionally, the Alzheimer's Association offers dementia specific videos at no charge and provides other training from their chapters for a minimal fee to cover their expenses. The DA routinely refers consumers with specific Alzheimer's related questions to the Alzheimer's Association chapter offices located nearest to their community. Through the Alzheimer's Coalition, the DA partners with the five (5) Missouri Alzheimer Association (AA) chapters, meeting on a quarterly basis to exchange information. The DA believes staff within the division will be able to support these activities without the need for additional FTE.

The DA assumes the Alzheimer's Coalition could be expanded to include other state agencies, industry associations, institutions of higher learning with expertise in dementia care and would act as the committee responsible for assisting the DA in: developing regulations related to the training requirements; determining minimum training requirements for employees responsible for direct and indirect care of patients with Alzheimer's disease or related dementia; maintaining <u>ASSUMPTION</u> (continued)

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up-to-date information regarding training materials and dementia-specific trainers; and providing technical assistance. The DA estimates the committee would meet no more than semiannually and that costs would not be significant for these meetings.

If it is the intent of this legislation for the DA to actually develop and maintain training packages or materials to be utilized by others for training, then the DA would anticipate one-time costs for the development of these training materials to be approximately \$30,000 (\$10.00 per unit for each of the approximately 2,000 provider agencies and an additional 1,000 copies to be used by the DA and to be made available on a loaner basis to independent contractors). Additionally, the DA would anticipate ongoing cost for annual updates of the training materials of \$4.00 per unit for an annual cost of \$12,000.

The DA Institutional Services (DAIS) is responsible for surveying skilled nursing facilities and intermediate care facilities participating in the Medicare/Medicaid programs; conducting state licensure inspections in skilled nursing facilities, intermediate care facilities and residential care facilities; and investigating allegations of abuse, neglect, exploitation or violations of regulations in skilled nursing facilities. The DAIS believes the establishment of Alzheimer's and related dementia specific training requirements in facilities licensed by the DA pursuant to chapter 198 and adult day care programs established pursuant to section 660.400, RSMo, will not significantly increase the amount of time spent by field survey staff in conducting inspections, surveys and/or complaint investigations as they already review training documentation.

The DA Home and Community Services (DAHCS) is responsible for monitoring in-home services providers and other contracted service providers and investigating allegations of abuse, neglect, exploitation or other compliance requirements. The DAHCS believes the establishment of Alzheimer's and related dementia specific training requirements will not significantly increase the amount of time spent by HCS staff responsible for monitoring activities as they already review training documentation.

The DA estimates the total number of agencies requiring training will be in excess of 1,900, composed of 71 hospice agencies, 195 home health agencies, 668 residential care facilities, 477 skilled nursing facilities, 67 intermediate care facilities, 392 in-home service providers, and 72 adult day care programs. Additionally, the proposed legislation requires training for the 550+ DA employees and an unknown number of independent care workers serving elders in the homes.

The DA assumes the training will consist of, at a minimum, 2 hours for new employees for those providing direct care to clients or residents. Costs for this training would be borne by the providers. For employees who come into indirect contact with clients or residents and for <u>ASSUMPTION</u> (continued)

ongoing in-service training, the DA assumes a one hour training session will be sufficient.

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Again, costs would be borne by the providers and the DA would incorporate the requirement into its existing staff development program.

The DA officials stated the proposed legislation will impact local fiscal governments to the extent that provider agencies, some of which are local government units, will now be mandated to comply with regulations on specific orientation training and in-services on the topic of Alzheimer's disease and other dementia. This will impact these local governmental units as a result of costs incurred for: training materials, staff time spent in training (i.e. staff to cover unit while other staff are in training) and trainer fees, as applicable.

FISCAL IMPACT - State Government	FY 2002 (10 Mo.)	FY 2003	FY 2004
	<u>\$0</u>	<u>\$0</u>	<u>\$0</u>
FISCAL IMPACT - Local Government	FY 2002 (10 Mo.)	FY 2003	FY 2004
	<u>(Unknown)</u>	<u>(Unknown)</u>	<u>(Unknown)</u>

# FISCAL IMPACT - Small Business

The proposed legislation would be expected to increase the costs to small businesses to the extent they would be required to provide additional training for employees working with individuals with Alzheimer's disease and other dementia.

### DESCRIPTION

The proposed legislation would mandate the governor to issue a proclamation setting the first Tuesday of March as "Alzheimer's Awareness Day". In addition, the Division of Aging would be required to provide up-to-date information and technical assistance related to the needs and interests of persons with Alzheimer's disease or related dementia, including dementia-specific training materials and trainers. The dementia-specific information and technical assistance is to be maintained and provided in consultation with agencies, organizations and/or institutions of higher learning with expertise in dementia care.

By January 1, 2002, the Division of Aging must establish minimum dementia-specific training requirements for employees involved in the delivery of care to persons with Alzheimer's disease or related dementia who are employed by skilled nursing facilities, intermediate care facilities, residential care facilities, agencies providing in-home care services, adult daycare programs, <u>ASSUMPTION</u> (continued)

independent contractors providing direct care to persons with Alzheimer's disease or related

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dementia, hospice programs and the Division of Aging. The training will be incorporated into new employee orientation and on-going in-service curricula for all employees involved in the care of persons with dementia. The training is to include, at a minimum, an overview of Alzheimer's disease and related dementia, communicating with persons with dementia, behavior management, promoting independence in activities of daily living, and understanding and dealing with family issues. For employees not providing direct care, but possibly having contact with persons with Alzheimer's disease or related dementia, the training shall include an overview of dementia and communicating with persons with dementia. As used in Section 660.050, the term "employee" includes persons hired as independent contractors.

This legislation is not federally mandated, would not duplicate any other program and would not require additional capital improvements or rental space.

#### SOURCES OF INFORMATION

Department of Health University of Missouri Department of Economic Development Department of Mental Health Department of Social Services Department of Public Safety Office of the Governor

Jeanne Jarrett, CPA Director

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