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BILL NO: HB 446

TITLE: Health – Dementia Services and Brain Health Program and Clinical Toolkit

SPONSOR: Delegate Martinez and Acevero

COMMITTEE: Health

POSITION: SUPPORT

DATE: February 12, 2026

Baltimore County SUPPORTS House Bill 446 – Health – Dementia Services and Brain Health Program and Clinical Toolkit. This bill establishes a dedicated Dementia Services and Brain Health Program within the Maryland Department of Health. This legislation would lead the State’s efforts to address brain health and dementia using a collaborative public health approach.

The Baltimore County Department of Aging serves as the Area Agency on Aging for Baltimore County, working directly with older adults and caregivers across the dementia care continuum. Through our Dementia Navigation Program, the County provides care coordination, education, and referrals, offering firsthand insight into the gaps in early identification, care coordination, and dementia-capable systems that House Bill 446 is designed to address.

Baltimore County is home to one of the largest older adult populations in the State, and the prevalence of dementia locally is significant and growing. According to the Maryland Department of Health’s Alzheimer’s Disease and Related Dementias (ADRD) Prevalence Data Report, Baltimore County has approximately 35,418 residents age 65 and older living with ADRD diagnoses, placing the County among those with the highest ADRD burden in Maryland and the U.S. The County’s dementia prevalence rate is 11.91% of residents age 65 and older, reflecting substantial demand on health care systems, community-based services, and caregivers.

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Statewide, 148,470 Marylanders age 65 and older are living with a diagnosed dementia, representing 15.26% of the State’s older adult population. Importantly, the MDH report demonstrates that Alzheimer’s disease represents only a portion of this burden; for every

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individual diagnosed with Alzheimer's disease, there are approximately three individuals diagnosed with other forms of dementia, including vascular and mixed dementias. This finding underscores the need for a comprehensive brain health and dementia strategy, as envisioned in House Bill 446.

The impact of dementia extends well beyond the health care system and places a substantial burden on families and caregivers. According to Alzheimer's Association estimates, Maryland's 258,000 unpaid caregivers provide approximately 292 million hours of care each year, with an estimated economic value of \$7 billion annually. Many caregivers experience negative health and economic consequences, including lost wages, increased chronic disease, and emotional strain. Strengthening early detection, care coordination, and referral pathways, key functions of the Program and clinical toolkit established under HB 446, can help reduce avoidable crises that increase caregiver burden and system costs.

Dementia prevalence and outcomes are also shaped by social determinants of health, including education, access to preventive care, and lifelong opportunities for cognitive engagement. The MDH data demonstrate persistent racial disparities, with Black/African American Marylanders experiencing higher rates of dementia diagnoses and dementia-related hospitalizations than White residents. These inequities are closely tied to historic disparities in education, chronic disease burden, and access to culturally responsive health care. HB 446 appropriately addresses these challenges by requiring the State to assess provider readiness, examine disparities, and promote dementia-capable care statewide.

Finally, emerging brain health research reinforces the importance of prevention and early intervention. Evidence summarized in public health research indicates that education, coaching, and lifestyle interventions, such as physical activity, nutrition, cognitive engagement, and management of chronic conditions, can help reduce dementia risk and potentially slow cognitive decline. House Bill 446 supports this growing body of evidence by positioning brain health as a public health priority and ensuring providers have access to up-to-date tools, education, and resources to support risk reduction and early action.

House Bill 446 provides Baltimore County and the State with the leadership, accountability, and coordination necessary to translate robust data and emerging science into meaningful public health action. By establishing a permanent Dementia Services and Brain Health Program, Maryland can better align prevention, early detection, caregiver support, and dementia-capable care improving outcomes while using public resources more effectively.

Accordingly, Baltimore County urges a **FAVORABLE** report on House Bill 446 from the House Health Committee. For more information, please contact Kayenda Twesigye, State Legislative Officer of Government Affairs at ktwesigye@baltimorecountymd.gov.

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Data Source

Maryland Department of Health, Prevention and Health Promotion Administration, Center for Chronic Disease Prevention and Control. *Alzheimer's Disease and Related Dementias (Prevalence Data Report* (based on Medicaid, hospital discharge, and CRISP clinical data; most recent report)

(<https://health.maryland.gov/phpa/ccdpc/healthyaging/Documents/Alzheimer%E2%80%99s%20Disease%20and%20Related%20Dementias%20Prevalence%20Data%20Report%20-%20MDH%20Letterhead.docx.pdf>).