**Alzheimer’s Advisory Council Statute**

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**Legal Authority:** *Section 16AA of MGL Chapter 6A (Chapter 220 of the Acts of 2018)*

**Purpose:** The advisory council shall advise the executive office and the legislature on the state's Alzheimer’s disease policy. The advisory council shall work with the secretary of health and human services to determine the number of persons diagnosed each year with early-onset Alzheimer’s disease regardless of their age, as well as identify resources available and services needed for these individuals and associated costs.

**17 Members:**

* The Secretary of Health and Human Services, or a designee
* The Secretary of Elder Affairs, or a designee
* The Commissioner of Public Health, or a designee
* The Secretary of Veterans’ Services, or a designee
* The Director of the Office of Medicaid, or a designee
* The House Chair of the Joint Committee on Elder Affairs, or a designee
* The Senate Chair of the Joint Committee on Elder Affairs, or a designee

**10 persons to be appointed by the governor, as follows:**

* 2 Alzheimer’s disease patient advocates
* 2 Alzheimer’s disease caregivers
* 2 health care providers
* 2 researchers with Alzheimer-related expertise in basic, translational, clinical or drug development science
* 2 voluntary health association representatives, including:
  + A representative from a state Alzheimer's disease organization that funds research and has demonstrated experience in care and patient services and
  + A representative from a state based advocacy organization that provides services to families and professionals, including information and referral, support groups, care consultation, education and safety services

**Meetings:** At least quarterly, such meetings shall be open to the public

**Reporting:** The advisory council shall annually provide to the executive office and the legislature a report which shall include:

1. information and recommendations on Alzheimer’s disease policy;
2. an evaluation of all state-funded efforts in Alzheimer's disease research, clinical care, institutional, home-based and community-based programs;
3. the outcomes of such efforts; and
4. any proposed updates to the state plan, which the advisory council shall annually review.