

LD 1466: An Act To Address Severe and Ongoing Shortfalls in the Funding of Direct Care Workers in Long-term Care Settings and To Establish the Commission To Study Long-term Care Workforce Issues

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Thank you, Senator Brakey, Representative Hymanson and distinguished members of the committee for holding today's public hearing. My name is Laurie Trenholm, and I am the Executive Director for the Alzheimer's Association, Maine Chapter. We applaud your leadership on issues that are important to Mainers with Alzheimer's disease and other forms of dementias, and their caregivers. We appreciate the opportunity to voice our support for LD 1466.

Alzheimer's disease is a progressive, neurodegenerative and fatal disease for which there is currently no treatment or cure. Alzheimer's was identified by the New England Journal of Medicine as the most expensive disease in the United States, costing the nation \$259 billion in 2017. MaineCare costs are roughly 23 times higher for seniors living with Alzheimer's and dementia than costs for other seniors. This year Alzheimer's will cost MaineCare \$187 million dollars. Improving the transitions between care providers helps reduce these costs. New research from Tufts Medical Center demonstrates that improved care planning would prevent one out of every seven hospitalizations of people with Alzheimer's, saving the nation an estimated \$2.6 billion dollars annually in Medicare costs alone. Direct care workers are at the heart of these cost saving care improvements. LD 1466's call for wage increases for direct care workers will help us fill the ranks and improve access and quality of care here in Maine, and ultimately rein in costs across the state. Implementing state policy solutions like LD 1466 now is crucial in order to address this growing public health crisis.

Currently, local agencies providing care to people living with Alzheimer's and other forms of dementia are struggling to attract and retain employees across the state. Many long-term care centers, homecare agencies, adult day centers and other home and community based services are turning away new clients due to insufficient staff. This leaves families struggling to maintain these individual's needs at home. At times family members will be forced to leave their jobs because other help cannot be found for their loved one. It is also common for the stress of being a full-time caregiver without respite to result in hospitalization for both the caregiver and the person living with dementia.

Across the nation, states are implementing robust initiatives to bolster their elder care workforce and improve access to home and community based services. Here in Maine we do not have enough trained and qualified care providers to aide our elder population, let alone those who are adequately trained to work with dementia patients.

And why is that? Because we aren't paying them enough.

Dementia care providers have a tough job and it is hard for them to justify maintaining jobs in this field when they are not adequately compensated. We need to increase reimbursement rates to keep these folks as care providers. Additionally, we need to create pathways towards success by encouraging training and education in the field so more Mainers fill these positions.

State Plan Implementation is the Driving Force Behind Meeting These Needs. In 2011 Governor LePage signed the *State Plan for Alzheimer's Disease and Related Dementias in Maine* into law. We must work together to implement the recommendations in this plan, and we can only do this with support from the legislature. There are several recommendations throughout Section VI (pg 47-51) in the State Plan that correspond with LD 1466.

Did you know that the state of North Dakota has established the Dementia Care Service Program that appropriates \$1.2 million annually to provide care consultations, train caregivers, and support for those living with Alzheimer's and dementia? Did you know that the Wisconsin Assembly recently established the Speaker's Task Force on Alzheimer's and introduced the Wisconsin Cares Legislative Package and enacted a bill to establish mobile dementia crisis units? Implementing LD 1466 will help Maine address Alzheimer's and dementia as vigorously as other states are.

Thank you for holding today's hearing and for your continued leadership on issues that are so important to individuals and families facing Alzheimer's and other forms of dementia.

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REFERENCE:

Alzheimer's Association's 2017 Alzheimer's Disease Facts and Figures
http://www.alz.org/documents_custom/2017-facts-and-figures.pdf

Dementia Caregiving in Maine: Data from the 2015 Behavioral Risk Factor Surveillance System (CDC)
[http://www.alz.org/maine/documents/Maine - 2015 CG BRFSS Fact Sheet\(1\).pdf](http://www.alz.org/maine/documents/Maine_-_2015_CG_BRFSS_Fact_Sheet(1).pdf)

Potentially Avoidable Hospitalizations among Medicare Beneficiaries with Alzheimer's Disease and Related Disorders (Tufts Medical Center)
[http://www.alzheimersanddementia.com/article/S1552-5260\(12\)02520-4/abstract](http://www.alzheimersanddementia.com/article/S1552-5260(12)02520-4/abstract)

State Plan for Alzheimer's Disease and Related Dementia in Maine
<http://act.alz.org/site/DocServer/ALZStatePlanwithAppendix.pdf?docID=13302>

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