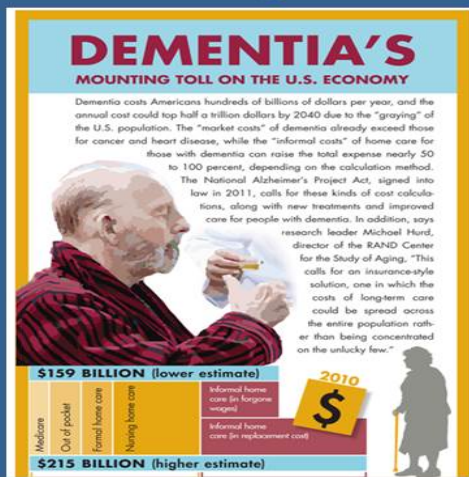


# A Blueprint for Improving Dementia Long-Term Care



Regina Shih  
 July 21, 2014  
 NAPA Advisory Council Meeting

## The majority of dementia costs are for long-term services and supports



Yearly costs as high as cancer or heart disease

75-84% of costs related to LTSS, not medical care

Number of Americans with dementia will double by 2050

*Dementia's Mounting Toll on the U.S. Economy* by Michael D., Hurd, Paco Martorell, Adeline Delavande, Kathleen J. Mullen and Kenneth M. Langa. Santa Monica, CA: RAND Corporation, 2013.

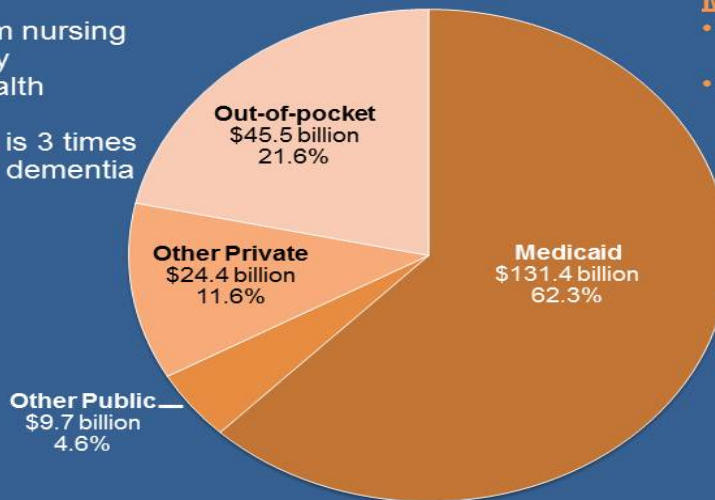
## LTSS costs for dementia are especially high

### Medicare:

- Short-term nursing home stay
- Home health
- Hospice
- Spending is 3 times higher for dementia

### Medicaid:

- Asset-based eligibility
- Spending is 19 times higher for dementia



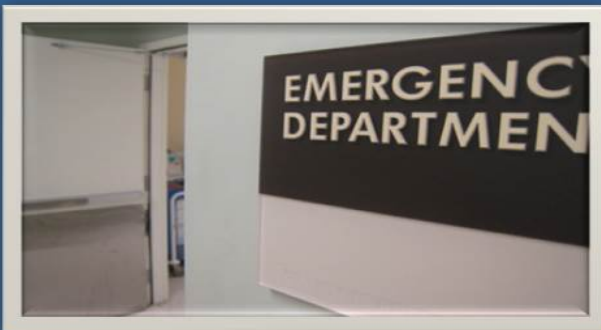
Source: National Health Policy Forum, based on data from 2011 National Health Expenditure Accounts

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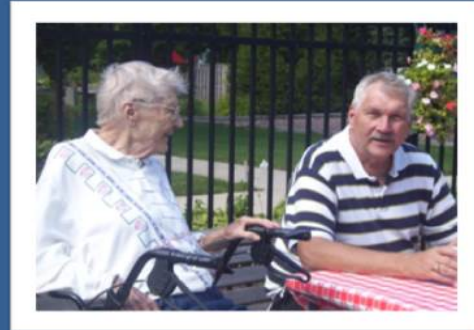
## Despite high costs, the LTSS system is fragmented

Only 1/2 of dementias are diagnosed; only 1/2 of those receive support

Heavy reliance on family caregivers



Negative outcomes from poor coordination across settings



Caregiver ratio will drop 7:1 to 3:1

Citations: Boustani et al., 2003; U.K. Department of Health, 2013; World Health Organization, 2012; Gozalo et al., 2011; Nbel 2012; Alzheimer's Association, 2013; Redfoot, Feinberg, and Houser, 2013. Photos via Group fotografico effectcohen and Jeffrey Brendan, CC via flickr

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## RAND's Blueprint has a unique focus



Long-term Care National Plans



Dementia National Plans



LTSS policy solutions through the **lens of dementia**  
A **multi-sector** pathway

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## Thirty stakeholders from different groups identified challenges and policy options



We asked:

What problems do you face in the delivery of care, development of policy, or related research?

How can policy address the problems you identified?

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# We selected 14 evaluation metrics



# We analyzed policy options

Options

Policy Option	ACCESS			IMPACT				EQUITY	COST		FEASIBILITY				Time frame
	Awareness	Availability	Utilization	Effectiveness	Safety	Coordination of care	Patient/caregiver satisfaction		Efficiency	Financing	Legal feasibility	Political feasibility	Operational feasibility		
<b>Formal Caregivers</b>															
W.1	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.2	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.3	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.4	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.5	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
<b>Family Caregivers</b>															
W.6	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.7	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.8	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.9	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	
W.10	Green	Green	Green	Green	Green	Green	Green	Green	Red	Green	Green	Green	Green	Green	

Metrics

Qualitative evaluation: positive, neutral, negative, unknown effects

## 25 high-impact policy options meet 5 objectives



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A number of policy options could be enacted  
in the **short-term for immediate change**

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Improve  
awareness &  
detection

- Create specialized outreach and education programs about dementia signs/symptoms
- Encourage providers' use of cognitive assessment tools

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Improve  
access

- Broaden home- and community-based waiver programs, participant-directed services, and states' infrastructures
- Integrate web- and other technology-based services
- Expand nurse delegation

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Promote person-  
& caregiver-  
centered care

- Jointly identify person living with dementia and family caregiver
- Standardize complementary assessment tools
- Create and disseminate existing dementia best practices for professional care workers

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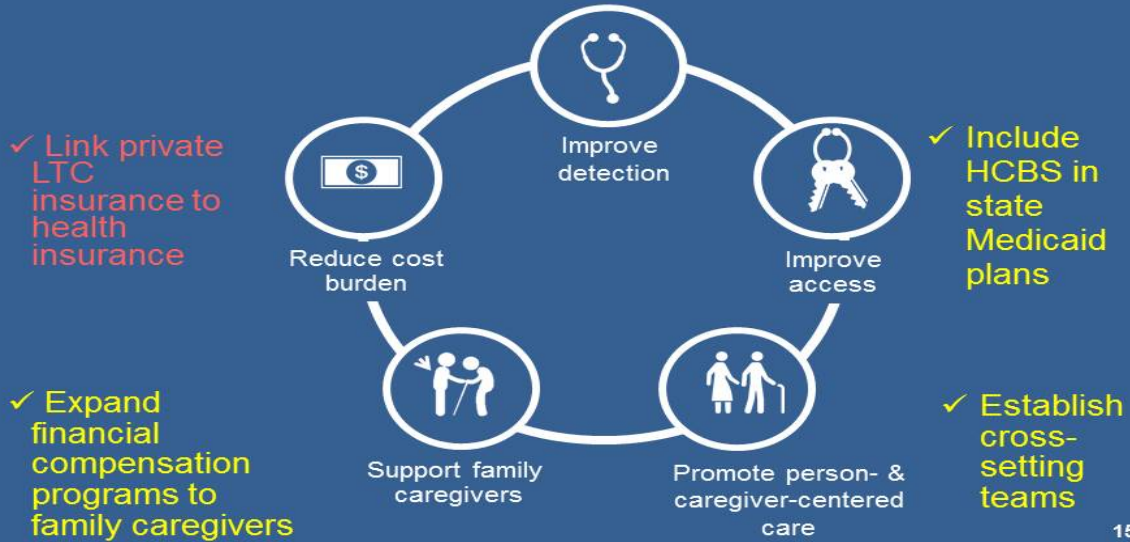


Support family  
caregivers

- Provide dementia-specific training and resources to family caregivers
- Offer tax incentives to promote family caregiving

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## Other policy options are unique to the RAND Blueprint



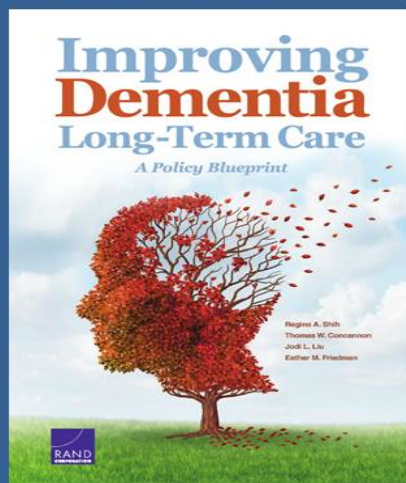
## Continued Progress

- 
- Conduct more robust evaluations
  - Build consensus about priority options
  - Tailor approaches for vulnerable populations
  - Set metrics to evaluate progress

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You can review the study and full list of options at [www.RAND.org](http://www.RAND.org)



Report: [http://www.rand.org/pubs/research\\_reports/RR597.html](http://www.rand.org/pubs/research_reports/RR597.html)  
Brief: [http://www.rand.org/pubs/research\\_briefs/RB9780.html](http://www.rand.org/pubs/research_briefs/RB9780.html)  
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