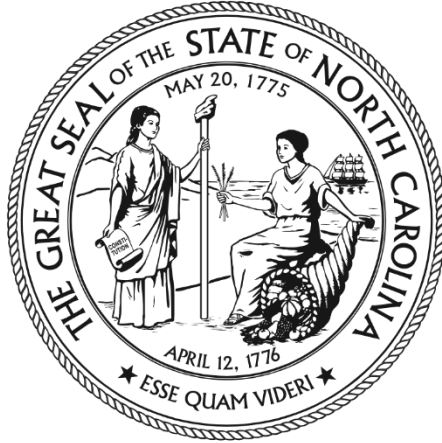


**Project C.A.R.E.
(Caregiver Alternatives to Running on Empty)**

Session Law 2010-31, Section 10.35B



Report to
The Governor's Advisory Council on Aging
and
The Fiscal Research Division
by
North Carolina Department of
Health and Human Services

October 1, 2026

Project C.A.R.E 2025-2026

Background

According to the Alzheimer's Association, approximately 210,500 North Carolinians aged 65 and older are currently living with Alzheimer's disease. Nationally, more than seven million Americans have the disease, and over twelve million individuals provide unpaid care for those affected. The projected national cost of care for people living with Alzheimer's and other dementias is estimated to reach \$409 billion in 2026, with long-term forecasts indicating an increase to nearly \$1 trillion (in current dollars) by mid-century. In 2024 alone, Alzheimer's disease was responsible for 4,031 deaths in North Carolina, placing it as the 7th leading cause of death statewide. These higher healthcare and long-term care needs create additional financial strain, compounding the substantial physical, emotional, and social burdens already experienced by families.¹

Pursuant to Section 10.35B of Session Law 2010-31 (Senate Bill 897), the North Carolina Department of Health and Human Services (DHHS) Division of Aging implemented a plan for the use of \$200,000 in recurring state appropriations to support Alzheimer's-related activities consistent with the goals of Project C.A.R.E. (Caregiver Alternatives to Running on Empty). The current total allocation the Project C.A.R.E program remains at \$1,033,333.00 per year.

The session law required an annual report to be submitted to the Governor's Advisory Council on Aging and the Fiscal Research Division by October 1st each year. Originally, this Senate Bill called for the report to also be provided to the North Carolina Study Commission on Aging; however, this entity is no longer in existence.

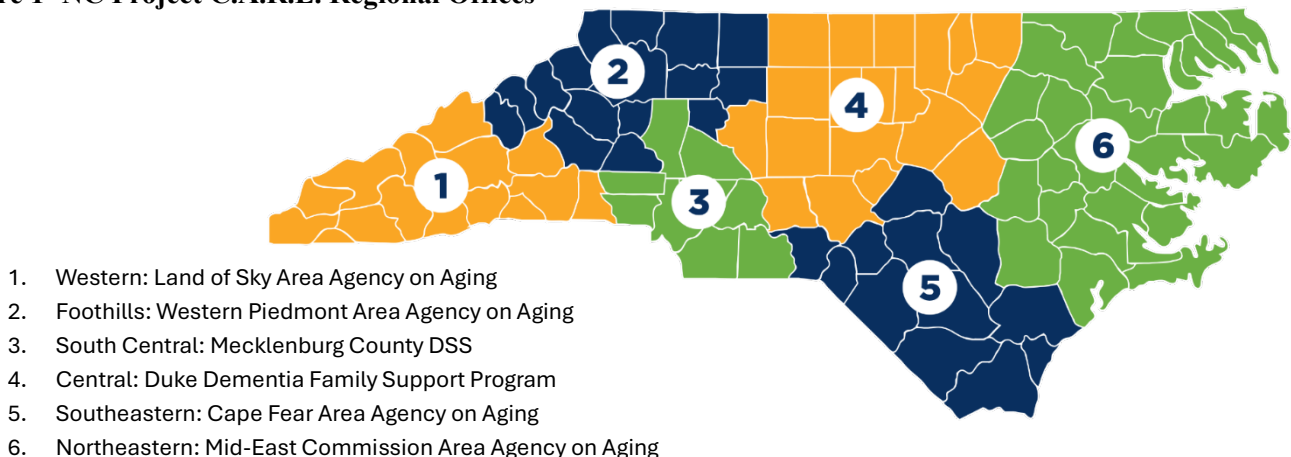
Program Overview

Project C.A.R.E. is a statewide, state-funded program designed to support people who care for individuals living with Alzheimer's disease or related dementias. Launched in 2016 and administered by the Division of Aging, the program serves all 100 counties in North Carolina.

At its core, Project C.A.R.E. uses a care consultation model. This means caregivers receive guidance through services such as information and referral support, dementia-specific education, caregiver assessments, and personalized care planning. These services help caregivers better understand the disease, navigate available resources, and make informed decisions about their loved ones' care.

Project C.A.R.E. contracts with six community-based organizations to provide care consultation services in all 100 counties, as shown in Figure 1. Family consultants collaborate closely with the sixteen Area Agencies on Aging (AAA) Family Caregiver Support Program consultants. This relationship allows for available local resources to be coordinated and leveraged for maximum impact.

Figure 1- NC Project C.A.R.E. Regional Offices



¹ <https://www.alz.org/getmedia/f4e6e515-bb40-4b29-8519-59b6478a4576/northcarolina-alzheimers-facts-figures.pdf>

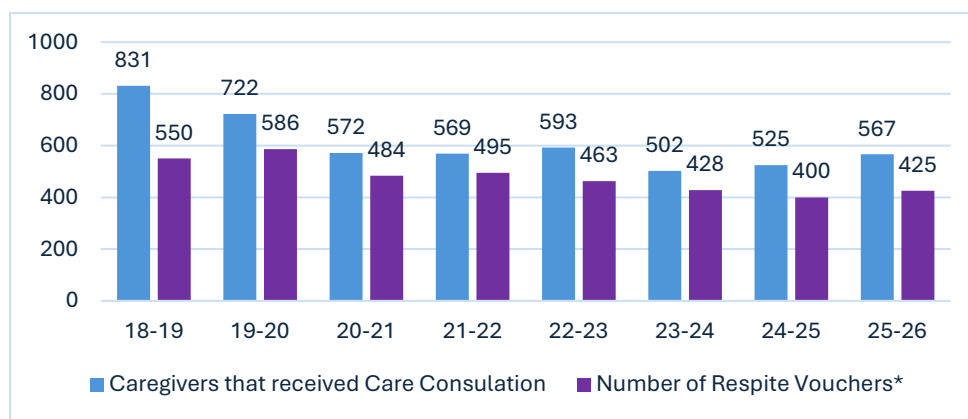
Managing Increased Demand Under Flat Funding

Despite growing demand for dementia-related services, state funding for the program remained level since 2016. As a result, the program's reach has declined: between SFY 2018-2019 and SFY 2024-2025, the number of caregivers served dropped from 831 to 525, and the number of vouchers issued fell from 550 to 400. See Figure 2.

To stretch limited resources and support more caregivers statewide, the Division of Aging implemented an operational change for the 2025–2026 State Fiscal Year by revising the respite voucher policy. Under the new policy, each caregiver may receive one respite voucher per year, rather than the previous maximum of three. All other eligibility requirements remain the same.

This change allows the program to assist more families across North Carolina. In State Fiscal Year 2025-2026, the program served 567 caregivers, and 425 respite vouchers were used across 91 counties. By limiting vouchers to one per caregiver, the Division of Aging ensured services remained available statewide and that a greater number of caregivers received at least some support during the year.

Figure 2- Project C.A.R.E. Service Delivery by Fiscal Year (SFY 2018-2026)²



**All caregivers that receive respite services also receive care consultation.*

Growing Need in North Carolina

Dementia is one of the most significant public health challenges that North Carolina faces. Family caregivers provide countless hours of unpaid care each year, often while balancing employment, family responsibilities, and their own health concerns. The emotional, physical, and financial burden of caregiving continues to increase as the state's population ages.

Without caregiver support:

- Caregiver burnout increases.
- Health outcomes for both caregivers and persons living with dementia decline.
- Families are more likely to require costly institutional care.
- Healthcare systems experience increased utilization and costs.

Programs like Project C.A.R.E, that support dementia caregivers help families remain stable, improve quality of life, and reduce reliance on more expensive care settings. As the number of North Carolinians affected by dementia continues to rise, sustaining and expanding caregiver support services will be critical to maintaining

² Data Source: NCDHHS Division of Aging

healthy families and communities. Despite rising demand, the program is serving fewer people and issuing fewer respite vouchers.

Figure 3 outlines major milestones of the Project C.A.R.E. program. The Division of Aging continues to explore strategies for using limited resources while ensuring caregivers receive the strongest support possible.

Figure 3- History of Project C.A.R.E. in North Carolina

