

My name is Megan Polyte, I am the Policy Director for the Vermont Chapter of the Alzheimer's Association. I am here to advocate in support of S.302 An act relating to public health outreach programs regarding dementia risk.

By 2025, the number of Vermonters over the age of 65 diagnosed with dementia is projected to be 17,000. An astounding 30.8% increase from 2020. In 2022, unpaid family caregivers provided more than 28 million hours of care. Older Vermonters are the fastest growing demographic in our state, and by 2030, one in three Vermonters will be 60 years or older. One in three seniors dies with Alzheimer's or another dementia. S.302 will help us meet the growing demand for diagnosis, treatment, care, and support of both those with the disease and their care partners, by ensuring information about brain health and dementia is included in education to health providers and the public.

I want to share some of the work we have done in Vermont that has laid the groundwork for this bill and amplifies the need for it.

In 2020 the Vermont Department of Health was awarded a three-year BOLD (Building Our Largest Dementia) Infrastructure grant from the CDC. Grant objectives align with the Health Brain Initiatives goals to increase early detection, support family caregivers, decrease ER visits and avoidable hospitalizations, and reduce risk for dementia. This grant has helped us increase capacity by:

1. Updating our state plan on Alzheimer's for the first time in more than a decade. This has helped ensure our work is aligned, focused and targeted at areas with greatest need. S.302 will help us meet objectives of the Vermont Plan for Alzheimer's Disease and Healthy Aging, 2022-2025 by:
 - Strengthening the competencies of those delivering health care and improving care for populations disproportionately affected by dementia;
 - Ensuring messaging that underscores the essential role of caregivers and the importance of maintaining their health; and
 - Enhancing public awareness by educating on the benefits of early detection and the link between body and brain health.
2. Continuing our Dementia Hub and Spoke work with the UVMMC Memory Center at the hub and primary care providers as spokes.
3. Running Project Echo Dementia Training series for primary care providers.
4. Adding dementia training modules to VT My Health Learn, a free online training resource.
5. Supporting the work of the UVMMC Dementia Family Caregiver Center.
6. Researching and launching the UCLA Dementia Care model at the UVMMC Memory Center.

7. Creating a Dementia Resource Guide for providers to share when they make a diagnosis.

You have helped us meet some of these goals by hearing the struggles faced by families touched by dementia, adding to Vermont Statutes requirements for public education resources around dementia, and supporting our request for a Statewide Dementia Services Coordinator. We welcomed Tiffany Smith to that position last week.

Last fall VT DOH was awarded a second round of BOLD funding, allowing us to continue to build our dementia infrastructure for the next five years. This bill is central to the work we are focusing on with this round of funding and will ensure we utilize all existing opportunities to educate providers and the public about brain health and ways to reduce the risk of dementia.

According to the Healthy Brain Initiative, “An aggressive public health effort to reduce the prevalence of risk factors, such as high blood pressure, could result in an estimated 1.2 million fewer Americans with Alzheimer's in 2050.” Vermont has a high prevalence of three health conditions that increase risk for cognitive decline.

- 38.7% report physical inactivity
- 35.2% experience midlife (age 45-64) hypertension
- 34% experience midlife (age 45-64) obesity

This bill specifically calls out education as part of “existing and relevant public health outreach programs.” (Section (b)(1) line 4) This means when a health professional is learning about diagnosis of hypertension or talking to their patient about hypertension they will mention that it increases their risk for dementia and addressing it can reduce that risk. It also means a public health campaign addressing the benefits of physical activity would also mention that being physically active can reduce your risk for dementia. This wording also aligns with our Age Strong VT, 10-year multi-sector plan on aging goal of “helping Vermonters age well by reducing comorbidities.”

In section (A) Educate health care providers, I want to emphasize a couple of sections.

- (i) The value of early detection and timely diagnosis. Early diagnosis of this progressive cognitive disease allows individuals and their families time to plan and to build caregiving support and capacity. This can result in less stress on many of our systems of care.
- (ii) That detection of Younger Onset Alzheimer's is specifically called out. You have had Pamela Smith from East Middlebury in your committee in the past and likely recall her stories of multiple years of mis-diagnosis. Those with Younger Onset Alzheimer's face even greater struggles including leaving the workforce and losing that income, caring for children, and spouses who are working and not available to support caregiving needs.
- (iv) The significance of recognizing the care partner as part of the health care team. This aligns with a new national dementia care model that is being rolled

out by the Centers for Medicare and Medicaid Services (CMS.) The Guide Model is being tested for the next eight years and includes the caregiver and their health together with the individual with dementia. Vermont's dementia caregivers are struggling. 35.4% report depression, the national average is 24.4%. 66% have one or more chronic health conditions, compared to 64% nationally.

I also want to emphasize the importance in section 2 of targeting campaigns to those at higher risk including Black and Hispanic populations and women.

The Alzheimer's organization as well as so many other organizations and agencies are publicly raising awareness, creating programs, and supporting Vermonters with all types of dementia and their families. S.302 is supported by AARP Vermont, The Governor's Commission on Alzheimer's Disease and Related Disorders, The Health Care Advocate of Vermont Legal Aid, the UVMCC Dementia Family Caregiver Center, the Vermont Association of Adult Day Services, the Vermont Association of Area Agencies on Aging and the Vermont Ombudsman Project.

Thank you for your time and commitment to Vermonters with Alzheimer's and all other dementia and their families.

[2023 ALZ Vermont Facts and Figures](#)

[Risk Factors for Cognitive Decline, Vermont Data](#)