



...Supporting Successful Aging

June 17, 2016

CFHHS Interim Committee Members:

As president of the Montana Gerontology Society, I write in support of the newly created Montana State Plan for Alzheimer's/Dementia and the following related bills:

1. LCCF3a – Creating a Statewide Alzheimer's and Dementia Services Facilitator to work towards achieving the goals of the Alzheimer's/Dementia State Plan and to improve ADRD services in Montana.
2. LCCF4a – Local Alzheimer's and dementia assistance through Area Agencies on Aging. This bill provides funding for local Aging Services (AAAs) to conduct targeted outreach to family caregivers of people with ADRD providing more information and assistance, public awareness of early detection, and direct in-home care services.
3. LCCF5a – Local programs to train volunteer respite providers to give family caregivers of people with Alzheimer's and dementia a break.
4. LCCF6 – Provide more care in homes and assisted living for people with ADRD on Medicaid. Currently there is a long waiting list for people on Medicaid who would rather get care in their home or in assisted living than go to a nursing home. This bill expands the Medicaid waiver HCBS program and increases reimbursement rates for assisted living.
5. LCCF07b – Improving the guardianship system in Montana by setting up a state guardianship council to work on standards, accountability, and training of guardians. This bill will also provide funding for public guardianships of indigent people.

The Montana Gerontology Society is a membership organization that has been in existence for over 30 years to promote advances in the field of aging, professional development, as well as public education and advocacy. Several members of the organization have served on the Alzheimer's/Dementia Workgroup headed by Patricia Coon, MD, Billings Clinic, to create a plan for the State of Montana to address the expected large increase in the number of Montanans living with Alzheimer's Disease and Related Dementias (ADRD).

The proposed legislation will facilitate the speedy implementation of this plan through creation of a facilitator position (LCCF3a). In addition, since most of the care for dementia patients is provided in the home, a much less expensive alternative to institutionalization in nursing homes, funding for local Area Agencies on Aging to support caregivers (LCCF4a) and to develop more respite providers (LCCF5a) is critical. Similarly, in an effort to keep dementia patients in less expensive environments, expanding the Medicaid waiver HCBS program and increasing reimbursement rates for assisted living (LCCF6) is important. Finally, as dementia patients are unable to manage their affairs, improving the guardianship system to provide such services is essential (LCCF07b).

Thank you for your support of this effort to improve the lives of Montanans suffering from Alzheimer's Disease and Related Dementias and their caregivers.

Sincerely,

Gayle Hudgins, President
Montana Gerontology Society
241 Keith Avenue
Missoula, MT 59801