

Dear

We write today in support of the Concentrating on High-Value Alzheimer's Needs to Get to an End (CHANGE) Act. The CHANGE Act's multi-pronged approach to overcoming barriers to a cure for Alzheimer's disease and related dementia, is both innovative and critical to eradicating the third leading cause of death among Americans.

Each of our organizations recognizes that Alzheimer's and related dementia have far reaching health, economic and social implications both here in the United States and around the world. And, it's impact hits our most vulnerable populations hardest – Latinos, African Americans, military veterans and women are all more likely to develop Alzheimer's, less likely to obtain timely and accurate diagnoses and far less likely to be equipped financially for the burden of this disease.

Today, more than 5.7 million Americans are living with dementia at an annual cost to our economy exceeding \$259 billion.<sup>i</sup> An estimated 16 million Americans provide unpaid care for someone with dementia, resulting in additional healthcare and economic costs for the family caregiver. Alzheimer's disease contributes to the deaths of approximately 500,000 Americans each year. Alzheimer's disease is the third leading cause of death in the United States<sup>ii</sup> and the only one among the top 10 for which there is no proven means of prevention, disease modification or cure.<sup>iii</sup>

Currently, every 65 seconds another American develops the disease; left unstopped, by 2050, someone in the United States will develop the disease every 33 seconds. This explosive growth will cause Alzheimer's costs to increase from an estimated \$277 billion in 2018 to \$1.1 trillion in 2050 (in 2018 dollars).<sup>iv</sup> The federal government, through Medicare and Medicaid payments, shoulders an estimated 70 percent of all such direct care costs. These mounting costs threaten to bankrupt families, businesses and our public and private health care systems.

A paradigm shift to drive synergies between high-value patient care, caregiver support, and research initiatives is our best hope for preventing, treating, and curing Alzheimer's disease and mitigating its cost to families and society. Coupled with the recent increases in NIH funding, the CHANGE Act's multi-pronged approach encourages early assessment and detection, relieves caregiver burden and helps to accelerate progress to disease modifying treatments. As such, it can provide real hope for today's Alzheimer's patients and families, while continuing to search for a cure. The CHANGE Act provisions are as follows:

- **Detection:** Requires the Centers for Medicare and Medicaid Services to identify a uniform, reliable cognitive impairment detection tool or set of tools and to incentivize clinicians to screen, detect and diagnose Alzheimer's and related dementias in their earliest stages.

- **Caregiver Support:** Creates a coverage and payment model that offers family caregivers evidence-based training and certification specific to dementia care that qualifies them to provide certain medically necessary services.
- **Care:** Uses existing Center for Medicare and Medicaid Innovation (CMMI) “waiver” authority to evaluate promising models, such as a dementia-specific model pilot adapted from the Program for All-Inclusive Care for the Elderly (PACE) to test a comprehensive and integrated approach to meet the unique needs of Alzheimer’s patients and their family caregivers. These models would, ideally become centers of excellence contributing to advancing progress toward an Alzheimer’s cure.

We urge you to co-sponsor the CHANGE Act and join the fight against Alzheimer’s.

Sincerely,

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<sup>i</sup> [https://www.alz.org/documents\\_custom/2018-facts-and-figures.pdf](https://www.alz.org/documents_custom/2018-facts-and-figures.pdf)

<sup>ii</sup> <http://www.neurology.org/content/early/2014/03/05/WNL.0000000000000240>

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