

## People with Dementia in the Coordinated Care Initiative's Dementia Cal MediConnect Project

### Alzheimer's Disease: A Public Health Concern

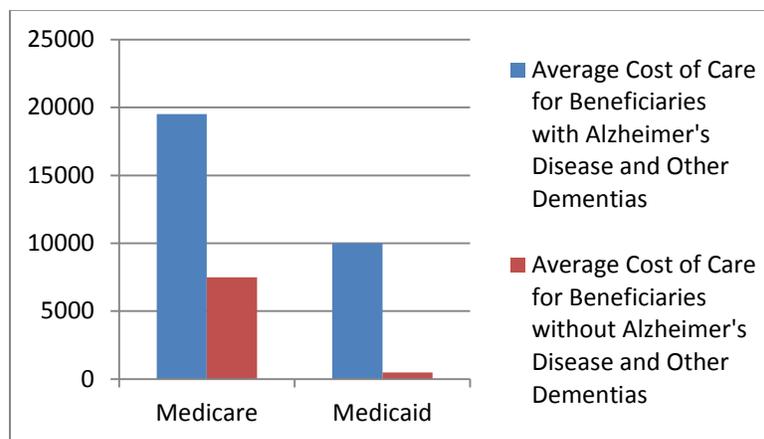
Alzheimer's disease currently afflicts 5.2 million Americans and about 600,000 Californians.<sup>1</sup> With the aging of the baby boomers, these numbers will double in less than twenty years and triple by mid-century. Hispanics and African Americans are one and a half to two times as likely to have Alzheimer's disease and other dementias.<sup>2</sup> Alzheimer's and other dementias have enormous health and economic consequences for patients, their family caregivers, and society.

### People with Alzheimer's Disease and Related Disorders in Cal MediConnect

Based on prevalence data in the population aged 65 and older, the Alzheimer's Association conservatively estimates that 61,000 to 84,000 of dual eligible beneficiaries in California, and 19,000 in Los Angeles County alone, have Alzheimer's disease or a related dementia.<sup>3</sup>

### Cost of Care

Beneficiaries with moderate to severe cognitive impairment, as shown in the chart below, cost Medicare three times more than other beneficiaries in the same age group; this difference is driven primarily by hospitalizations. They cost Medicaid nineteen times more than other enrollees of the same age, largely due to nursing home utilization.<sup>4</sup> Many people with dementia have multiple coexisting conditions.<sup>5</sup> This increases the likelihood for hospitalization and length of hospital stays, compared to people with the same serious medical conditions, but without dementia.<sup>6</sup>



## **Caregiving**

In 2013, there were over 1.5 million family caregivers in California who provided over \$20 billion worth of unpaid care.<sup>7</sup> Effectively managing the health care of a person with dementia cannot be done without the active participation of family caregivers; this means more than simply involving them in the patient's health decisions. Caring for a person with Alzheimer's or other dementias is often very difficult, and many family and other unpaid caregivers experience high levels of emotional stress, burnout, and depression. As a result, health plans must assess caregivers' ability to provide the necessary level of care, and identify the education and supportive services the caregivers need to be able to continue providing this level of care. In cases where caregivers are unable to provide the needed level of care, or where there is no caregiver, plans must develop comprehensive strategies to provide for the safety and well-being of the person with Alzheimer's.

## **Dementia Care Management Improves Care and Health Outcomes**

There are now three randomized controlled studies that have examined ways to improve care while controlling costs for this vulnerable population.<sup>8, 9, 10</sup> They each recommend the training of a dementia care specialist who is assigned to educate and support patients and family caregivers, as well as connect them to needed services within the health care system and the community. The three-way contract<sup>11</sup> between the health plans, the State, and Centers for Medicare & Medicaid Services (CMS) mandate that each plan have specially designated care coordination staff in dementia care management to work with this complex population.

## **Key Components of Quality Managed Care**

Quality managed care for people with dementia is possible to achieve. Much research has been done about the key components that must be in place in order to truly meet the needs of people with dementia. These components include:

- Screening to identify members with cognitive impairment;
- Training for healthcare professionals;
- Evidence-based practice guidelines for diagnosis, treatment, and management;
- Family caregiver assessments and supports; and,
- Dementia care management by a trained dementia-knowledgeable professional.

## **Dementia Cal MediConnect Project**

Funded by the federal Administration on Community Living through California's Department of Aging, the Dementia Cal MediConnect project seeks to improve the quality of health care for members enrolled in Cal MediConnect health plans. This is achieved through consultation to the plans and training for care managers and family caregivers, provided by the Alzheimer's Association, California Southland Chapter and the Northern California and Northern Nevada Chapter.

As California moves forward with the overall Coordinated Care Initiative, key components of quality managed care must be in place. Only then will the Initiative achieve its goals of improving patient health and lowering health care costs. The costs - to families, to our communities, and to the State - of not doing so are enormous.

## References

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- <sup>4</sup> - Arrighi HM, Neumann PJ, Lieberburg IM, Townsend RJ. Lethality of Alzheimer disease and its impact on nursing home placement. *Alzheimer Dis Assoc Disord* 2010;24(1):90-5.
- <sup>5</sup> - Alzheimer's Association, 2014 Alzheimer's Disease Facts and Figures, *Alzheimer's & Dementia*, Volume 10, Issue 2.
- <sup>6</sup> - Op cit. Bynum, J.P. et al. 2004.
- <sup>7</sup> - Alzheimer's Association, 2014 Alzheimer's Disease Facts and Figures, *Alzheimer's & Dementia*, Volume 10, Issue 2.
- <sup>8</sup> - Clark PA, Bass DM, Looman WJ, McCarthy CA, Eckert S. Outcomes for patients with dementia from the Cleveland Alzheimer's Managed Care Demonstration. *Aging Ment Health* 2004;8(1):40-51.
- <sup>9</sup> - Callahan CM, Boustani MA, Unverzagt FW, Austrom MG, Damush TM, Perkins AJ, Fultz BA, Hui SL, Counsell SR, Hendrie HC. Effectiveness of collaborative care for older adults with Alzheimer's Disease in primary care. *JAMA* 2006;295:2148-2157.
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