75th OREGON LEGISLATIVE ASSEMBLY - 2009 Regular Session STAFF MEASURE SUMMARY House Committee on Health Care

MEASURE: CARRIER:

FISCAL: No fiscal impact	
Action:	Do Pass as Amended and Be Printed Engrossed
Vote:	10 - 0 - 0
Yeas:	Bruun, Cannon, Dembrow, Garrett, Harker, Kennemer, Kotek, Maurer, Thompson, Greenlick
Nays:	0
Exc.:	0
Prepared By:	Sandy Thiele-Cirka, Administrator
Meeting Dates:	5/13, 5/20, 5/27

REVENUE: No revenue impact

WHAT THE MEASURE DOES: Specifies that dementia is not mental illness for purposes of actions that health care representative may take on behalf of person executing advance health care directive. Grants authority for a health care representative to consent to hospitalization not to exceed 18 days for treatment of behavior caused by dementia. Adds January 2, 2012 sunset date and emergency clause, effective on passage.

ISSUES DISCUSSED:

- Limited options for violent dementia episodes
- Intent of mental illness provision
- Elimination of mental illness provision
- Guardianship for persons with dementia
- Current psychiatric directive ineffective •
- Proposed amendments
- Mental health advocates and stakeholders support amendment •
- Need for broader discussion

EFFECT OF COMMITTEE AMENDMENT: Grants authority for a health care representative to consent to hospitalization not to exceed 18 days for treatment of behavior caused by dementia. Adds January 2, 2012 sunset date and emergency clause, effective on passage.

BACKGROUND: The Alzheimer's Association predicts a 33 percent increase in the number of Oregonians with dementia between 2000 and 2010, a 58 percent increase between 2000 and 2020, and a 93 percent increase between 2000 and 2025. Age is the biggest risk factor for dementia and the baby boomers begin reaching age 65 in a few years. Between 40 percent and 90 percent of people with dementia develop significant behavioral disturbance at some point from this illness.

Dementia is the progressive deterioration of intellectual functioning and other cognitive skills that leads to a significant impairment in social or occupational function and that represents a significant decline from a previous level of functioning. It can cause a person to act in ways that are dangerous to the person or to others. Short-term hospitalization for psychiatric treatment may decrease or eliminate these behaviors. Most psychiatric hospitalizations for those with dementia and behavior disturbance last less than 14 days. The goal of the hospitalization is to help improve quality of life, decrease anxiety, agitation and usually results in people being safe to live in their communities.

One component of an advance directive is to appoint a health care representative (HCR) that is responsible for making decisions on the patient's behalf, and follows the patient's desires as stated in the advance directive document.