MaineHealth

Testimony of Sarah Calder, MaineHealth
In Opposition to LD 1072
“An Act to Promote Workforce Education on Alzheimer's Disease and Dementia”
March 21, 2019

Senator Sanborn, Representative Tepler and distinguished members of the Joint Standing Committee on Health Coverage, Insurance and Financial Services, I am Sarah Calder, Director of Government Affairs for MaineHealth, and I am here to testify in opposition to LD 1072, An Act to Promote Workforce Education on Alzheimer's Disease and Dementia.

MaineHealth is Maine’s largest integrated non-profit health care system that provides the full continuum of health care services to the residents of eleven counties in Maine and one in New Hampshire. As part of our mission of “Working Together So Maine’s Communities are the Healthiest in America,” MaineHealth has a long-standing commitment to improving the diagnosis, resources and care to people with dementia and their caregivers. MaineHealth has training programs in place to provide continuing education for individuals providing care across the professional and care continuum on Alzheimer's disease and dementia including diagnosis, behavioral symptoms, respectful and effective communication, safety, signs of abuse and neglect and identifying signs of self-neglect by persons living alone. MaineHealth also coordinates and offers training to our post-acute care partners in evidence-based approaches to dementia capable care.

MaineHealth has significant concerns with LD 1072 and the effect it will have on patient confidentiality. This bill requires health care practitioners to disclose a diagnosis of Alzheimer's disease or dementia to an authorized representative or a family or household member except for a person that is expressly prohibited by the individual diagnosed. It is important to note that not every patient with early cognitive impairment lacks insight or judgement and decision making ability. To mandate sharing seems a disservice to the patient and provider relationship. While we agree that sharing the diagnosis is important, putting a specific diagnosis (that is not a communicable disease) in statute is a slippery slope. Additionally, a diagnosis of Alzheimer's disease or dementia is not always clear and this legislation could put pressure on a provider to make a diagnosis, which may also disincentivize a provider from making an earlier diagnosis.

While MaineHealth certainly supports efforts to strengthen dementia care across the care continuum, LD 1072 would also place an unnecessary burden on hospitals and providers. Hospitals are already held to rigorous standards both at the federal and state levels for the quality of care provided and, furthermore, are accountable for the education and training of their providers.
For those reasons, I urge the Committee to vote Ought Not to Pass on LD 1072, An Act to Promote Workforce Education on Alzheimer's Disease and Dementia. Thank you and I would be happy to answer any questions you may have.