



The Honorable Pat Toomey
U.S. Senate
248 Russell Senate Office Building
Washington D.C. 20510

The Honorable Debbie Stabenow
U.S. Senate
731 Hart Senate Office Building
Washington D.C. 20510

December 9, 2020

Dear Senators Toomey and Stabenow:

On behalf of the undersigned individuals and organizations, thank you for your continued bipartisan leadership on issues important to Americans living with Alzheimer's and other dementia, and their caregivers. We especially appreciate your work to address the unique challenges of this disease through the November 2019 Senate Finance Health Subcommittee hearing on *Alzheimer's Awareness: Barriers to Diagnosis, Treatment and Care Coordination* and your subsequent letter to HHS Secretary Azar offering recommendations on how to strengthen care and services for persons living with dementia as well as foster innovation in Alzheimer's and dementia research.

We were particularly encouraged by your specific recommendation that the Center for Medicare and Medicaid Innovation (CMMI) create and test alternative payment and coordinated care models targeted toward Medicare and/or Medicaid beneficiaries with Alzheimer's disease. Caring for an individual with Alzheimer's or other dementias poses unique challenges. According to the Centers for Medicare and Medicaid Services (CMS), more than 95% of individuals with dementia have one or more other chronic conditions, such as hypertension, heart disease, and diabetes. A person with dementia is 4.4 times more likely to have six or more other chronic conditions as someone without dementia.

Managing these chronic conditions is impeded by an individual's cognitive impairment. As a consequence, health care utilization is significantly higher among seniors with dementia than among seniors without dementia. The annual hospitalization rate is twice as high; the use of skilled nursing facilities is nearly four times higher; and hospital/skilled nursing facility stays are nearly four times longer. In addition, on average, a senior with dementia will visit the emergency room more than once each year.

Many of these costs are simply unnecessary and could be avoided – if care was properly managed including better coordination of care, seamless navigation across the multitude of providers, and timely access to care and interventions. There are proven ways to improve the quality of care and quality of life – and reduce Medicare spending – if the payment barriers standing in the way are broken down. In light of the growing demand for comprehensive care for these vulnerable beneficiaries and appropriate reimbursement, we appreciate your interest in alternative payment and coordinated care models.

We deeply appreciate your leadership on behalf of all Americans living with Alzheimer's and other dementia. We look forward to working with you in a bipartisan manner to address these important issues.

Sincerely,

Alzheimer's Association
Alzheimer's Impact Movement
Alzheimer's Los Angeles
American Association for Geriatric Psychiatry
American Geriatrics Society

Benjamin Rose Institute on Aging
Biogen
Bright Focus Foundation
Center to Advance Palliative Care (CAPC)
Gerontological Society of America
Hackensack Meridian Health (New Jersey)
Hackensack University Medical Center
Jewish Family Services of Delaware
John A. Hartford Foundation
Justice in Aging
Lewy Body Dementia Association
LiveWell Institute
Milken Institute Alliance to Improve Dementia Care
National Association of Area Agencies on Aging (n4a)
National Caucus and Center on Black Aging
National Hispanic Council on Aging
National PACE Association
Rush University Medical Center – Center for Excellence in Aging
The Wright Center for Community Health
The Wright Center for Graduate Medical Education
Transitions LifeCare
USAgainst Alzheimer's

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Orion Bell, Benjamin Rose Institute
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*Signatures current as of December 9, 2020