

Testimony in Support of HB 446 “Dementia Services and Brain Health Program and Clinical Toolkit”

Maryland House Committee February 12, 2026

**FAVORABLE**

TO: Chair Bagnall, Vice Chair Cullison, and members of the Health Committee

FROM: John H. Bowers

My name is John Bowers, and I am a resident of Montgomery County, and a District 14 constituent. I also volunteer as an advocate (since 2019) for the Alzheimer’s Association.

I am submitting this testimony in support of HB 446, the Dementia Services and Brain Health Program and Clinical Toolkit Act, which at its core builds upon the progress since 2022 by the Director of Dementia Services Coordination at the Maryland Department of Health.

In 2013 I lost my mother, Marilyn, to Alzheimer’s disease. Her decline during the preceding 10 years was made even more challenging, as her primary care physician was not adequately-prepared to evaluate, diagnose, and discuss her symptoms with either of my parents, their fear of societal stigma in their small community, and multiple crises during her care in assisted-living and nursing home settings, due to a dearth of dementia-trained direct care workers.

Since then, many advancements and improvements have been achieved in early detection, diagnosis and care for dementia. But more is needed, especially in Maryland, as about 1 in 6 Maryland citizens aged 45 and older have worsening difficulties with thinking or memory. Alzheimer's disease or a related dementia impacts not just the individuals with the disease, but also their caregivers.

The Dementia Services and Brain Health Program and Clinical Toolkit Act of 2026 would (1) establish a clinical toolkit for dementia care to equip healthcare providers in Maryland practical, evidence-based resources for early detection, diagnosis, and care planning, (2) establish a sustainable infrastructure for a Dementia Services and Brain Health Program within DoH to lead risk reduction efforts and coordinate statewide strategies with similar programs in Maryland for diabetes, and cancer, and (3) strengthen the the Virginia I. Jones Alzheimer’s and Related Dementia Council’s capability to assess healthcare provider readiness, and effectively advise the state on ways to make dementia-capable care possible for the nearly 150,000 older adults in Maryland who have been diagnosed.

There is precedent for this program and its key components; in fact, both Virginia and Pennsylvania currently provide toolkits for healthcare providers. If enacted, the program can have an immediate impact, help patients in reducing dementia risk, and drive cost savings through reduced hospitalizations and unnecessary long-term care placements. It is essential that we begin to build our infrastructure to help Marylanders in need.

The potential for this legislation is significant, in how it can help Marylanders, if we devote the resources to address the public health challenge of dementia.

I respectfully urge this committee to return a favorable report on HB 466.

Thank you,

John H. Bowers  
Volunteer Alzheimer’s Advocate  
ALZ Impact Movement