

Best Practices and Future Directions in Dementia Care Across the Globe

David P. Hoffman, DPS CCE

Director, Bureau of Community Integration and Alzheimer's Disease

Division of Long Term Care

May 2018

CE Credits for Plenary Sessions

- Accreditation for CME, CNE, CHES and Social Workers
- Complete the CE forms in your Program packet
- Must sign in and register for each plenary, located at registration table
- Return completed CE forms to registration table
- CE Certificates will be emailed to you



Alzheimer's Disease Program Team

- Elizabeth Berberian, MPH, Director
- Thea Griffin, LMSW, Program Advisor
- Lynn Young, MS, Program Manager- Centers of Excellence for Alzheimer's Disease
- Erin Fay, LMSW, Program Manager- Alzheimer's Disease Community Assistance Program
- Andrea Martin, MSW, Program Manager- Caregiver Support for Underserved Populations
- Rebecca Thomas, LCSW, Program Manager- Regional Caregiver Initiative Projects
- Maura Fleming, MHA, Program Manager- Regional Caregiver Support Initiative
- Meghan Fadel- Program Evaluation Coordinator
- Greg Bucher- Healthcare Financial Analyst
- Val Thomas- Healthcare Program Specialist
- Luisa Fernandes, MPH, MHA, Student Assistant
- Jennifer Perry, MSW, Student Assistant
- Rachel Vancavage, MPH, Student Assistant



Program History of AD in New York State

- **1984**: Blue Ribbon Panel to develop policy recommendations on various aspects of Alzheimer's Disease
- 1987: Alzheimer's Disease Assistance Centers selected for funding
- 1988: Alzheimer's Disease Community Service Programs
- 2007: NYS Coordinating Council for Services Related to Alzheimer's Disease and other Dementias
- 2015: NYS Caregiver Support Initiative
- 2018: Today



Update: New York State Initiative

- Alzheimer's Disease Caregiver Support Initiative– Year 1 Report Published
- Currently in Year 3
- Summary of selected findings :
 - Providers reported a growing awareness and demand for services as they expanded outreach activities
 - Most providers reported forming new partnerships as a result of the grant
 - Most commonly reported staffing challenge: lack of applicants with experience in dementia
 - Most commonly reported service delivery challenge: participant recruitment

https://www.health.ny.gov/health_care/medicaid/redesign/mrt_8004.htm



Community Support and Education To Date*

55,932 care consultations



39,389 helpline calls serving 21,521 individuals



6,791 support group sessions 180,279 hours of respite

25,157 participants in 3348 education sessions

YYY





Diagnostic and Professional Training*



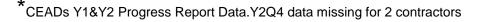
11,965 diagnostic assessments



43,878 referrals to community providers



34,455 (duplicated) medical and healthcare professionals trained by CEADS. Another 10,722 healthcare professionals and professional caregivers received training from other contractors





National Trends

- National Alzheimer's Project Act (NAPA)
- PH Roadmap
- Recommendations/ Best Practices
- State investments
- Building Our Largest Dementia (BOLD) Infrastructure for Alzheimer's Act
- Research investment



NAPA

 Final report released from the 2017 national Research Summit on Dementia Care, Services and Supports for Persons with Dementia and their Caregivers

12 major themes



NAPA

- 1. Heterogeneity
- 2. Research Methods
- 3. Caregiver
- 4. Clinical Approaches
- 5. Engaging Persons Living with Dementia and Caregivers
- 6. Dementia-Related Terminology
- 7. Comprehensive Models for Dementia Care
- 8. Strategies for Scaling
- 9. Living Places
- 10. Financial Burden
- 11. Adequate and Qualified Workforce
- 12. Technology to Support Persons with Dementia

NEW YORK

OPPORTUNITY

Department

of Health

CDC's Public Health Road Map: #3

The Public Health Road Map for State and National Partnerships 2018-2023

- 25-item Action Agenda
 - Tied to 4 domains of public health
 - Emphasizing 5 Critical Overarching Issues
- Timeline
 - Summer-2018: Initial Launch
 - Fall-2018: Wide-spread Release





www.cdc.gov/aging/healthybrain/roadmap.htm

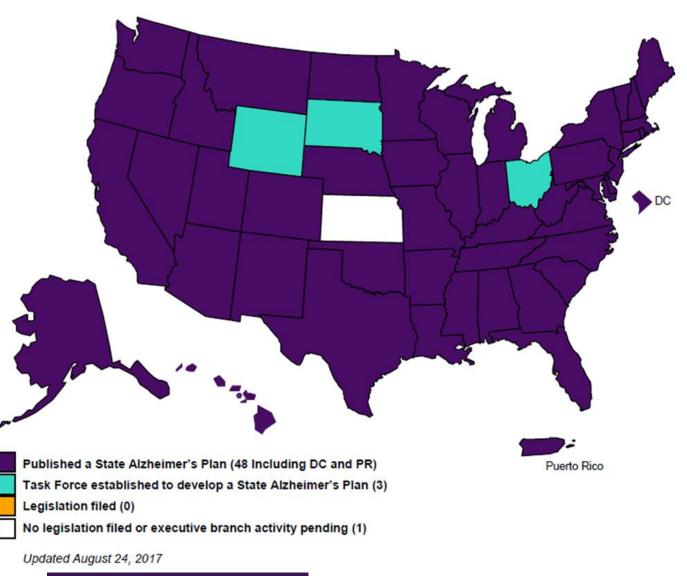
Recommendations & Best Practices





State Actions

- National Association of Chronic Disease Directors
 - National Alzheimer's
 Disease Interest Group
- State Government Alzheimer's Disease Plans (48 including DC and PR)



alzheimer's $\ref{eq:starses}$ association[®]



BOLD Act

Public health response:

• Establish Alzheimer's centers of excellence

Goals:

- Achieve a higher QoL for those living with the disease and their caregivers
- Reduce associated costs
- Promotion of Public Health Knowledge and Awareness of Alzheimer's Disease

Steadily Increasing Research Investment

ALZHEIMER'S RESEARCH FUNDING AT THE NIH





International Trends

Shared research agenda

Shared research taxonomy

Acceleration of progress



Shared Research Agenda

•2019 G20 Osaka Summit Agenda

• "Global Fund Against Dementia"



Shared Research Taxonomy

- The International Alzheimer's Disease Research Portfolio (IADRP)
 - Developed by NIA to provide accessibility to a publicly available database
 - Goals:
 - Support funding agencies in analyzing the changing landscape of AD research
 - Identify opportunities for coordination of resources and support
 - Identify funding gaps
 - Identify areas of overlap within and across agencies
- The Common Alzheimer's Disease Research Ontology (CADRO)
 - 7 major categories



Acceleration of Progress

- 30 countries have national plans addressing AD/D
- May 2017: WHO adopted first worldwide plan on Alzheimer's and other cognitive impairments
 - Global Plan of Action on the Public Health Response to Dementia, 2017-2025



Potential Future Policy Steps

- Spread successful strategies
- Reach underserved communities
- Recognize the need to fund long term services and supports
- Include dementia specific supports
- Move reimbursement systems to support evidence-base





Spread Successful Strategies

Start with a plan

Demonstrate the value of investment



Underserved Communities

- Root Causes:
 - Poverty
 - •Racism (& other isms)
 - Stress



May 2018

"I won't need long-term care..."

FACT:

70% of those over age 65 will require some form of long-term services and supports during their lifetime.

Source: 2014 Medicare & You, National Medicare Handbook, Center for Medicare & Medicaid Services, September 2013



Long-Term Services and Supports – A Costly Conundrum

- Medicaid is the largest payer of LTSS
- Out-of-pocket funding averages about 17%, while private long-term care insurance is only 6%, on average
- In 2015, Medicaid spent \$158 billion in state and federal funds on LTSS
- In FY 2016, total Medicaid spending in New York was \$62.9 billion, 24% of which was spent on LTSS (fee-for-service)

NEW YORK Department

The Need to Fund Long-Term Services & Supports

How do we incentivize and educate a growing population, at least in the state of New York, to provide front-end coverage for their LTSS expenses?



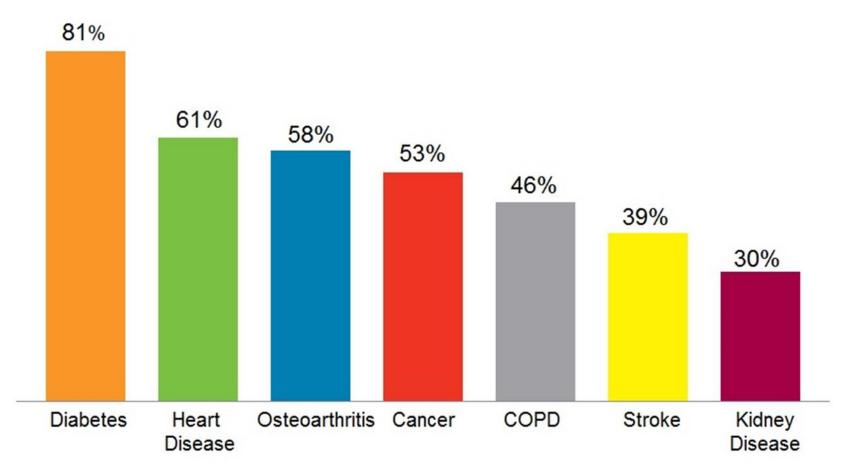
Multiple Chronic Conditions (MCC)

- Comorbidities can negatively impact person living with dementia
- Dementia diagnosis can negatively effect the treatment and management of existing chronic conditions
- Medicare beneficiaries living with Alzheimer's disease:
 - •77% have 3 or more additional chronic conditions
 - 95% have at least one additional chronic condition
- Primary doctor awareness: treating depression, managing MCC



Higher Medicare Costs Due to Alzheimer's

Average Increase in Costs for Senior with Alzheimer's and Other Condition Compared with Senior with Other Condition Only



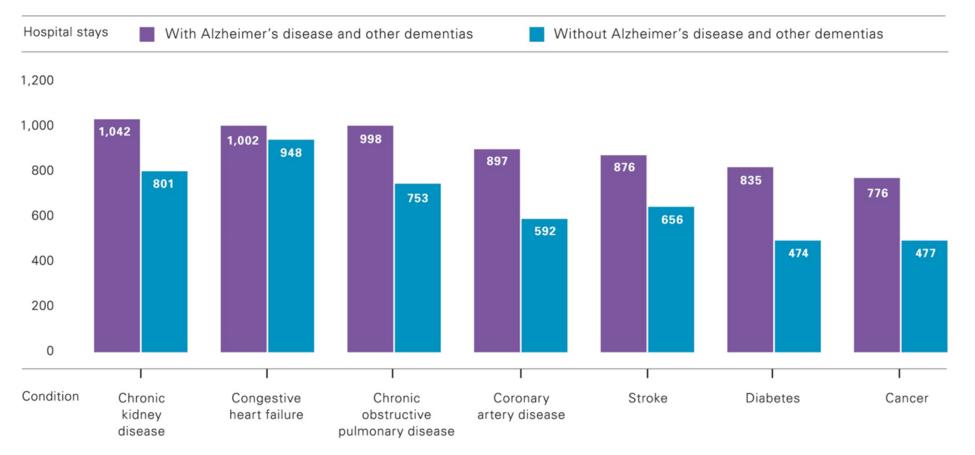
Created from unpublished data from the National 20% Sample Medicare Fee-for-Service Beneficiaries for 2009.

Source: 2015 Alzheimer's Association Facts & Figures



Hospitalizations & Coexisting Conditions

Hospital Stays per 1,000 Beneficiaries Age 65 and Older with Specified Coexisting Medical Conditions, with and without Alzheimer's Disease and Other Dementias, 2009



Created from unpublished data from the National 20% Sample Medicare Fee-for-Service Beneficiaries for 2009.153

Source: Alzheimer's Association 2015 Alzheimer's Disease Facts and Figures



Move reimbursement systems

Supporting caregivers improves health of all

Importance of planning

Importance of preparedness



Gratitude for efforts of all

- Thank you!
- We have only come this far due to your efforts
- You are making a difference



Contact:

David.Hoffman@health.ny.gov

