The Alzheimer’s Association estimates that 43,000 New Mexicans over the age of 65 will have Alzheimer’s disease by the year 2025. This is a 59% change from 2000. The incidence of Alzheimer’s Disease for people over the age of 65 is one in eight; for those over the age of 85, it is nearly 50%. This disease will impact the long-term care service delivery system in New Mexico as the rate of growth of both of these populations is expected to dramatically increase in the next 15 years.

Facts

- There is not yet any treatment that can delay or stop the deterioration of brain cells in Alzheimer’s disease. Alzheimer’s disease is ultimately fatal
- Alzheimer’s disease is progressive. Symptoms of the disease begin with difficulty remembering new information, worsen to confusion, impaired judgment and communication difficulties and then deteriorate to loss of abilities with regard to daily living activities and recognition of loved ones. Eventually an individual with the disease becomes bed-bound
- Many people with Alzheimer’s disease or other dementias have not been diagnosed
- Nationally, two-thirds of those with the disease – 3.4 million – are women
- Studies have shown that active medical management can significantly improve quality of life through all stages of the disease for diagnosed individuals and their caregivers
- People with Alzheimer’s disease and other dementias may suffer from one or more other chronic illnesses or conditions. Dementia complicates the care for these conditions, and thereby drives up the costs of treatment
- People with Alzheimer’s disease and other dementias are high users of healthcare, residential care and community-based service
- Seventy percent of people with Alzheimer’s disease and other dementias live at home, where family and friends care for them
- Because Alzheimer’s disease gets worse slowly, caregivers tend to spend a long time in their caregiving role
- The challenges of caring for a loved one with Alzheimer’s disease and other dementias often affect the health and income of the caregiver
- Nearly all people with Alzheimer’s disease eventually need more assistance than families and friends can provide, and eventually move into long-term care settings
- Average per-person Medicare payments for those with Alzheimer’s and other dementias are three times higher than for those without these conditions. Medicaid spending on seniors with Alzheimer’s and other dementias is nine times higher
Four percent of the general population will be admitted to a nursing home by age 80. But, for people with Alzheimer’s, 75 percent will be admitted to a nursing home by age 80.

**Trends and Impacts**
- As the population ages, the incidence and prevalence of people affected with this disease will grow commensurately.
- Increased incidence of Alzheimer’s disease and other dementias will increase the demand on the long-term care system, including home and community-based services and nursing homes; this, in turn, will increase the state’s Medicaid expenditures.
- Family caregivers will face increased demands that will impact their health and economic situations.
- The long-term care system will encounter continuing challenges in providing supports and services to individuals with cognitive impairments and their family caregivers.

**Anticipated Needs**
- Availability of a “dementia-capable” workforce, to provide home care, community-based services and to staff residential facilities will be critically important.
- Family caregiver support services that are consumer-directed, flexible and sufficient in number to meet caregivers’ needs must be enhanced.
- Education to assure early identification and diagnosis of the disease so that medical management can be provided is essential.
- Information and referral systems will need to be comprehensive, coordinated, and widely available to assist individuals and family members in receiving appropriate services and supports.
- Evidenced-based models of direct support services for individuals with Alzheimer’s disease and other dementias, and their family caregivers, will be developed and adapted to ensure effective and beneficial results.

**ALTSD’s Role**
- Strategies to meet the needs of persons with Alzheimer’s Disease and other dementias will become more widely integrated within programs and services provided by the Department and other appropriate state agencies (Medicaid waiver programs, DOH health promotion programs, etc).
- Encourage and support evidence-based caregiver interventions and systems of care coordination throughout the Aging Network.
- Develop a state-wide “Dementia Plan” which includes key stakeholders from all segments of the service delivery system to address the increased needs of New Mexicans with dementia and their caregivers.
- Provide leadership in the implementation and evaluation of the plan.

**Reference**
Alzheimer’s Association, 2011 Alzheimer’s Disease Facts and Figures, Alzheimer’s and Dementia, Volume 7, Issue 2