

# Health System-based Models of Dementia Care:

## *Characteristics, Challenges & Opportunities*

Zaldy S. Tan, MD, MPH  
Medical Director, UCLA Alzheimer's and Dementia Care Program  
Professor, David Geffen School of Medicine  
University of California Los Angeles



#DementiaCareSummit

---

## Health System-based Dementia Care Models: Characteristics

- Administered and/or financed by health care provider organization
- Includes medical management of dementia
- Key personnel includes nurse or nurse-practitioner +/- physician employed by health system
- Supplemental referrals to community-based organizations / resources
- Coordination of community-based services (variable)
- Utilizes electronic health record system

---

## Indiana University Aging Brain Center (ABC)

- Hospital-based covering Indianapolis and Lafayette, Indiana
- Care management focused on improving self-management, problem-solving and coping skills
- Targeted conditions
  - Dementia (26%), dementia & depression (17%) and depression (57%)
- Team
  - 1. Care coordinator Assistants (non-licensed): primary liaison between care team and patients/caregivers
  - 2. Expert Team: Nurses/ Social workers/Nurse Practitioner/ Geriatrician/ Social Psychologist and GeroPsychiatrist
- Contact – In-person / Telephone
- Population – Medicare/Medicaid

---

## UCLA Alzheimer's and Dementia Care Program (ADC)

- Health system based with 4 outpatient clinical sites in Los Angeles and Ventura counties
- Care management focused on medical and psychosocial issues, caregiver training/support
- Targeted condition – Dementia
- Team – Dementia Care Managers (NPs), Dementia Care Manager Assistants (non-licensed) , Geriatrician, Partnering MD, Community Based Organizations
- Contact: In-person / Telephone / Electronic communication
- Population – Medicare (FFS and MA) & Commercial for under 65

---

## The Veterans Affairs Partners in Dementia Care Program (PDC)

- VA Medical Centers and Alzheimer's Association Chapters
  - Boston, Houston, Providence, Oklahoma City and Beaumont
- Targeted condition – Dementia
- Team - relationship between a healthcare organization (VA) and a community based organization (Alzheimer's Association)
  - Care Coordinators (one at the VA and one at the Alz Assoc)
  - Administrative assistant
- Contact – telephone / electronic communication
- Population – Veterans

---

## Evaluation

- VA PDC showed reduced number of hospital admissions and ED visits
- Indiana ABC and UCLA ADC reduced caregiver stress
- UCLA ADC demonstrated reduced nursing home placement and cost savings
- Limitations: No randomized controlled trials

---

## Other Health System-based DC Models

- Alzheimer's Disease Coordinated Care for San Diego Seniors (ACCESS)
  - Provider education and communication protocols for SW care managers
  - Higher rates of guideline-adherent care and higher cholinesterase inhibitor use
  - Caregivers had higher care satisfaction, better self-efficacy, caregiving mastery, & social support and fewer reported unmet needs for behavior problem assistance
- Care Ecosystem (UCSF)
  - Telephone-based supportive care intervention delivered by 'Care Team Navigator' (CTN)
  - CTN triage complex medical or social issues to nurse, social worker or pharmacist

---

## Opportunities for Future Research

1. Study ways to enhance efficiency and cost-effectiveness of care management (PCORI, CMS, Foundations)
2. Identify essential components of effective programs (NIA)
3. Refine health-system / CBO relationships (CMS, ACL)
  - HIPAA, IT, communication, payments, liability issues
4. Enhance workforce training and development (HRSA)
5. Provide informal and formal caregiver training and support (HRSA, CMS)