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*Legislative District 43*  
Baltimore City

Education, Health, and  
Environmental Affairs Committee

*Chair*  
Joint Committee on Ending  
Homelessness

*Chair*  
Joint Committee on Children,  
Youth, and Families



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**TESTIMONY IN SUPPORT OF SB313**  
**Maryland Department of Health – Public Health Outreach Programs –**  
**Cognitive Impairment, Alzheimer’s Disease, and Other Types of Dementia**  
Health and Government Operations Committee

March 23, 2021

Chair Pendergrass, Vice-Chair Pena-Melnyk and Members of the Committee,

I respectfully urge you to vote favorably on Senate Bill 313, legislation which passed the House in 2020.

Alzheimer’s and dementia is personal to me. It is also personal to this entire chamber; our beloved former colleague, Rushern Baker has long been a caregiver for his wife Cis, who received a diagnosis of early-onset dementia over a decade ago. A 2012 Washington Post article (*please see Washington Post piece accompanying this testimony*) describes how, in 2008 when the condition first set in, Rushern and his children did not know what was happening. They thought Cis was depressed. The mother who was ‘always on top of every little thing’ got lost driving back home to Cheverly, after a regular trip to her parents in Richmond. She became confused about the route to the local library. She forgot to pay bills. They did not know, until nearly two years later, that Cis had Alzheimer’s disease. Today, her condition is sadly much worse.

Cis’s story is all too common; families often do not know their loved ones have dementia. Too many of the over 110,000 Marylanders take far too long to recognize the early warning signs of this cruel disease, to get screened, and to get into a care treatment plan.

This legislation mandates that multiple organizations working on this disease—the Department of Health, the Department of Aging, the State Alzheimer’s Council, and the Alzheimer’s Association—prioritize a Health Department led partnership to aid families across Maryland. It focuses on provider education on Alzheimer’s and other dementia,

and I am grateful that MedChi is in support of this legislation. It also requires focused outreach to Black and Latino communities—who are twice as likely, and 1.5 times more likely, to be diagnosed with dementia than Caucasians—to reduce their risk of cognitive decline. As Speaker Jones said via tweet earlier this month (*please see Baltimore Sun piece accompanying this testimony*), we must prioritize raising awareness about health risks in communities with the greatest health disparities. This bill does that.

I wish this bill was not necessary. Yet it is. The number of Marylanders with dementia is expected to grow by over 18 percent in the next five years, and—because of the number of competing priorities we all have—we need legislation to help government prioritize this partnership of four different organizations working to help families across our state. This is more than a statement bill about Alzheimer’s; it is an acknowledgement that the General Assembly can—like we do for so many different issues—compel a coordinated, focused approach for better care.

For these reasons, I ask you for a favorable report on SB 313.

In partnership,

A handwritten signature in blue ink, appearing to read "Mary Washington". The signature is fluid and cursive, with a large loop at the end.

Senator Mary Washington, District 43, Baltimore City