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STRENGTHENING CARE COORDINATION FOR GROWING ALZHEIMER POPULATION

Alzheimer’s Association Statement

Washington, D.C., May 13, 2009 – As the leading research and advocacy organization for Alzheimer’s disease, the Alzheimer’s Association commends Senators Blanche Lincoln (D-Ark.) and Susan Collins (R-Maine) and Representative Gene Green (D-Texas) for their leadership in offering the Reaching Elders with Assessment and Chronic Care Management and Coordination Act, (S. 1004 and H.R. 2307) which seeks to improve the coordination of care for the growing elderly population with multiple chronic conditions. This legislation is especially significant for people with Alzheimer’s disease and other dementias because most have one or more other serious medical conditions and as a result incur high healthcare costs.

As the current Medicare program focuses primarily on treatment of acute episodes of illness and one specific disease or condition at a time, it doesn’t adequately meet the needs of beneficiaries who have dementia and other multiple chronic conditions. With an aging baby boomer generation at greater risk for developing Alzheimer’s disease, it is important to address this issue now before these numbers climb higher. This legislation is a tremendous first step in substantially improving the health care delivery system while lowering costs for Medicare beneficiaries with multiple chronic conditions by providing much needed assessment and care coordination necessary for these expanding populations.

According to the Alzheimer’s Association’s 2009 Alzheimer’s Disease Facts and Figures report, there are 5.3 million Americans living with Alzheimer’s disease today and most have other chronic conditions. For example, in 2004, 26 percent of Medicare beneficiaries aged 65 and older with Alzheimer’s and other dementias also had coronary heart disease; 23 percent also had diabetes; 16 percent also had congestive heart failure; and 13 percent also had cancer. Cognitive impairment caused by Alzheimer’s and other dementias greatly complicates the management of these other conditions resulting in more hospitalizations, longer hospital stays, and higher costs than those with these same conditions but no Alzheimer’s disease.

The 2009 Facts and Figures report also highlights Medicare claims data that illustrates the results of combined dementia and co-morbid medical conditions. In 2006, for example:

- Medicare beneficiaries with diabetes plus Alzheimer’s or another dementia had 64% more hospital stays than those with diabetes and no Alzheimer’s, and their average per person costs were $20,655 compared to $12,979 for beneficiaries with diabetes but no Alzheimer’s or dementia.

The Alzheimer’s Association urges Congressional members to co-sponsor and eventually pass this important legislation.

The Alzheimer’s Association

The Alzheimer’s Association is the leading voluntary health organization in Alzheimer 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.

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