

Fact Sheet for SB20-022

"Increase Medical Providers for Senior Citizens"

CONCERNING MODIFICATIONS TO THE COLORADO HEALTH SERVICE CORPS PROGRAM ADMINISTERED BY THE DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT TO EXPAND THE AVAILABILITY OF GERIATRIC CARE PROVIDERS IN SHORTAGE AREAS IN THE STATE.

WHY IS THIS IMPORTANT NOW?

Geriatrics is the branch of medical care dealing with issues related to AGING and diseases of the AGING.

- Colorado's 65+ age group numbers nearly 840,000 in 2019. That number will increase by a net of 361,000 (or over 40%) between 2019 and 2030, to a new total of 1.2 million and will continue to increase into 2050. (State Demographer—and see charts below)
- Rural/frontier communities are typically older compared to urban areas and the rural over 65 demographic typically represents 20% of those population areas, or approximately 225,000 people in 2030—a number far greater than the entire population of Fort Collins today
- These facts combine to make geriatric care of critical importance as Geriatrics recognizes the importance of body, mind and social engagement in sustaining good health into aging.
- Geriatric providers are specifically trained to consider and treat the entire patient rather than just the organ or system that is primarily affected by a disease. This is especially important and challenging in the face of multiple complex, interacting disorders.
- Good health means more active citizens and lower medical costs in the form of fewer hospital admissions, fewer medications and adverse effects, and fewer unnecessary procedures/tests.
- Geriatric practitioners spend more time with patients to understand several factors: 1) their economic security; 2) their risk for fraud and abuse; 3) their need to preserve a sense of self-worth and value to society; 4) their continued interest in working after retirement; 5) isolation; and 6) depression.
- There were an estimated 150 Geriatric trained physicians in Colorado in 2019, with only five outside of the Front Range and Grand Junction.
- In 2019, there was an estimated need for an additional 200 Geriatric Practitioners in Colorado—and growing. There is a nationwide shortage of over 20,000.
- Recruitment of ANY medical professional in the rural/frontier areas of Colorado takes six months to three years; only 40% remain after five years.

What This Bill Does to Help Maintain the Health of Older Coloradans

Geriatrics trained Advanced Practice Professionals (GAPPs): Nurse Practitioners and Physician Assistants ---are absolutely necessary to meet the level of care required for our growing older population.

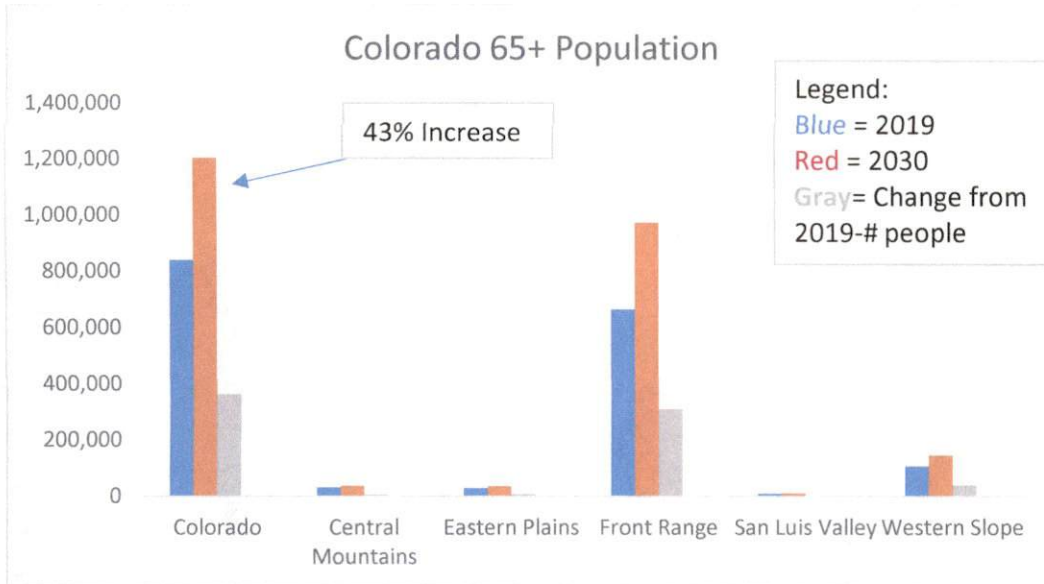
- This bill, when fully implemented, will provide up to twenty new Geriatric Advanced Practice Professionals over 5 years—that is, by about 2025. A small number, but a solid beginning.
- The potential “multiplier effect” of this plan is to not only have the GAPPs provide needed direct geriatric care for Colorado’s older adults but also to provide additional geriatric care education and training sites for future –and current--generations of nurse practitioners and physician assistants, who currently get little in their present curricula.
- This larger cadre of GAPPs would greatly augment the reach and scope of the limited number of geriatrics trained physicians in multiple venues including, inpatient consultations, outpatient clinics and post-acute care facilities.
- Dementia Treatment: According to the Alzheimer’s Association, Colorado can expect to have about 125,000 dementia-afflicted people by 2030, including about 25,000 in rural/frontier areas. Geriatric trained health care professionals are well-equipped to help those afflicted, as well as their families/caretakers.

HOW DOES IT WORK?

1. The selected APP’s will have sufficient specific geriatric training and or experience as delineated in SB20-22 that will qualify them for repayment of qualified educational loans, as administered through the existing CDPHE Health Service Corp Program.
2. Contracts through the CDPHE, will be for a minimum of 24 months with upfront loan repayment up to \$50,000 (non-taxable) to cover qualified educational loans. Extensions to these contracts are possible.
3. Participants in the GAPP Loan Repayment Program (LRP) will receive an additional \$25,000 in loan repayment for agreeing to be a clinical preceptor for GAPPs and other trainees during their contract period and for 24 months beyond the end of the primary contract; thereby helping to create added qualified Geriatric Advanced Practice Providers.
4. To qualify for the loan forgiveness program, these applicants must agree to serve in rural or other underserved areas of Colorado, as defined by the Colorado Department of Public Health and Environment (CDPHE).
5. To be fully successful, this program must receive “continuous” annual funding for a five-year total of \$1.9 million, (with the first year being only \$225,000).

Demographics—65+ Population—Colorado

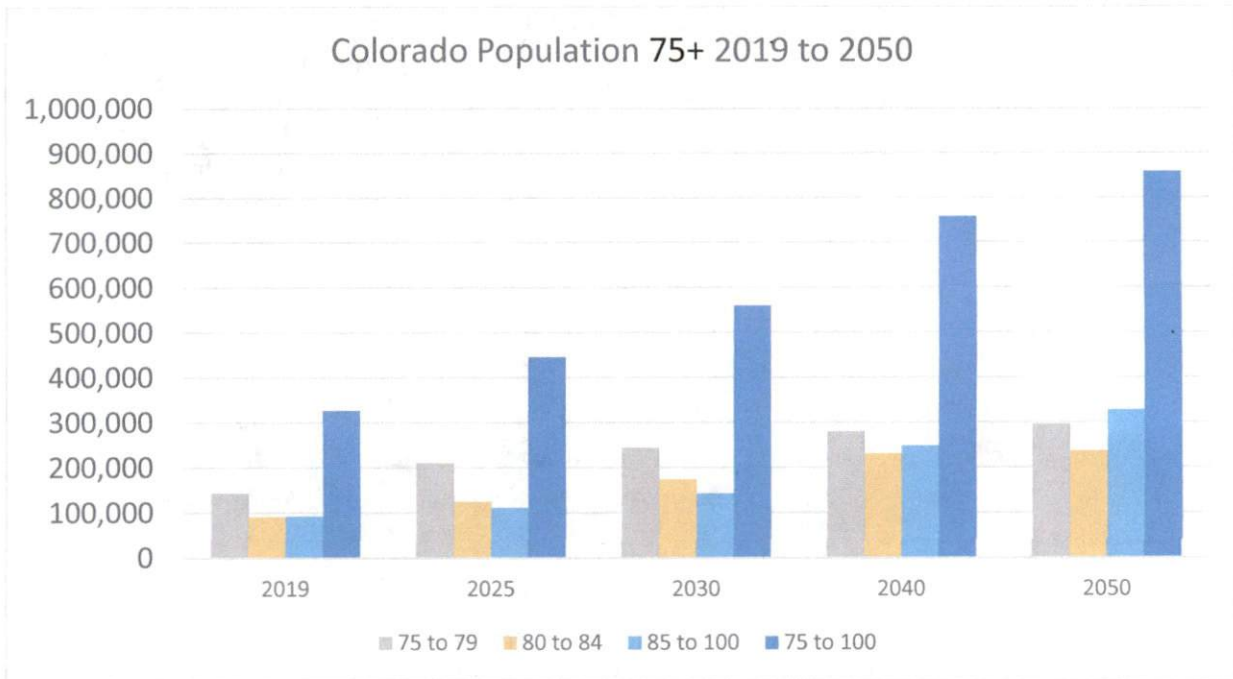
(Source: State Demographer)



Pop 65+	2019	2030	Total Increase	Pct. Inc.
Colorado	839,443	1,201,023	361,580	43%
Central Mountains	30,958	36,348	5,390	17%
Eastern Plains	29,068	35,731	6,663	23%
Front Range	663,637	972,680	309,043	47%
San Luis Valley	9,134	10,554	1,420	16%
Western Slope	106,645	145,707	39,062	37%

Demographics—75+ Population--Colorado

(Source: State Demographer)



AGE	2019	2025	2030	2040	2050
75 to 79	143,726	209,782	243,494	279,509	295,659
80 to 84	90,693	124,720	173,746	229,843	235,708
85 to 100	92,416	110,506	141,938	247,728	326,952
75 to 100	326,836	445,008	559,179	757,081	858,320

ORGANIZATIONS SUPPORTING THIS BILL INCLUDE:



AARP Colorado



THE COLORADO
SOCIETY FOR
POST-ACUTE AND
LONG-TERM CARE
MEDICINE

alzheimer's association®



COLORADO CENTER
on LAW & POLICY



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