Clinical Care Subcommittee

Non- Federal Members:
Laurel Coleman, Eric Hall, Helen Matheny

Federal Representatives:
Helen Lamont, Sheri Ling, Donald Moulds, Joan Weiss

January 17, 2010

Process

• Discussion of top level goal and implementation steps
• Full recommendations include a situation analysis, recommendation rationale, responsible agencies and measures of success
• Conference calls on Nov 10 and Jan 12, with email-based discussions
• Informal literature review and consultations with additional experts
• Merge with federal workgroup product.

NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.
Overall Goal

- Individuals with Alzheimer’s disease have the disease detected and diagnosed at an early stage, receive care planning, and have access to coordinated and high quality health care throughout the course of the disease.

Awareness and Detection

- Launch a nationwide public awareness campaign to increase awareness and to promote early detection of Alzheimer’s disease.
  - Link the public to diagnostic and treatment services
  - Identify, develop, and disseminate appropriate assessment tools for use in the Medicare Annual Wellness Visit

NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.
Diagnosis and Care Planning

- Redesign Medicare coverage and physician reimbursement to encourage diagnosis of Alzheimer’s disease and to provide care planning to diagnosed individuals and their caregivers.
- Link the public to diagnostic and treatment services
- Identify, develop, and disseminate appropriate assessment tools for use in the Medicare Annual Wellness Visit
- Enhance assistance for people with AD and their caregivers to plan for care needs.
- Educate physicians about accessing long term care
- Identify / develop and disseminate dementia care guidelines / protocols / pathways.

Issues and considerations for discussion

Quality Indicators

- Develop quality indicators for the care and treatment of individuals with Alzheimer’s.
- Identify / develop dementia care guidelines / protocols / pathways to anchor quality indicators.
- Curricula for workforce / caregivers to support quality of care

Issues and considerations for discussion

3 | NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.
Medical Home – Primary Care

• Provide improving medical management for individuals with Alzheimer’s disease, including management of co-existing medical conditions and coordination with family and community care providers in all settings. (in-home care, long-term care, and inpatient hospital care) through robust, patient centered medical home capacity in primary care.

• Review evidence on effectiveness of care coordination models

• Implement and evaluate care coordination models

• Implement new care models to support care transitions / AD specific toolkit for care transitions

• Identify / develop and disseminate dementia care guidelines / protocols / pathways.

Care Throughout the Stages: Palliative Care

• Form a blue ribbon panel of experts to recommend models of palliative care for people with advanced dementia, including eligibility criteria and financing mechanisms, to remove barriers to access to palliative care.

• Test, evaluate, and implement these recommendations (e.g. Center for Medicare and Medicaid Innovation (CMMI))

NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.
Care Throughout the Stages: Caregiver Support

• Improve and expand the National Family Caregiver Support Program and other evidence-based caregiver support models.

• Enhance assistance for people with AD and their caregivers to plan for care needs.

Hospitalization

• Create a specific grant round of pilot projects through CMMI to reduce potentially preventable ER visits and hospitalizations for individuals with Alzheimer’s disease.

• Public-private partnership to develop and evaluate ways to improve hospital care for people with Alzheimer’s and other dementias, including training approaches and proposed quality measures.

• Implement and evaluate new care models to support effective care transitions for patients with Alzheimer’s disease.

• Develop an AD—specific toolkit on care transitions

5 NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.
Workforce

- Expand funding and incentives for individuals to pursue careers in geriatric specialties.
- Strengthen direct care workforce
- Strengthen State aging workforce
- Support state and local policies

Issues and considerations for discussion

Special Populations

Implement interventions specific to populations with disparities:
- prevalence
- access to services
- impact

Issues and considerations for discussion

NOTE: Any mention of recommendations in these slides was for subcommittee discussion. These slides do not reflect formal Advisory Council recommendations.