



Policy Brief

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Medicare is failing people with Alzheimer's and their families by declining to provide diagnostics and FDA-approved treatments.

Over the last decade, Medicare has consistently refused to cover FDA-approved diagnostics and treatments for Alzheimer's.

What you need to know: Over the last decade, Medicare has consistently discriminated against people with Alzheimer's by refusing to broadly cover FDA-approved diagnostics and treatments. This leaves people with Alzheimer's and their families to bear enormous personal costs and blocked us from live-saving treatment and care altogether.

Why it matters: Medicare is the leading health care administrator for people over 65 in the United States, serving some 60 million people, and is the primary health insurer for around 85 percent of people with Alzheimer's.^{1,2} The Centers for Medicare & Medicaid Services – the agency that oversees Medicare – has consistently made decisions that negatively impact people living with Alzheimer's, from diagnosis to treatment and care.

Medicare has blocked innovations in diagnosing Alzheimer's:

Medicare does not cover innovations in diagnosing Alzheimer's such as PET scans. As a result, patients lose precious time, the choice to live life on their own terms, and the ability to choose what is best for them.

An Alzheimer's diagnosis is usually made after a patient is assessed based on their symptoms, which become more pronounced as the disease progresses. However, using certain types of brain imaging, blood tests or other diagnostic techniques

¹ <https://www.kff.org/medicare/issue-brief/the-facts-on-medicare-spending-and-financing/>

² <https://www.reuters.com/world/us/alzheimers-patient-groups-protest-us-medicare-coverage-proposal-limiting-use-new-2022-01-21/>



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doctors can identify Alzheimer's at its earliest stages, even before symptoms are apparent.

Early diagnosis allows people with Alzheimer's to make decisions, represent their own interests as they plan for their future care needs and offers the best chance for new treatments to alter the progression of the disease.

Read more: Over the last 10 years, the FDA has approved the use of several types of these tests to help diagnose (or rule out) Alzheimer's, but CMS has not extended Medicare coverage to use the available technology for earlier and more accurate diagnosis, leaving many without a definitive confirmation of their condition.

Medicare has rejected FDA-approved treatments

Medicare has significantly limited the number of people who can access new treatments and denied people living with Alzheimer's choice in their treatment.

Since the FDA approved the first new treatment for Alzheimer's in decades, CMS has taken unprecedented steps to limit coverage for it and all similar drugs. CMS has created a heinous regulatory environment for an entire class of potential new treatments when it should be conducting stand-alone reviews of every new treatment to accurately understand its effectiveness.

People living with Alzheimer's should have the option, in consultation with their doctor, to weigh the potential risks of treatments themselves and decide on the best treatment plan for them.

Currently, Medicare will not cover new treatments for Alzheimer's except for a small number of people in clinical trials, denying access for the vast majority of people living with Alzheimer's. Generating additional evidence of the efficacy of these new drugs to satisfy CMS will draw resources and opportunities away from the development of additional new treatments, and ultimately delay access for millions of people with Alzheimer's who could benefit.

Medicare has further stigmatized people with Alzheimer's

CMS further stigmatized people with Alzheimer's by blaming the cost of new Alzheimer's treatments for the largest yearly dollar-amount rate hike ever for

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Medicare for Part B premiums. CMS publicly called out the cost of care for Alzheimer's, marking the first time the agency pointed to a specific disease or chronic condition, as the rationale for raising premiums. This was an unprecedented move for the agency, which has never singled out other expensive treatments for cancer, organ transplants, or vision loss.

Medicare is exacerbating inequity in Alzheimer's.

Medicare's unfair treatment of people with Alzheimer's is combined with ongoing, systemic inequities in Alzheimer's care for minority groups, further disadvantaging vulnerable patients. The discriminatory CMS decision on coverage for diagnostic tools and treatments have kept these innovations out of the hands of lower-income communities and those without access to major medical institutions where clinical trials are conducted.

Medicare must stop practices and policies that discriminate against people living with Alzheimer's and other cognitive disease.

Whether it's helping people to get a diagnosis or treatment for Alzheimer's, or helping people live well with Alzheimer's by supporting their dignity and choice, Medicare is failing to meet the needs of this community.

We believe CMS must be held accountable by the community to alter course on how it considers and cares for people living with Alzheimer's. Go to voicesofad.com to send a letter to CMS and your Member of Congress and Senators demanding that Medicare support people living with Alzheimer's.