

IHS Alzheimer's Program Update

February 2025

Indian Health Service

Jolie Crowder, PhD, MSN RN, CCM



Our Mission



To raise the physical,
mental, social, and spiritual
health of American Indians
and Alaska Natives to the
highest level.



About IHS

- 18th largest health system in the U.S.
- Primary care and prevention for ~ 2.8 million American Indian and Alaska Native people
- 575 federally recognized Tribes
- 12 IHS Areas
- 37 States
- Many in reservation or rural communities lack reliable means of transportation or telehealth capacity

I/T/U System

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graph TD; A["I/T/U System"] --- B["Indian Health Service (IHS)"]; A --- C["Tribally Operated Services  
65% of budget"]; A --- D["41 Urban Indian Health Organizations  
~1.3% of budget"];
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Indian Health
Service (IHS)

Tribally Operated
Services

65% of budget

41 Urban Indian Health
Organizations

~1.3% of budget

I/T/U Services

- Dental services
- Nutrition services
- Pharmacy
- Community health
- Injury prevention
- Sanitation (water supply and waste disposal)
for 39,000+ homes
- Facilities management
- **Tribes can and do offer other services**



Purchased/Referred Care (PRC) Program

May purchase needed services through private health care providers in cases where an IHS or tribal facility does not exist or does not provide the required care

The Workforce

14,000 IHS employees plus Tribal and Urban staff

IHS and Tribal:

- 43,036 inpatient admissions
- 14,365,764 outpatient medical care visits

Difficulty recruiting and retaining health care staff

Staff shortages in all areas, particularly:

- Primary care providers
- Behavioral and mental health



Cultural Context

- **“You’ve seen one Tribe, you’ve seen one Tribe.”**
- Cultural Significance of Elders in Tribal Communities
 - Role of elders
 - Traditional respect and reverence for elders





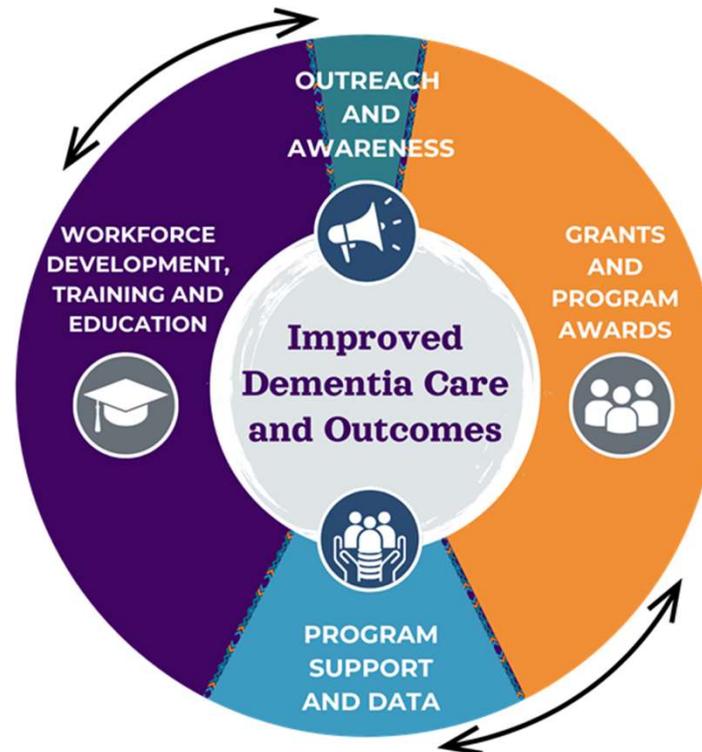
IHS ALZHEIMER'S PROGRAM





IHS Alzheimer's Program

2021: IHS received first-time funding to address the growing need for Alzheimer's and dementia care in American Indian and Alaska Native communities → developed with input from tribal and urban Indian leadership



IHS Alzheimer's Program Team



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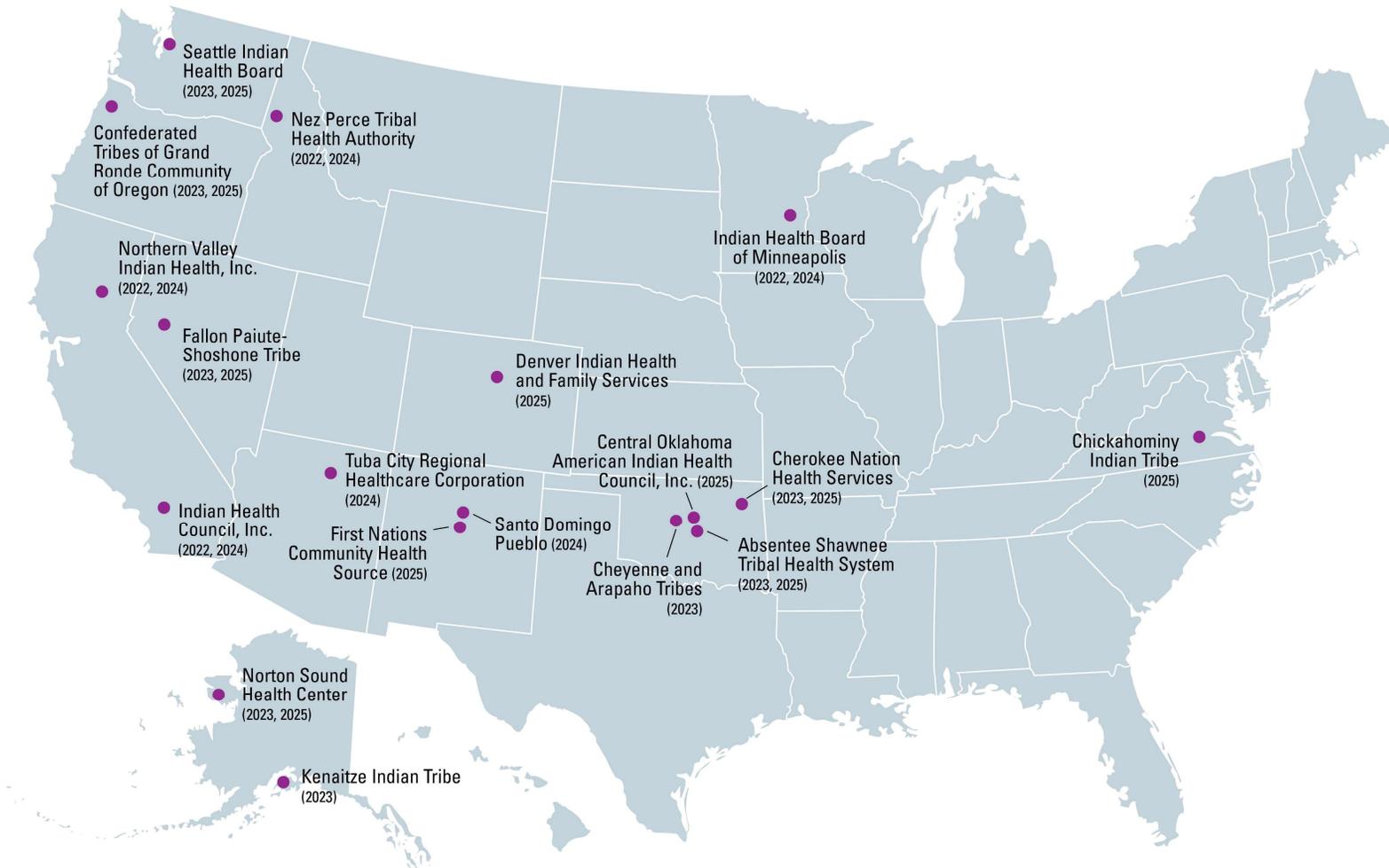




Grants & Program Awards

IHS Alzheimer's Program

IHS Dementia Models of Care Grants



IHS Dementia Models of Care Grants



Thanks to our grantees for creating tailored solutions that meet real needs!

IHS ALZHEIMER'S PROGRAM 



Models of Care grantees are using tools that honor caregivers and deliver culturally relevant care

IHS ALZHEIMER'S PROGRAM 



Workforce Development, Training, & Education

IHS Alzheimer's Program



IHS Dementia Care Pathway

IHS DEMENTIA CARE PATHWAY

Primary Care

This pathway is intended to provide guidance to clinicians as they care for American Indian and Alaska Native people who may be experiencing cognitive impairment.

DETECT
Recognize possible cognitive impairment

- Patient & Caregiver
- Community Staff
- Primary Care Team

EVALUATE
Assess cognition and perform targeted history, physical and diagnostics

- Patient & Caregiver
- Primary Care Team
- Neurology or Geriatrics Specialists (optional)

DIAGNOSE AND DISCUSS
Integrate findings and communicate to patient and care partners

- Patient & Caregiver
- Primary Care Team
- Neurology, Geriatrics, or Neuropsychology Specialists (optional)

Content derived from expert opinions of Indian Health Service, tribal, and urban Indian health providers and based on most recent clinical evidence as of June 2025.

NEW TOOL

ALERT!

The IHS Dementia Care Pathway offers step-by-step support.

IHS ALZHEIMER'S PROGRAM

IHS Dementia Clinical Support Line



Free Dementia Care Support for Health Professionals



Available Monday–Friday,
12 p.m. – 8 p.m. ET

call: 833-998-4897
email: uw-triad@uw.edu

IHS ALZHEIMER'S PROGRAM



IHS Alzheimer's Program Training Series



- Quarterly dementia trainings for multiple disciplines:
 - Providers
 - Nurses
 - Behavioral Health Specialists
 - Dental Professionals
 - Community Health Representatives
 - Pharmacists
- Will be available for live & asynchronous trainings
- Developed with the University of Washington, an IHS contractor

Our updated Training & Education pages now provide easy access to dementia care resources.

IHS ALZHEIMER'S PROGRAM 



Workforce Training Programs

Indian Health GeriScholars Program Reach

- 42** Physicians, NPs, PAs, and Pharmacists
- 35** Tribal Facilities
- 11** IHS Areas

*Data from 2023-2025



Geriatric Nurse Fellowship Program Reach

- 25** RN, LPN, BSN, and NP Participants
- 20** Tribal Facilities
- 9** IHS Areas

*Data from 2024-2025



MiniCog[®] Pilot & Videos



**Detect
Alzheimer's
earlier with
Mini-Cog[®]**

We'll show you how.

IHS ALZHEIMER'S PROGRAM 



Caregiver & Clinical ECHO



INDIAN + COUNTRY
ECHO



Additional Program Updates

IHS Alzheimer's Program



Upcoming Summit

IHS
CLINICAL AND COMMUNITY WORKFORCE
SUMMIT

DENVER, CO • MARCH 10TH-12TH 2026

ALZHEIMER'S & ELDER CARE
KNOWLEDGE, COMPASSION, AND COMMUNITY AT WORK

IHS ALZHEIMER'S PROGRAM

Outreach & Awareness

Connect with us!



- Website - www.ihs.gov/alzheimers
- Elder Health Listserv - <https://bit.ly/3SarALn>
- Biweekly Newsletter - <https://bit.ly/3SarALn>
- Contact Us - IHSElderHealth@ihs.gov



Visit our website!



Sign up for our Listserv!



Community Stories: Detecting Dementia

Nimiipuu Health





AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



An Update from AHRQ

**Kevin Chaney, MGS
Senior Advisor
Agency for Healthcare Research and Quality
Advisory Council on Alzheimer's Research, Care, and Services
February 9th, 2026**

Agenda



- AHRQ Background
 - ▶ Mission
 - ▶ Leadership
 - ▶ Research Priorities
 - ▶ Improving Health Outcomes for the American People
- Recent Work in Support of ADRD

Mission



Enhancing the quality, appropriateness, and effectiveness of health services and access to such services, through scientific research and the promotion of improvements in clinical and health system practices, including the prevention of diseases and other health conditions.

AHRQ...Improving health outcomes for the American people.

www.ahrq.gov

Leadership



**President
Donald J. Trump**



**Secretary
Robert F. Kennedy, Jr.**



**Director, AHRQ
Roger D. Klein, MD, JD**

Research Priorities



- **Affordability**
 - ▶ Drug rebates
 - ▶ Hospital price transparency
 - ▶ Inappropriate services
- **Patient Safety & Quality**
 - ▶ Medical errors, medication safety, diagnosis improvement, performance measures
- **Effective & Appropriate Care**
 - ▶ Antibiotic stewardship
 - ▶ Overmedication of children
 - ▶ Evidence-based care for pediatric gender dysphoria
- **Digital Health & Innovation**
 - ▶ Telehealth optimization
 - ▶ Digital health tools
 - ▶ Artificial intelligence in health services research
- **Data, Methods & Scientific Integrity**
 - ▶ Real-world data platform
 - ▶ Replication & reproducibility
 - ▶ Innovative and rapid study methods
- **Chronic & Emerging Conditions**
 - ▶ Long COVID
 - ▶ Autism
 - ▶ Nutrition and chronic disease prevention
- **Health Outcomes**
 - ▶ Solution-oriented disparities research
 - ▶ Scientifically valid, measurable health outcomes
- **Research Workforce**
 - ▶ Training future health services researchers

<https://www.ahrq.gov/cpi/about/index.html#priorities>

Improving Health Outcomes for the American People



- **Generating scientific evidence and actionable knowledge:** Funding health services research to understand how care is delivered and how it can be delivered better (cost, quality, safety, value)
- **Moving evidence into practice:** Developing tools, trainings, resources, and (non-regulatory, non-punitive) assistance
- **Monitoring and feedback:** Measurement, data, analytics, and reporting for state and federal policymaking

RECENT WORK IN SUPPORT OF ADRD

Supporting Person-Centered Care for People with Multiple Chronic Conditions



- AHRQ is supporting person-centered care planning (PCCP) to improve care for people with multiple chronic conditions, including individuals living with dementia.
- Through the ACTION IV Network, AHRQ is identified practical strategies to integrate PCCP into routine clinical practice.
- This work brought together experts, partners, and care delivery stakeholders to support implementation, scaling, and spread.

<https://www.ahrq.gov/patient-safety/settings/long-term-care/resource/multichronic/mcc.html>

Action Network Findings: Advancing PCCP



- **Why PCCP Matters**
 - ▶ Supports the quintuple aim
- **Key Implementation Challenges**
 - ▶ Limited time and workforce capacity
 - ▶ Misaligned funding and measurement
 - ▶ Training gaps and fatigue from care transformation
- **What Works**
 - ▶ Leadership and clinician buy-in supported by a clear business case
 - ▶ Team-based training and partnerships with professional organizations
 - ▶ Digital tools to support information sharing and care coordination
 - ▶ Community partnerships to address health-related social needs
 - ▶ Use of implementation science to tailor PCCP to local context

<https://www.ahrq.gov/sites/default/files/wysiwyg/mcc/pccp4p/pccp4p-learningcollab.pdf>

Advancing Digital Health Innovations for Aging Populations



- AHRQ is advancing research and dissemination of digital health innovations that support healthy aging and risk-factor management for older adults.
- In 2025, AHRQ hosted a national webinar, [*Prepping for the Future: Digital Solutions for Aging Populations*](#), highlighting AHRQ-funded research.
- Featured innovations included:
 - ▶ Older adult–friendly digital health design principles
 - ▶ Telehealth approaches to support adherence and self-management
 - ▶ Platforms integrating patient-generated data into clinical decision-making
- These strategies strengthen system-level capacity to support risk reduction, well-being, and chronic condition management associated with ADRD.

<https://digital.ahrq.gov/national-webinars/prepping-future-digital-solutions-aging-populations>

Evidence Review on Menopausal Symptoms and Cognitive Outcomes



- AHRQ examined the relationship between management of menopausal symptoms and dementia risk.
- In 2025, AHRQ's Evidence-based Practice Center (EPC) Program completed a peer-reviewed draft systematic review to inform an NIH Pathways to Prevention workshop.
- The review assessed benefits and harms of pharmacologic treatments for menopausal symptoms, including outcomes related to Alzheimer's disease, other dementias, and cognitive decline.
- To date, the review found no evidence of harm from menopausal symptom treatments with respect to Alzheimer's disease or cognitive decline.

<https://effectivehealthcare.ahrq.gov/products/menopausal-symptoms/protocol>

Improving Management of Chronic Conditions in People Living with Dementia



- AHRQ supported research examining physiological variation in adults with Alzheimer's disease and related dementias (AD/ADRD).
- The study identified seasonal fluctuations in key metabolic and immune biomarkers, with differences observed by age and gender.
- These findings support more accurate interpretation of laboratory results in clinical care.
- Improved understanding of physiological variation can enhance diagnosis and management of chronic conditions that commonly complicate dementia care.

<https://pubmed.ncbi.nlm.nih.gov/40417579/>

Updating Clinical Guidelines for Adults with Down Syndrome Related to ADRD



- AHRQ is completing a systematic review, *Medical Care for Adults with Down Syndrome*.
- The review evaluates treatments for conditions common in adulthood, including ADRD.
- ADRD represents the largest body of evidence reviewed, reflecting the high prevalence of dementia in this population at older ages.
- While individual interventions were supported by limited studies, several promising pharmacologic and exercise-based approaches were identified.
- The report, sponsored by PCORI in partnership with the Global Down Syndrome Foundation, is expected in early 2026 and will inform updated clinical guidelines.

<https://effectivehealthcare.ahrq.gov/products/care-adults-down-syndrome/protocol>

Contact Info



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ASPE's Role & Progress



Helen Lamont, PhD

Director, Division of Disability, & Aging Policy
U.S. Department of Health and Human Services



OFFICE OF BEHAVIORAL HEALTH,
DISABILITY, AND AGING POLICY

What is ASPE?

Office of the Assistant Secretary for Planning & Evaluation

*The **Assistant Secretary for Planning and Evaluation (ASPE)** advises the Secretary of the Department of Health and Human Services on policy development in health, disability, human services, data, and science; and provides advice and analysis on economic policy. The **ASPE leads special initiatives**; coordinates the Department's evaluation, research, and demonstration activities; and **manages cross-Department planning activities** such as strategic planning, legislative planning, and review of regulations. Integral to this role, **the ASPE conducts research and evaluation studies; develops policy analyses; and estimates the cost and benefits of policy alternatives under consideration by the Department or Congress.***



ASPE
ASSISTANT SECRETARY FOR
PLANNING AND EVALUATION

OFFICE OF BEHAVIORAL HEALTH,
DISABILITY, AND AGING POLICY

Office of Behavioral Health, Disability, & Aging Policy



- **Mission:** Support the independence, productivity, health and well-being, and long-term care needs of people with disabilities, older adults, and people with mental and substance use disorders.
- **Three divisions:**
 - Behavioral Health Policy
 - Disability and Aging Policy
 - Long-Term Services and Supports Policy



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OFFICE OF BEHAVIORAL HEALTH,
DISABILITY, AND AGING POLICY

Approach

Study, track, and analyze policy issues in behavioral health, disability, aging, and long-term services and supports policy to provide expertise to the Secretary and HHS policymakers

Through data infrastructure development, policy research and evaluation that fills key gaps, maintaining key relationships and collaborations, reading and following ongoing grey and academic research, maximizing cross-topic collaborations

We Identify:

Emerging problems and policy issues

Policy options to address problems

Strengths and weaknesses of each option

Key considerations for policymakers



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DISABILITY, AND AGING POLICY

Examples of ASPE Policy Research on ADRD

- [A Profile of Older Adults with Dementia and their Caregivers Issue Brief](#) (January 2019)
- [Functional Trajectories at the End of Life for Individuals with Dementia: Final Report](#) (February 2020)
- [Implications of Alternative Methods of Identifying Populations with Dementia Issue Brief](#) (February 2020)
- [Bridging Healthcare and Social Services for People Living with Dementia and Their Caregivers](#) (December 2024)
- [Use of Inpatient Psychiatric Facilities by Medicare Beneficiaries with Dementia](#) (December 2024)



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DISABILITY, AND AGING POLICY

2026 ASPE ADRD Policy Research

- [Approaches to Dementia Care in Special Needs Plans](#) (January 2026)
- [Medicare Hospice Use Patterns Among Patients With Alzheimer's Disease or Related Dementias Compared to Those With Other Terminal Diagnoses](#) (January 2026)



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LTSS and BH-Related ASPE Research with Implications for NAPA

- [Long-Term Services and Supports Reform Options](#)
- [Use of Medicare-Covered Telerehabilitation in Nursing Homes for PT/OT/SLP Services](#)
- [Review of Federal and State Caregiver Tax Credit Laws and Bills](#)
- [Rebalancing of Medicaid-Funded Long-Term Services and Supports, 2016-2019](#)

- [Innovative 988 Crisis Service Systems for Children, Youth, and People with Disabilities](#)
- [Behavioral Health Prevalence, Utilization, and Spending Among Older Adult Medicare Beneficiaries: A Chartbook](#)



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Thank you!

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<https://aspe.hhs.gov/about/offices/bhdap>

U.S. Department of Health and Human Services



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