ENSURING INDIVIDUALS IN THE ALZHEIMER’S COMMUNITY HAVE ACCESS TO REHABILITATION SERVICES

Washington, DC (October 23, 2012) – As one of the plaintiffs in the federal class action lawsuit, Jimmo v. Sebelius, which challenged the Medicare’s Improvement Standard, the Alzheimer’s Association applauds the recently announced proposed settlement. The long practiced “Medicare Improvement Standard” provided that Medicare beneficiaries must achieve demonstrable improvements in order to receive rehabilitative services, such as physical, speech and occupational therapy. Without these demonstrable improvements, Medicare would not pay for these services. Now, under the settlement agreement, Medicare will pay for these services if they maintain the patient’s current condition or prevent or slow further deterioration.

The Association believes that eliminating the Improvement Standard is very important for the health and well-being of the growing number of Americans with Alzheimer’s disease. As an organization that has advocated for these changes on behalf of the millions of Americans living with Alzheimer’s and the millions more who will face the disease in the future, the Association determined it was important to join this lawsuit to secure these changes.

More than 5 million Americans are living with Alzheimer’s disease, a progressive and fatal degenerative disease that today has no cure. Most individuals with Alzheimer’s are Medicare beneficiaries age 65 and older and are high users of health care and long-term care services. Since Alzheimer’s disease is progressive in nature, most individuals affected by the disease are unlikely to improve. However, rehabilitative services, including speech, occupational and physical therapy, can help those with Alzheimer’s maintain their current function.

Older people with Alzheimer’s disease and other dementias have more skilled nursing home stays and home health care visits than other older people without dementia. According to the Alzheimer’s Association’s 2012 Alzheimer’s Disease Facts and Figures report, in 2008 there were 349 skilled nursing facility stays per 1,000 Medicare beneficiaries compared with 39 stays per 1,000 beneficiaries without these conditions. The same year, 23 percent of Medicare beneficiaries with Alzheimer’s and other dementias had at least one home health visit, compared with 10 percent of Medicare beneficiaries without these conditions. If individuals with Alzheimer’s do not have these necessary services, it can hasten their decline and accelerate the need for more expensive services, such as hospitalizations or placement in a nursing home.

“The Alzheimer’s Association applauds this settlement decision. It ensures that a beneficiary’s potential for improvement will not be the determining factor, but a coverage decision will instead be based on the beneficiary’s need for skilled care. This is a significant victory for the Alzheimer’s community,” says Robert Egge, Vice President of Public Policy for the Alzheimer’s Association. “The Association has long advocated for this development and believes this decision will provide significant assistance to individuals with Alzheimer’s who need these services to maintain their current function and extend their quality of life.”

Alzheimer’s Association
The Alzheimer's Association is the leading voluntary health organization in Alzheimer’s care, support and research. Our mission is to eliminate Alzheimer’s disease through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health. Our vision is a world without Alzheimer’s. For more information, visit www.alz.org.