Alzheimer’s is a large and growing public health crisis that state policymakers cannot ignore.

- Today, more than 5 million Americans are living with Alzheimer’s, and that number is expected to rise to 13.8 million in 2050.
- Average per-person Medicaid spending for seniors with Alzheimer’s and other dementias is 23 times greater than average per-person Medicaid spending across all seniors without dementia.
- In 2020, caring for people with Alzheimer’s will cost Medicaid an estimated $51 billion — and will rise nearly 300 percent (before inflation) by 2050.

States develop their response to this crisis by engaging advocates, legislators, public health officials, and social service agencies in the creation of a State Alzheimer’s Disease Plan.

- Each state has its own unique gaps and needs, and a state-specific plan can recommend tailored policies to better serve those living with dementia and their families.
- State Alzheimer’s Disease Plans establish accountability by helping to ensure policymakers create the infrastructure necessary to address the growing crisis.
- When successfully implemented by state legislatures and state agencies, state plans result in a timely and effective response to Alzheimer’s disease.

### Average Annual Per Person Medicaid Spending

<table>
<thead>
<tr>
<th>Seniors without Alzheimer’s Disease and Other Dementias</th>
<th>Seniors with Alzheimer’s Disease and Other Dementias</th>
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<tbody>
<tr>
<td>$8,779</td>
<td>$374</td>
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### What Can States Do?

- Advance legislation or state agency directives to update and implement State Alzheimer’s Disease Plans.
- Designate a state agency to lead the implementation of the state plan.
- Establish a workgroup of state officials (including public health, aging, social services, and Medicaid), advocacy stakeholders, and professional care providers.
- Implement state policy changes as recommended in the state plan, including establishing an infrastructure that serves the needs of those with the disease and their caregivers.
Since 2007, 49 states, the District of Columbia, and Puerto Rico have published State Alzheimer’s Disease Plans.

- Common recommendations in state plans include increasing education and awareness of the disease; promoting early detection and diagnosis; expanding access to home and community-based services; and addressing workforce shortages.

- Many states have also addressed other issues, including health care system capacity; quality of care; legal issues; funding for medical research; and safety.

States must ensure their State Alzheimer’s Disease Plans are implemented — and then periodically reviewed and updated.

- Following publication of a state plan, states must work to make the plan’s consensus-developed recommendations a reality.

- States should measure the impact of the new policies and their effectiveness in improving the lives of those with Alzheimer’s and their families.

- To ensure the plans — and state policies — reflect the current needs and best practices, states must update their plans every three to five years.