

National Conference of State Legislatures

LEGISBRIEF

Briefing Papers on the Important Issues of the Day

August-September 2009 Vol. 17, No. 36

States Take on Alzheimer's Disease

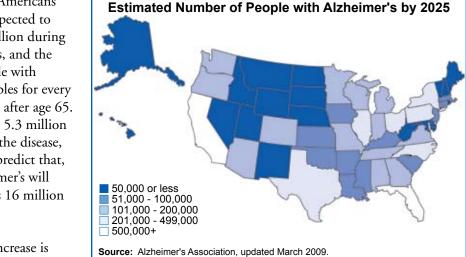
By Matthew Gever

Alzheimer's is one of the most common illnesses among the elderly. One of the most common illnesses among the elderly, Alzheimer's is a brain disease that leads to the loss of cognitive functioning. Common symptoms include loss of memory and thinking skills, language impairment, and difficulty completing normal daily tasks. In the more severe stage, people may not recognize friends and family and may have hallucinations or paranoia.

Now the seventh leading cause of death in the United States, Alzheimer's closely trails diabetes, according to the Centers for Disease Control and Prevention. Experts project that the number of people with the disease will increase as baby boomers age and live longer on average due to medical advances. The fastest growing segment of the population currently is those age 85 and older.

By 2050, Alzheimer's could affect as many as 16 million Americans. The number of Americans over age 65 is expected to double to 72 million during the next 25 years, and the number of people with Alzheimer's doubles for every five-year interval after age 65. Currently, about 5.3 million Americans have the disease, and researchers predict that, by 2050, Alzheimer's will affect as many as 16 million Americans.

A projected increase in Alzheimer's patients will affect state budgets.



This projected increase is also expected to affect state

budgets. Medicaid pays for nursing homes and long-term care—services that are in high demand by Alzheimer's patients. On average, Medicaid payments for Alzheimer's patients are nine times higher than for other patients in the same age group who receive Medicaid benefits, ultimately costing Medicaid \$21 billion in 2005. Alzheimer's also places significant burdens on families and businesses. The disease indirectly costs businesses up to \$37 billion per year in lost productivity, missed work, and replacement expenses for employees who must miss work or leave their jobs to provide care for a relative.

Alzheimer's is perceived to place a more significant burden on families than physical disabilities because it requires more time from family caregivers. Alzheimer's patients also are more likely

to use nursing homes, adding to Medicaid costs (Medicare does not cover long-term nursing home stays). In 2008, for example, 47 percent of all nursing home residents were diagnosed with Alzheimer's disease. By comparison, 13 percent of all Americans over age 65 had such a diagnosis.

No known cure currently exists for Alzheimer's. Treatment consists of managing the symptoms. The Food and Drug Administration has approved four medications to help individuals maintain some level of thinking, memory and speaking skills. The drugs can slow, but do not stop, the progression of the disease and are effective only for a short time. Non-drug treatment approaches focus on changing a patient's home environment to minimize any obstacles and to increase comfort.

Action and develop a plan for dealing with Alzheimer's patients. In 2008, Iowa passed Senate File 2341, which implemented a series of recommendations from its state plan. The law requires the Department of Elder Affairs to develop training standards for caregivers in nursing homes and assisted living facilities who work with Alzheimer's patients. Training will focus on diagnosis and progression of the disease; skills for communicating with patients and families; caregiver stress; and non-pharmacologic interventions. Training also will apply to other sectors—such as law enforcement personnel, advocates and state agencies that oversee long-term care services—that may encounter Alzheimer's patients. Similar training for Alzheimer's and dementia is required in at least 36 states.

y

Training to deal

with Alzheim-

er's patients is

required in at

least 36 states.

One popular state program is the "Silver Alert," similar to "Amber Alerts" to help locate abducted children. Silver Alerts notify the public when someone with a known form of mental impairment, such as Alzheimer's or another form of dementia, is missing. Announcements often are made through radio, television and electronic highway signs. As of June 2009, at least 15 states have such alerts.

Some states also attempt to improve the quality of life for Alzheimer's patients by providing services for their caregivers. The Connecticut Statewide Respite Care Program, for example, provides limited funds for short-term relief to low-income caregivers to help reduce the stress of caring for an Alzheimer's patient. Covered services include adult day care, home health aides, homemakers or short-term nursing home care. All states have some form of caregiver support program to ease the burden for families that provide home-based care.

Federal The Administration on Aging provides grants to states under the Alzheimer's Disease **Action** Supportive Services Program, which expands the availability of community-based support services for Alzheimer's patients and their caregivers and tests new approaches to dealing with the disease. Twenty-eight states currently receive these grants. The National Institute on Aging, with the National Institutes of Health, operates the Alzheimer's Disease Education and Referral Center, which provides research and information on services. The institute also maintains a database of current and upcoming clinical trials for Alzheimer's disease.

Federal grants available to states expand availability of caregiver support services.

Contacts for More Information

Matthew Gever NCSL—Washington, D.C. (202) 624-5400, ext. 3576 matthew.gever@ncsl.org NCSL Long-Term Care webpage www.ncsl.org/Default.aspx?TabId=160&tabs=832,98 ,333#832

Alzheimer's Disease Education and Referral Center National Institutes of Health www.nia.nih.gov/Alzheimers/