

NEW MEXICO

2023 ALZHEIMER'S STATISTICS

NUMBER OF PEOPLE AGED 65 AND OLDER WITH ALZHEIMER'S

YEAR

TOTAL

2020

43,000

2025

53,000

ESTIMATED % INCREASE

23.3%

PREVALENCE

27

OF **GERIATRICIANS**

244.4% NEEDED TO MEET DEMAND

INCREASE

32,36

OF HOME **HEALTH AND** PERSONAL CARE AIDES IN 2020

MEET DEMAND

WORKFORCE



UNPAID CAREGIVERS (2022)

CAREGIVER HEALTH (2021)

66.000 # OF CAREGIVERS

64.8% OF CAREGIVERS WITH CHRONIC HEALTH CONDITIONS

117,000,000 TOTAL HOURS OF UNPAID CARE

31.3% OF CAREGIVERS WITH DEPRESSION

\$2,131,000,000 TOTAL VALUE OF UNPAID CARE

OF CAREGIVERS IN POOR PHYSICAL HEALTH

CAREGIVING 10TH HIGHEST AVERAGE NUMBER

HOSPICE (2017)

OF PEOPLE IN HOSPICE WITH A PRIMARY DIAGNOSIS OF DEMENTIA

HOSPICE RESIDENTS 15% WITH A PRIMARY DIAGNOSIS OF DEMENTIA

HOSPITALS (2018)

OF EMERGENCY DEPARTMENT VISITS PER 1,000 PEOPLE WITH DEMENTIA

20.6% DEMENTIA PATIENT HOSPITAL READMISSION RATE

MEDICAID

\$227M

MEDICAID COSTS OF CARING FOR PEOPLE WITH ALZHEIMER'S (2020)

22.9% PROJECTED CHANGE IN COSTS FROM 2020 TO 2025 PROJECTED CHANGE

MEDICARE

\$25,298

PER CAPITA MEDICARE SPENDING ON PEOPLE WITH DEMENTIA (IN 2022 DOLLARS)

HEALTH CARE

OF DEATHS FROM ALZHEIMER'S DISEASE (2019)

568

MORTALITY

More than 6 million Americans are living with Alzheimer's, and over 11.5 **million** provide their unpaid care. The cost of caring for those with Alzheimer's and other dementias is estimated to total \$345 billion in 2023, increasing to nearly **\$1 trillion** (in today's dollars) by mid-century.

For more information, view the 2023 Alzheimer's Disease Facts and Figures report at alz.org/facts. © 2023 Alzheimer's Association® All Rights Reserved. Alzheimer's Association is a not-for-profit 501(c)(3) organization

2023 ALZHEIMER'S DISEASE FACTS AND FIGURES





More than 6 million Americans

are living with Alzheimer's

Over 11 million Americans

provide unpaid care for people with Alzheimer's or other dementias These caregivers provided more than 18 billion hours valued at nearly

\$340

1 in 3

seniors dies with Alzheimer's or another dementia It kills more than

breast cancer

prostate cancer

The lifetime risk for Alzheimer's at age 45 is

1 5 5

for women

1 for men

Between 2000 and 2019, deaths from heart disease has

decreased

In 2023, Alzheimer's and other dementias will cost the nation

\$345 billion

By 2050, these costs could rise to nearly \$1 trillion



while deaths from Alzheimer's disease have

increased

145%



While only 4 in 10 Americans talk to their doctor right away when experiencing early memory or cognitive loss,



7 in 10 would want to know early if they have Alzheimer's disease if it could allow for earlier treatment.



GOAL 1: INCREASE ACCESS TO CARE, SUPPORT AND TREATMENT

- **1A.** Reduce barriers and ensure individuals living with dementia have adequate access to residential and home and community-based services.
- **1B.** Ensure state Medicaid programs provide appropriate coverage to approved drug treatments for individuals living with dementia.
- **1C.** Create a statewide crisis response system that supports the unique behavioral needs of individuals living with dementia.
- **1D.** Strengthen the health care workforce by minimizing shortages and creating incentives and career pathways to recruit and retain professionals who specialize in all levels of dementia care.
- **1E.** Establish or strengthen programs that provide support to informal caregivers of individuals living with dementia.

GOAL 2: IMPROVE QUALITY OF CARE

- **2A.** Increase dementia competency of health care providers to deliver person-centered care through dementia-specific and culturally competent training.
- **2B.** Improve residential and HCBS provider licensure requirements for dementia care through evidence and acuity-based models.
- **2C.** Establish and implement quality measures that protect and enhance the lives of individuals living with dementia regardless of care setting.
- **2D.** Ensure that individuals living with dementia who are under court-ordered guardianship receive guardianship services by a dementia-educated guardian.

GOAL 3: ADVANCE RISK REDUCTION, EARLY DETECTION AND DIAGNOSIS

- **3A.** Expand access to resources in diverse and underserved communities to reduce stigma, increase early detection, and diagnosis of dementia.
- **3B.** Establish policies to incentivize care planning for individuals and families living with dementia.
- **3C.** Establish policies to incentivize and advance dementia risk reduction across provider and community settings.

GOAL 4: ENSURE A COORDINATED STATEWIDE RESPONSE TO ALZHEIMER'S

- **4A.** Improve the collection, availability and utilization of dementia-related data by the relevant state agencies.
- **4B.** Establish a statewide Alzheimer's/Dementia task force that is administered by the state.
- **4C.** Develop, implement and regularly update a State Alzheimer's/Dementia Plan in collaboration with community stakeholders.
- **4D.** Establish a permanent, full-time Dementia Coordinator position and/or Dementia Unit within the relevant state agency to work across agencies in implementation of the State Alzheimer's/Dementia Plan
- **4E.** Ensure all relevant statewide plans and assessments include the needs of individuals living with dementia and their families when they are developed or updated.

APPROVED SUPPLEMENTAL PRIORITIES

- Support state funding for Alzheimer's/dementia-specific research.
- Establish alternatives to guardianship for individuals living with dementia.
- Increase awareness and access to instruments such as advanced directives, supportive
 decision-making, and physician orders for life sustaining treatment to enable individuals living
 with dementia to pursue less restrictive alternatives to guardianship.
- Require advance directives to be received and documented across all care settings.

(Released May 2022)

FACT SHEET



New Mexico Chapter

ALZ.ORG/NEWMEXICO

ESTABLISHING NEW MEXICO'S DEMENTIA CARE SPECIALIST NETWORK

- Over 40,000 New Mexicans are living with Alzheimer's disease and the prevalence is projected to increase sharply over the next five years
- Over 66,000 unpaid caregivers provide 117 million hours of care annually at a cost of \$2.1 billion
- Alzheimer's cost New Mexico \$227 million in Medicaid dollars in 2020
- New Mexico ranks 10th nationally in the average number of hours per caregiver

New Mexico's dementia related cost to the Medicaid system is projected to increase

23%

by 2025

The # of New
Mexicans with ALZ
will increase 23%
by 2025

What is a Dementia Care Specialist (DCS) Program?

Wisconsin established the first DCS program in 2013; GA, IN, MD, and ND have also adopted similar programs

M

A DCS program would be administered by New Mexico's Area Agencies on Aging (AAA)

Y

At least one DCS would be placed in each of New Mexico's AAA service areas

Each DCS is trained to support the unique needs of those impacted by dementia

\$1M

ANNUAL APPROPRIATION NEEDED TO ESTABLISH A STATEWIDE DEMENTIA CARE SPECIALIST PROGRAM





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ESTABLISHING NEW MEXICO'S DEMENTIA CARE SPECIALIST NETWORK

Lessens Strain on State Resources and Health Systems

- Reduces avoidable hospitalizations and emergency room visits
- Delays the entrance into costly supportive services, many of which are paid for with Medicaid dollars
- Those receiving support through DCS
 programs are more likely to remain living
 in their community longer, avoiding
 premature placement in a long-term care
 setting

DCS Program Aligns with ALTSD and AAAs

- AAAs have an existing strategic community presence and statewide footprint
- Strengthens the AAA network, and better supports family caregivers, a core function of AAAs
- Would advance local efforts to build dementiafriendly communities across the state

Improves Health Outcomes for Family Caregivers

- Caregivers report better self-health and confidence to continue their caregiving journey
- Caregivers who received support from a DCS were more likely to complete important dementia care-related tasks like establishing a power of attorney and care planning
- Caregivers receiving support through DCS programs may be less likely to leave the workforce

DCS Scope of Work

- Caregiver education and support
- Community-wide education and awareness
- Facilitation of relationships with local health care providers and related stakeholders
- Basic direct care worker education opportunities