

The Hawaii State Plan on Alzheimer's Disease and Related Dementias (ADRD)

Opportunities for Collaboration



Our Vision

- 💧 **We are committed to embrace and support with Aloha, all of Hawaii's people who are touched by Alzheimer's Disease and Related Dementias – from early detection to end of life – always keeping alive the hope of prevention and eventual cure, and aiming for the best quality of life for all.**



Statistics

- ◆ In Hawaii, about 31,000 persons over 65 have ADRD. This is a conservative estimate based on US Census and Alzheimer's Association data, not including Early Onset or those who are undiagnosed. (50-80% of cases are undiagnosed)
- ◆ An estimated 5.2 million Americans of all ages have ADRD. This includes appx 200,000 younger than age 65. Almost half of people over 85 have some form of memory loss. By 2050, this number may triple
- ◆ Now considered a Public Health Crisis
- ◆ Increased focus and momentum nationwide and worldwide

Important Dates

- ◆ Reveal State Plan on ADRD on December 5 at 3-day NASUAD aging conference on HCBS

http://www.nasud.org/newsroom/archive/2013/hawaii_2013_conference.html

- ◆ October 4, 2013, Kupuna Caucus presentation on ADRD State Plan Legal Recommendations

National Alzheimer's Project Act of 2011

Requires the Secretary of the U.S. Department of Health and Human Services (HHS) to establish the National Alzheimer's Project to:

- Create and maintain an integrated national plan to overcome Alzheimer's
- Coordinate research and services across all federal agencies
- Accelerate the development of treatments that would prevent, halt, or reverse the disease
- Improve early diagnosis and coordination of care and treatment of the disease
- Improve outcomes for ethnic and racial minority populations at higher risk
- Coordinate with international bodies to fight Alzheimer's globally
- Create an Advisory Council to review and comment on the National Plan and its implementation

NAPA Vision Statement

For millions of Americans, the heartbreak of watching a loved one struggle with Alzheimer's disease is a pain they know all too well. Alzheimer's disease burdens an increasing number of our Nation's elders and their families, and it is essential that we confront the challenge it poses to our public health.

-- President Barack Obama



The Hawaii Plan will align with National Plan Goals

1. Prevent and Effectively Treat Alzheimer's Disease by 2025
2. Optimize Care Quality and Efficiency
3. Expand Supports for People with Alzheimer's Disease and Their Families
4. Enhance Public Awareness and Engagement
5. Track Progress and Drive Improvement

Opportunities for Collaboration

Themes

1. CMMI Grants (CMS Innovations): demonstrate models of care
2. Expand local research and pilot programs
3. Promote early and accurate diagnosis of dementia (national best practices and initiatives)
4. Clinical partnering with community supports and services
5. Replicate evidence-based caregiver support programs
6. Public Health initiatives/collaboration
7. Address gap in Geri-Psych capacity in Hawaii
8. Affordable Care Act (PCMH, coordinated care)

1. CMMI Innovations Grants

<http://innovation.cms.gov>

- ◆ The CMS Innovation Center, in partnership with the CMS Medicare-Medicaid Coordination Office, supports the development and testing of innovative health care payment and delivery models.
- ◆ 3 grantees that are dementia-related models: UCLA, Rhode Island, Indiana. (See handouts. Programs will show cost savings related to patient-centered medical home models and coordinated care)
- ◆ Hawaii proposal, partners seeking to start another Geri-Psych unit at an Oahu hospital, offering beds for behavioral cases when family needs respite or assessment
- ◆ CMMI goal: to demonstrate better care, better health for communities, and LOWER COSTS.

2. Expand local research and pilot programs

- ◆ Hawaii Pacific Neuroscience: possible partnerships with Dr. Kore Liow's research efforts. Included in ADRD State Plan Strategy: **Develop a Research Consortium and programs unique to Hawaii that have the potential to contribute to the science and understanding of ADRD worldwide.** HPN has monthly Grand Rounds, will possibly expand to town
- ◆ Another State Plan recommendation: By 2023, Hawaii residents will have access to Memory Clinics statewide (different settings). Identify models and replicate

Dementia Symposium, Feb. 8, 2013



Expand local research and pilot programs, cont'd

- ◆ JABSOM Geriatric Education Center has been collaborating with HMSA, providing education in basic geriatrics for primary care doctors at 4 sites: Kuakini, Straub, Queens, and broadcast via Internet for private docs and neighbor islands. One topic is "Dementia and Depression"
- ◆ GEC received dementia supplement from U.S. Dept. of Health & Human Services to educate health care providers about ADRD. Possible partner in professional trainings. In 2012-2013, delivered more than 20 trainings related to dementia with over 400 participants

3. Early and Accurate Diagnosis

- ◆ Less than 35% of people with ADRD have a diagnosis in their medical record.
- ◆ 50-80% worldwide don't have diagnosis
- ◆ Goal in Healthy People 2020
- ◆ Goal of CDC's Roadmap for Healthy Brain Initiative
- ◆ Top 5 priorities in analyzed state and world plans
- ◆ Cost savings related to early diagnosis (Wisconsin, new Minnesota study)

Minnesota Provider Practice Tools

www.actonalz.org

- ◆ Minnesota model: Clinical Provider Practice Tool
- ◆ Electronic Medical Record Decision Support Tools (template to assist clinicians in a standardized approach to all aspects of dementia care in record (Screening, Diagnosis, Treatment and Management))
- ◆ Care Coordination Practice Tool
- ◆ Assessing Cognition Using the Mini-Cog (YouTube video)

Provider Practice Tools

Clinical Provider Practice Tool

EMR Decision Support Tools



ACT ON ALZHEIMER'S

EMR Decision Support Tools for Alzheimer's and Related Dementias

The ACT on Alzheimer's Electronic Medical Record (EMR) Decision Support Tools provide an evidence-based template to assist clinicians in implementing a standardized approach to all aspects of dementia care within the health record: 1.) Screening 2.) Diagnosis and 3.) Treatment/Management. Each tool guides the provider toward best care practices and referrals intended to promote wellness and support patients and their families living with Alzheimer's disease or a related dementia. The tools may be used within a variety of EMR products and can be modified to meet the unique needs of each healthcare system.

Screening Tool - 1.0

A guide to cognitive screening as part of the Medicare Annual Wellness exam or other patient visit

Diagnostic Tool - 2.0

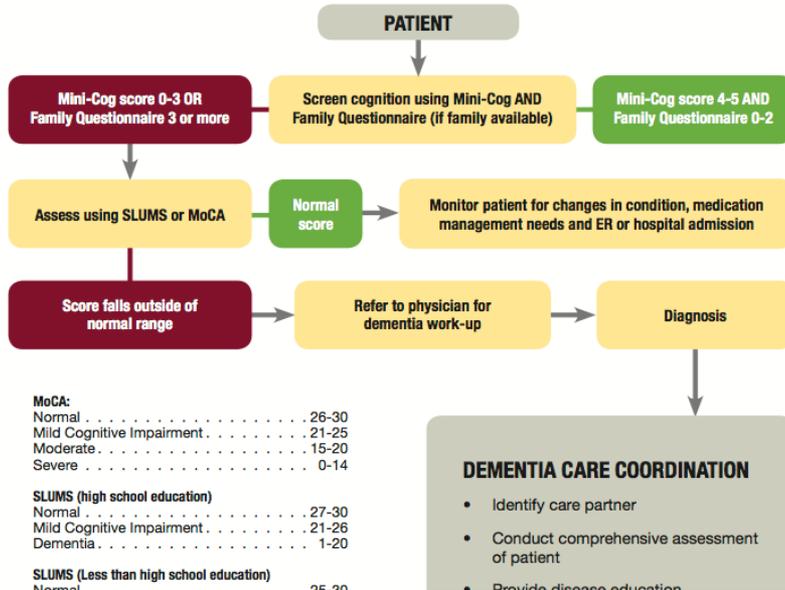
A guide to the initial evaluation of patients with new onset memory loss OR abnormal cognitive screening

Care Coordination Practice Tool

Coordination in Health Care Settings

Dementia Care Plan Checklist

COGNITIVE IMPAIRMENT IDENTIFICATION AND DEMENTIA CARE COORDINATION IN HEALTH CARE SETTINGS



DEMENTIA CARE PLAN CHECKLIST

With the patient and care partner, create a person-centered plan to meet identified needs, address barriers and set goals based on the patient's values.

Conduct comprehensive assessment of patient (include care partner).

- Refer to the Taking Action Workbook (www.alz.org/documents/mndak/taking_action_workbook.pdf)
- Contact Alzheimer's Association Minnesota-North Dakota at 1-800-272-3900 or visit www.alz.org/mnnd/

Educate the patient and care partner about diagnosis and disease process.

Develop care plan based on patient's diagnosis and stage of disease, needs and goals.

Medication Therapy and Management

- Discuss prescribed and over-the-counter medications
- Refer to pharmacist for medication review and to simplify medication regimen
- Work with patient's health care team to create a medication management plan
- Educate patient and care partner on medication management aids (pill organizers, dispensers, alarms)

Patients in middle and late stages will require medication oversight from care partner or health care professional.

Maximize Abilities

- Work with patient's health care team to treat conditions that may worsen symptoms or lead to poor outcomes, including depression and co-existing medical conditions (e.g., diabetes, blood pressure, sleep

Early and Accurate Diagnosis

- "There is strong evidence that improving the process through which people are diagnosed and widening access to a high level of support at a relatively early stage of the illness is beneficial...90% of suffering of the patient and their family members can be avoided by providing these services starting early and maintaining them through the course of the illness."
- Dr. Abhilash Desai, from Missouri State Plan

4. Clinical partnering with Community Supports

- ◆ Cost-savings related to access to community supports from clinical settings for dementia patients and care partners will be shown in new Minnesota report coming out this month
- ◆ Recommended in all state and world plans
- ◆ HAH did a wonderful job conducting Community Health Needs Assessments. Link to the state report on the HAH website. A local best practices model in the promise of clinical and community collaborations

5. Evidence-based caregiver support programs

- ◆ Hawaii caregivers should have more access to evidence-based caregiver interventions (REACH II at VA and Honolulu Gerontology, What's Next at Alzheimer's Association). Funding from AoA and Rosalynn Carter Institute for Caregiving.
- ◆ Evidence-Based Programs inventory on ADSSP website
- ◆ NYU Spousal intervention, called the Mittelman study
- ◆ Caregiver Assessment tools – Inventories at National Alliance on Caregiving and at Rosalynn Carter Institute on Caregiving website

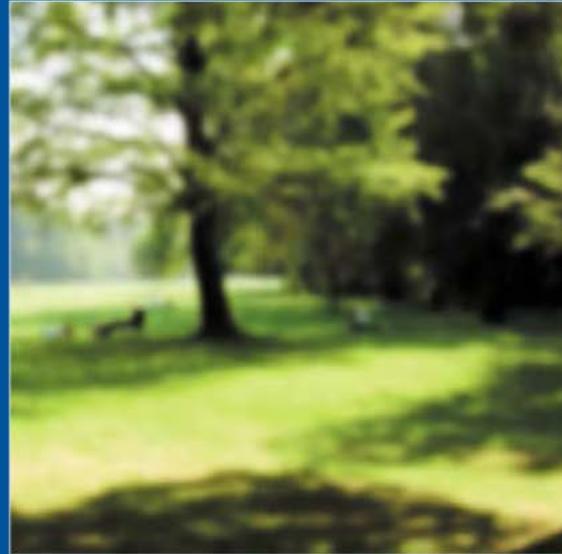
Alzheimer's Disease Supportive Services Program

- Advances state initiatives toward coordinated systems of home and community-based care
- Delivers supportive services
- Translates evidence-based models
- http://www.aoa.gov/AoARoot/AoA_Programs/HPW/Alz_Grants/index.aspx#current

6. Public Health Collaborations

- ◆ CDC Healthy Brain Initiative: The Public Health Road Map for State and National Partnerships, 2013-2018
- ◆ Healthy People 2020

Healthy Brain Initiative



The Healthy Brain Initiative

**The Public Health Road Map for State
and National Partnerships, 2013–2018**

7. Geriatric-Psychiatric Capacity in Hawaii

- ◆ State Plan recommendation: Increase capacity in Geriatric Psychiatric services and training
- ◆ Wahiawa Hospital Geri-Psych Unit – only unit in Hawaii, 15 beds not enough
- ◆ Need for better crisis intervention for caregivers, burnout, etc.; Access Line not equipped to handle or refer dementia behavioral crises
- ◆ Dementia or brain injury not covered in Adult Mental Health Services
- ◆ Convene special workgroup for this issue.

8. Affordable Care Act

- ◆ Medicare Annual Wellness visits to include cognitive screening
- ◆ Patient-centered, family-centered medical home model, the best way to provide dementia care (like KKV)
- ◆ Dementia not included as a criteria so far in Medicaid pilot SPA: need advocacy for this – despite it being the most expensive chronic disease in a state where life expectancy is highest. Great opportunity for cost savings.

Importance of Data

- ◆ Dementia data stakeholders – who are they?
- ◆ Hawaii BRFSS study on Cognitive Impairment
- ◆ HHIC (Hawaii Health Information Corp.) Stats on hospital discharge, dementia as secondary diagnosis in waitlisted patients
- ◆ Whatever is done, important to collect more and better data about dementia in Hawaii, how it might contribute to high cost, waitlisting in hospitals, etc.

Important ADRD links

- ◆ **NAPA home page, with link to National Plan to Address Alzheimer's Disease**
<http://aspe.hhs.gov/daltcp/napa/>
- ◆ **ACL's Alzheimer's Disease Supportive Services Program**
http://www.aoa.gov/AoARoot/AoA_Programs/HPW/Alz_Grants/index.aspx
- ◆ **Alzheimer's Association 2013 Facts & Figures**
www.alz.org/alzheimers_disease_facts_and_figures.asp

Important ADRD links

- ◆ **AHRQ, Agency for Healthcare Research and Quality Improvement**

http://www.innovations.ahrq.gov/innovations_qualitytools.aspx?search=dementia

Search with Key Word “Dementia”

Brainstorm

Dementia is the most expensive chronic disease. Yet, even with the Affordable Care Act Hawaii planning taking place, dementia is not yet a criteria for coverage in the patient-centered medical home models in Hawaii. There is a huge gap. For this most vulnerable population, what can we do?

