Building Quality Dementia Care

Aging Population with Increased Dementia

Best Practice Tools Available

Patient/Family Demand

Increasing Cost of Inaction

Urgent Need to Address Disparities

Strong Minnesota Infrastructure & Innovation History

Changing Payment & Care Delivery Models

Emerging Research Supporting Detection, Diagnosis & Care
Aging Population with Increased Dementia

Projected number of people 65+ years old in the U.S. with Alzheimer’s disease (2010-2050)

Millions of people

<table>
<thead>
<tr>
<th>Year</th>
<th>2010</th>
<th>2020</th>
<th>2030</th>
<th>2040</th>
<th>2050</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>5.0</td>
<td>10.0</td>
<td>15.0</td>
<td>20.0</td>
<td>25.0</td>
</tr>
</tbody>
</table>

One in nine people age 65+ has Alzheimer’s.

One-third of people age 85+ have Alzheimer’s.

Urgent Need to Address Disparities

African Americans
2xs more likely than Caucasians

Hispanics/Latinos
1.5xs more likely than Caucasians

Women
2xs more likely than Men
Changing Payment Models

Collaboration  ACO  Quality of Care
Shared Savings  Care  Coordinator
Right Care, Right Time
Improving Health  Population Health  Improving Care
Reducing Cost
Emerging Research

Aging Brain Care in the USA

- Any Cognitive Impairment: 25% - 40%
- Unrecognized cases: 60% to 80%
- Drugs with Adverse Cognitive Effects: 22% to 26%
- ER visit per year: 49% (pts) / 21% (Caregivers)
- Hospitalization per year: 26% (pts) / 11% (Caregivers)
- Length of Hospital Stay: 5.9 to 9.2 days

Emerging Research

The Collaborative Aging Brain Care Model (ABC)

ABC Package

- Caregiver Intervention
  - Medical Management
  - Home Environment Modification and Self Management

Delivery

ABC Team

- PCP
- MCP
- 24 Hr Crisis Hotline
- ABC Coordinator
  - Local Area Agency on Aging
    - Adult Day Care or Home Health
  - AA Chapter

ABC: Aging Brain Care
PCP: Primary Care Provider
MCP: Memory Care Provider
AA: Alzheimer Association

Boustani et al, Aging & Mental Health 2011
Emerging Research

ABC Impact (Health Outcomes)

- 7 NPI point improvement
- Each 1 point decline in NPI = $250-$400 in health care expenses
- Potential saving $1,750-$2,800 per patient
- Improvement in family stress

NPI: Neuropsychiatric Inventory; CG: Caregiver

Callahan, Boustani et al, JAMA 2006
# ABC Impact (Care Quality)

<table>
<thead>
<tr>
<th>Domain</th>
<th>ABC</th>
<th>PCC</th>
</tr>
</thead>
<tbody>
<tr>
<td>% patients with at least one ER visit</td>
<td>28%</td>
<td>49%</td>
</tr>
<tr>
<td>% patients with at least one hospitalization</td>
<td>13%</td>
<td>26%</td>
</tr>
<tr>
<td>% patients re-hospitalized within 30 days of discharge</td>
<td>11%</td>
<td>20%</td>
</tr>
<tr>
<td>% patients with HbA1c &lt; 8</td>
<td>78%</td>
<td>51%</td>
</tr>
<tr>
<td>% of patients with LDL &lt; 130</td>
<td>45%</td>
<td>23%</td>
</tr>
</tbody>
</table>

ABC; Aging Brain Care patients; PCC: primary care center patients

Boustani et al, Aging & Mental Health 2011
Emerging Research

### ABC Impact (Cost)

<table>
<thead>
<tr>
<th>Total Cost Savings Per Patient</th>
<th>Low</th>
<th>Mid</th>
<th>High</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$2,885</td>
<td>$3,474</td>
<td>$4,227</td>
</tr>
</tbody>
</table>

Dollars

French et al, Health Affairs (In Press)
## Increasing Cost of Inaction

<table>
<thead>
<tr>
<th></th>
<th>Recognition +</th>
<th>Recognition -</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hospital Duration (Day)</td>
<td>6.7</td>
<td>7.5</td>
</tr>
<tr>
<td>30 day Post Hospital Mortality</td>
<td>4.8%</td>
<td>6.6%</td>
</tr>
<tr>
<td>Discharged Home</td>
<td>31.5%</td>
<td>45.2%</td>
</tr>
<tr>
<td>Driving</td>
<td>11.6%</td>
<td>22.1% *</td>
</tr>
<tr>
<td>Managing Medications</td>
<td>14.9%</td>
<td>40.4% *</td>
</tr>
<tr>
<td>Managing Finances</td>
<td>7.3%</td>
<td>20.1% *</td>
</tr>
<tr>
<td>Preparing Hot meals</td>
<td>10.8%</td>
<td>34.1% *</td>
</tr>
</tbody>
</table>

* Adjusted P value < 0.05

Boustani et al, J Hospital Med 2010; Amjad H et al, JAGS 2016
Patient & Family Demand

Respondents who would prefer to know if they had AD (%)

89%  
92%  
79.5%

Blendon, et al, 2012 (n=639)  
Turnbull, et al, 2003 (n=182)  
Holroyd, et al, 1996 (n=124)

“It took nearly 4 years for us to get a diagnosis.

The doctor told us it was Alzheimer’s, that there was nothing he could do, and to come back in a year. We were first devastated, then angry. I also have diabetes, and I got medication, education and care management for that. Now I have a fatal brain disease, and I got ‘diagnose and adios’.

We have to do better.”

Julie, Living with Early Alzheimer’s
Best Practice Tools Available

- Evidence and consensus-based practice standards for providers of Alzheimer’s care

ACTonALZ.org
Strong MN Infrastructure & Innovation History

Support Network

ACT Dementia-Friendly Communities

PDF of Map

7 COUNTY METRO AREA:
- Anoka
- Brooklyn Center
- Cento
- Chanhassen
- CLUES
- Edina
- Forest Lake
- MN Council of Churches
- North Minneapolis
- Roseville
- St. Louis Park
- St. Paul African American Faith Community
- St. Paul Neighborhoods
- St. Paul North East Neighborhoods
- Stillwater Area
- Twin Cities Jewish Community
MN is a leader in payment & care delivery reform

- 3 of the original 33 Pioneer ACO’s
- 12+ MSSP’s
- Innovator in Medicaid ACO’s
- 1 of 6 SIM Model testing sites
It’s Personal
The Time to ACT is NOW!

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