



Administration for Community Living

ACL Response to Covid 19

<https://acl.gov/COVID-19>

ACL webpage to provide information in support of older adults and people with disabilities.



Coronavirus Disease 2019 (COVID-19)

As guidance is updated, ACL will post or link to it on this page and share it through the ACL Updates email service.

<https://public.govdelivery.com/accounts/USACL/subscriber/new>

If you need help finding services in your community, visit the Eldercare Locator web page or call 1-800-677-1116. <https://eldercare.acl.gov/>

2020 Alzheimer's Disease Programs Initiative Grant Program

Grants to States and Communities (HHS-2020-ACL-AOA-ADPI-0379)

- Benjamin Rose Institute (OH)
- Elder Services of the Merrimack Valley (MA)
- Hospice of the Valley (AZ)
- Lower Cape Fear Hospice, Inc. (NC)
- LTSC Community Development Corporation (CA)
- Memorial Hospital (NH)
- Minnesota Department Of Human Services (MN)
- Missoula Aging Services (MT)
- Montana Department of Public Health and Human Services (MT)
- Omid Multicultural Institute for Development (CA)
- Pima Council on Aging (AZ)
- The Trustees of Indiana University (IN)

Dementia Capability in Indian Country (HHS-2020-ACL-AOA-ADPI-0418)

- Absentee Shawnee Tribe of Oklahoma (OK)
- Aleutian Pribilof Islands Association, Inc. (AK)
- Great Lakes Inter-Tribal Council (WI)
- Spirit Lake Tribe (ND)

RAISE Family Caregiving Advisory Council

The RAISE Council held their fourth meeting on July 16, 2020. A recording of the meeting, which was open to the public, will be posted at <https://acl.gov/programs/support-caregivers/raise-family-caregiving-advisory-council>.

National Alzheimer's and Dementia Resource Center (NADRC)

<https://nadrc.acl.gov/>

UNDER DEVELOPMENT

Quick Guide to Billing Codes for Dementia Services

Designed to support the many organizations trying to obtain reimbursement through fee-for-service Medicare and other third-party payers. This guide should be available in early Fall of 2020 on the NADRC website. ACL will distribute information on the launch and availability of the guide very broadly.

COVID-19 and Dementia Series:

- **October 19, 2020**, 2-3 p.m. ET--Providing in-person services and supports to people living with dementia (PLWD) during COVID-19- (Jeff Klein, Nevada Senior Services; Victoria Jump, Ventura County Area Agency on Aging) 282 participants
- **November 2, 2020**, 2-3 p.m. ET--Using technology to provide services to PLWD and their caregivers during COVID-19 (Vanessa Anciani, United Community Center, Sharon Cantrell, Amazing Place)
- **November 19, 2020**, 2-3 p.m. ET--Maintaining Services and Supports for People Living with Dementia and their Caregivers During COVID-19 (Christine Jensen, Riverside Center for Excellence in Aging and Lifelong Health, Maria Ordonez, Florida Atlantic University)

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2020 NADRC Webinar Series

(Recordings of all webinars are located on the NADRC webpage)

- **January 28, 2020**--Finding the Right Fit: Choosing Dementia Caregiving Programs for your Organization and Community, Presenters: David Bass and Heather Menne (518 participants)
- **February 12, 2020**--Occupational Therapy and Social Work: Offering community-based approaches to support PLWD and their caregivers, Presenters: Stephani Shivers and Jane Gruner (556 participants)
- **April 8, 2020**--LGBTQ Elders and Dementia, Presenters: Awaiting Confirmation (903 participants)

- **May 19, 2020**--Addressing Dementia in Indian Country: Where we are and What comes next, Presenters: Mike Splaine and Tribal Elder (480 participants)
- **August 27, 2020**--Navigating the World of Assistive Technology for People Living with Dementia. Presenters: Carolyn Phillips, Rachael Wilson

Office of Long-Term Ombudsman Programs (OLTCOP)

ACL's OLTCOP provided training, technical assistance, to help states' Long-Term Care Ombudsman (LTCO) programs adapt to specific COVID-19 service provision to address the needs of individuals living with dementia in long-term care facilities.

- Early in the pandemic Ombudsman programs worked to access residents and their families through a variety of means: phone, letter, virtual, and starting hosting virtual family meetings to support and answer questions
- As the pandemic wore on and the social isolation was beginning to take its toll; Ombudsman programs advocated for "essential visitors" (i.e., designated close family to be allowed into the facility to provide direct support to their family). This was a concern that they heard from many persons who cared for loved ones with dementia.
- In September, Centers for Medicare & Medicaid Services (CMS) revised their visitation guidance to allow for in-person visits in nursing homes, recognizing the need to reduce the harmful effects of social isolation. Ombudsman programs are beginning to conduct in facility visits and continue to provide complaint resolution services to support the health safety, welfare and rights of persons in long-term care facility settings.



Office of the Assistant Secretary for Planning and Evaluation (ASPE)

We are proud to announce a new quarterly newsletter with recent Office of the Assistant Secretary for Planning and Evaluation (ASPE), Office of Behavioral Health, Disability and Aging Policy (BHDAP) publications on topics including dementia, aging, disability, long-term services and supports (LTSS), and behavioral health. Included here is a preview of the inaugural issue -- **subscribe** to receive full issues and stay up-to-date on our latest policy research.

BHDAP, formerly known as the Office of Disability, Aging, and Long-Term Care Policy (DALTCP) in ASPE, is the home of the National Alzheimer's Project Act. We conduct research and advise the Secretary on policies and programs that support the independence, productivity, health and well-being of people with disabilities, people with dementia, people with behavioral health conditions, and older adults including those with long-term care needs.

To subscribe please email: LISTSERV@LIST.NIH.GOV with
"SUBSCRIBE ASPE-BHDAP your name"
in the body of the message (i.e., subscribe ASPE-BHDAP John Doe).

Since July, ASPE has released a number of reports on dementia, caregiving, and long-term care.

Advance Care Planning Among Medicare Fee-For Service Beneficiaries and Practitioners

This study found low but increasing use of advance care planning (ACP) billing codes among Medicare fee-for-service beneficiaries and practitioners, with variation by practitioner type, beneficiary mortality, place of service, and state. Although barriers to ACP remain, we identified a wide variety of other interventions facilitating ACP, including education and training programs.

Research Brief: <https://aspe.hhs.gov/basic-report/advance-care-planning-among-medicare-fee-service-beneficiaries-and-practitioners-research-brief>

Report: <https://aspe.hhs.gov/basic-report/advance-care-planning-among-medicare-fee-service-beneficiaries-and-practitioners-final-report>

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Changes in Home Health Care Use in Medicare Advantage Compared to Traditional Medicare, 2011-2016

Prior work has shown that home health providers strategically provided therapy visits and recertified episodes in order to maximize payment under traditional Medicare (TM). However, Medicare Advantage (MA) has more flexibility in terms of how they pay for home health care. Using a mixed-methods study, we found that overall, MA enrollees were less likely to use home health care than TM enrollees. We also found that MA home health users were less likely to have a hospital admission during their home health spell.

Report: <https://aspe.hhs.gov/basic-report/changes-home-health-care-use-medicare-advantage-compared-traditional-medicare-2011-2016>

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COVID-19 Intensifies Nursing Home Workforce Challenges

Recruiting and retaining quality direct care staff has long been a challenge in nursing homes, and these problems have only been amplified by the COVID-19 pandemic. This report examines the impact of the COVID-19 pandemic on nursing homes, particularly on the workforce, and identifies new federal, state, and facility-level policies and practices that have been implemented to address challenges within them.

Report: <https://aspe.hhs.gov/basic-report/covid-19-intensifies-nursing-home-workforce-challenges>

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The fiscal year (FY) 2020 Coronavirus Aid, Relief and Economic Security Act, P.L. 116-136, (CARES Act) appropriated funds to the Public Health and Social Services Emergency Fund to prevent, prepare for, and respond to coronavirus, including through telehealth access and infrastructure. The Health Resources and Services Administration, using CARES Act funding, is supporting the Geriatrics Workforce Enhancement Program (GWEP) in preventing, preparing for, and responding to coronavirus disease 2019 (COVID-19). GWEP grant recipients may use funding to:

- Educate and train students and clinicians on providing telehealth-enabled COVID-19 referral for screening and testing , case management and outpatient care; and/or
- Maintain primary care functionality away from physical sites, especially for COVID-19 positive, quarantined, elderly and individuals at a higher risk of severe illness.

Information at: <https://www.congress.gov/116/bills/hr748/BILLS-116hr748enr.pdf>



The Cherokee Indian Hospital Authority Outpatient Services and Tsali Care Center, health programs of the Eastern Band Cherokee Indians, became the first Tribal or Indian Health Service (IHS) health program to be recognized as Committed to Care Excellence as an Age-Friendly Health System. To be recognized in this way, the Outpatient Services and the Tsali Care Center, the Tribally-operated Skilled Nursing Facility, demonstrated through data it was improving elder health through attention to the 4 M's of an Age-Friendly Health System: Medication, Mentation, Mobility, and What Matters to older adults. Age-Friendly Health Systems is an initiative of the John A. Hartford Foundation and the Institute for Healthcare Improvement.

Information at: <http://www.ihl.org/Engage/Initiatives/Age-Friendly-Health-Systems/Pages/default.aspx>

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Dr. Blythe Winchester, IHS Chief Clinical Consultant in Geriatrics and Palliative Care, presented at the National Indian Health Board Brain Health Action Institute for Tribal Nations, originally scheduled for March 2020 and rescheduled as a virtual conference in September 2020.

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HIS's Dr. Bruce Finke co-presented with ACL (Cynthia LaCounte) and Dr. Judith GoForth Parker (Chickasaw Nation), Chair of CMS's TTAG LTC Subcommittee) on the CMS-sponsored Title VI Advisory Council, with a major emphasis on role of Title VI funded Senior Centers in prevention through risk-factor modification, early recognition, caregiver support, and management of Alzheimer's disease and related dementias (AD/ADRD).

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IHS continues to participate in the RAISE Act Family Caregiver Advisory Council--with significant overlap with the NAPA work.



Medicaid Home and Community-Based Services (HCBS) Quality Request for Information

- CMS has released a request for information (RFI) to solicit public feedback on its efforts to track the performance of Medicaid-funded HCBS as part of efforts to strengthen HCBS quality measurement, reporting, and improvement activities and to ensure that Medicaid beneficiaries receive high quality and cost-effective services.
- The RFI seeks public input on the purpose and organization of the recommended measure set, the criteria used to select measures, and a preliminary draft set of measures for assessing the quality and outcomes of Medicaid-funded HCBS.
- **The RFI is open for comment until November 18.**

Information at: <https://www.medicare.gov/medicaid/quality-of-care/downloads/rfi-hcbs-recommended-measure-set.pdf>

(Strategy 2.D)

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Money Follows the Person (MFP)

- The MFP program seeks to increase the use of HCBS and reduce the use of institutionally-based services; eliminate barriers in state law, state Medicaid plans, and state budgets that restrict the use of Medicaid funds to enable beneficiaries to receive support for appropriate and necessary care in chosen settings; strengthen Medicaid provide HCBS to people who choose to transition out of institutions; and add procedures to enhance quality assurance in HCBS.
- In September, CMS announced new federal funding for the 33 states currently participating in Medicaid's MFP program, which is expected to "jump start" efforts to transition people out of nursing homes and other institutions into community settings.
- MFP state grantees transitioned 101,540 Medicaid beneficiaries from institutional care to HCBS since the program started in 2007 but in 2019 only 4,173 Medicaid beneficiaries were transitioned--a 46% decrease from 2018.
- Each state is eligible to receive up to \$5 million in supplemental funding for planning and capacity building activities to accelerate long-term care system transformation.

Information at: <https://www.medicare.gov/medicaid/long-term-services-supports/money-follows-person/index.html>

List of grantees at: <https://www.medicare.gov/medicaid/long-term-services-supports/money-follows-person/list-of-money-follows-person-grantees/index.html>

(Strategy 2.F)

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Care Compare Tool Streamlines Information-Gathering

- In September, CMS re-designed eight existing CMS health care compare tools to provide a single user-friendly interface that patients, residents, consumers and caregivers can use to make more informed decisions about health care based on cost, quality of care, volume of services, and other data.
- With one click individuals can find information that is easy to understand about doctors, hospitals, nursing homes, and other health care services, instead of searching through multiple tools.

Information at: <https://www.medicare.gov/care-compare/>

(Strategy 2.F)

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CMS Issues LTSS Rebalancing Toolkit

- In November, CMS issued a *Long-term Services and Supports (LTSS) Rebalancing Toolkit* to support states to expand and enhance HCBS and rebalance and recalibrate LTSS from institutional to community-based systems.
- The toolkit has four modules that address:
 - State strategies to increase the share of LTSS provided in community-based settings.
 - Tools designed to assist states with policy and programmatic strategies.
 - Case studies of innovative programs and creative ways states are leveraging available federal authorities to transform LTSS systems.
 - Links to relevant resources.

Information at: <https://www.medicaid.gov/medicaid/long-term-services-supports/downloads/ltss-rebalancing-toolkit.pdf>

(Strategy 2.G)

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Medicare Current Beneficiary Survey (MCBS) Supplement Illuminates COVID-19 Impact

- In October, CMS issued new data from a supplement to the MCBS, a nationally representative, cross-sectional telephone survey of 11,114 Medicare beneficiaries administered from June-July 2020.
- 21% of Medicare beneficiaries reported forgoing non-COVID-19 care due to the pandemic, and 98% have taken preventative measures to help keep themselves safe from contracting the virus.
- Nearly all beneficiaries surveyed cited the use of regular handwashing/hand sanitizer use (98%), followed by social distancing and wearing facemasks (each at 93%).

Information at: <https://www.cms.gov/research-statistics-data-systems/mcbs-public-use-file/medicare-current-beneficiary-survey-covid-19-data-snapshot>

(Strategy 2.H)

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Nursing Home Visitation

- In September, CMS issued revised guidance providing detailed recommendations on ways nursing homes can more safely facilitate visitation during the COVID-19 pandemic.
- The revised guidance can assist nursing homes to facilitate visitation in both indoor and outdoor settings and in compassionate care situations, and also outlines certain core principles and promising practices to reduce the risk of COVID-19 transmission during visits.

Information at: <https://www.cms.gov/medicareprovider-enrollment-and-certificationsurveycertificationgeninfopolicy-and-memos-states-and/nursing-home-visitation-covid-19>

(Strategy 3.D)

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Nursing Home Resource Center

- CMS launched the Center in November to serve as a centralized hub for the latest information, guidance and data on nursing homes important to facilities, providers, residents, and their families and caregivers.
- Previously people seeking information on nursing homes needed to navigate to different webpages but now have quick access to up-to-date information and resources, including those COVID-19 related.
- The Center consolidates nursing home information, guidance, and resources into a user-friendly, one-stop-shop that is easily navigable.
- People can efficiently see all facility inspection reports and data--including COVID-19 information.

Information at: <https://www.cms.gov/nursing-homes>

(Strategy 3.D)



National Institutes of Health

National Institute on Aging (NIA) Updates

NIA Division of Behavioral and Social Research Awards COVID-19-related Supplemental Awards

NIA's Division of Behavioral and Social Research grantees have received over 30 administrative supplement or competing revision awards in FY2020 that leverage ongoing studies to investigate social and behavioral research questions relevant to the novel coronavirus pandemic. Projects include understanding the prevalence and risk of COVID-19 in older adults and among persons living with AD/ADRD, the impact of social distancing and stay-at-home orders on AD/ADRD care, and COVID-19 testing in nursing facilities. Two projects were supported under the Rapid Acceleration of Diagnostics Underserved Populations: one employing behavioral economics for antibody testing in disadvantaged communities (PI: Jason Doctor) and the other on improving COVID-19 testing in skilled nursing facilities (PI: Vincent Mor).

Information at: <https://www.nih.gov/research-training/medical-research-initiatives/radx/funding>

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NIA Division of Neuroscience Activities

NIA's Division of Neuroscience funded 55 COVID-related administrative supplements and competitive revision applications in FY2020, with most relating to or have impact on AD research. Funded research spans basic science, genetics, population (including diverse groups), cognitive, translation and clinical studies. Projects include:

- Action of Syndrome Coronavirus 2 (SARS-CoV-2) in Human Brain Cultures
- A Multipronged Interrogation of Large-Scale Omics Data to Reveal COVID-19 Pathways
- Neurotropic Viral Infection in CNS Aging and Alzheimer's Disease COVID-19 Supplement
- Sequelae of SARS-CoV-2 Infection in Alzheimer's Disease
- Repurposing of Universal and Immunogenic MultiTEP Platform Designed for AD to Develop SARS-CoV-2 Multiepitope Vaccine
- Conserved Transcriptional Response to Adversity and COVID-19: Role of Pre-existing Neighborhood Characteristics and Cognitive Impairment
- Social Isolation and Loneliness due to COVID-19: Effect on Cognitive, Physical, and Mental Health in Older Adults in the SAGES Study
- Social Distancing and Mental Health in Diverse Aging Populations
- COVID-19 Effects on the Mental and Physical Health of AAPI Survey Study (COMPASS)
- COVID-19, Social Distancing, and Cognitive Impairment in 1Florida ADRC participants

The following funding opportunity announcements (FOAs) were recently released with involvement of staff from the NIA Division of Neuroscience:

- **RFA-OD-20-022** -- Emergency Awards: Chemosensory Testing as a COVID-19 Screening Tool. This emergency FOA from the National Institutes of Health (NIH) provides an expedited funding mechanism as part of the Rapid Acceleration of Diagnostics-Radical (RADx-rad) initiative. The goal of the RADx-rad initiative is to encourage the development of novel, non-traditional approaches to identify the current SARS-CoV-2 virus or other markers of the COVID-19 disease that can be used in future outbreaks of COVID-19 and that could be applicable to other, as yet unknown, viruses. Specifically, the goal of this FOA is to solicit applications to enhance the utility of chemosensory testing as a COVID-19 screening tool by using objective tests to examine the onset and prognostic value of chemosensory loss and to encourage the development and/or deployment of home-based and on-site chemosensory tests. The funding for this initiative is provided from the Paycheck Protection Program and Health Care Enhancement Act, 2020. (expired in 9/16/2020).

 - <https://grants.nih.gov/grants/guide/rfa-files/RFA-OD-20-022.html>
- **NOT-OD-20-129** -- Notice of Special Interest (NOSI) regarding the Availability of Urgent Competitive Revisions and Administrative Supplements for Research on Coronavirus Disease 2019 (COVID-19) in Individuals with Down Syndrome for the INCLUDE Project. This NOSI is issued to highlight the urgent need for research on Severe Acute Respiratory SARS-CoV-2 and Coronavirus Disease 2019 (COVID-19) in individuals with Down syndrome in conjunction with the INCLUDE (INvestigation of Co-occurring conditions across the Lifespan to Understand Down syndromE) Project. Because many people with Down syndrome are at increased risk of having co-occurring medical conditions, such as pulmonary disease, cardiac problems, obesity, diabetes, sleep apnea, and altered immune function that may predispose them to more severe infection with SARS-CoV-2, they may be particularly vulnerable to COVID-19 complications. Combined with shared living situations, and reduced access to testing and treatment services due to disparities in provision of resources, the impact of COVID-19 infection in people with Down syndrome is likely to be elevated. The overarching goal of this NOSI is to improve understanding and treatment of COVID-19 infection in individuals with Down syndrome and reduce COVID-19 associated morbidity and mortality for this population, which may be disproportionately affected by, have higher infection rates of, and/or be at elevated risk for adverse outcomes from contracting the virus.

 - <https://grants.nih.gov/grants/guide/notice-files/NOT-OD-20-129.html>
- **NOT-AG-20-022** -- NOSI: NIA Availability of Administrative Supplements and Revision Supplements on Coronavirus Disease 2019 (COVID-19). NIA is issuing this NOSI to highlight the urgent need for research on Coronavirus Disease 2019 (COVID-19). The mission of NIA is to support and conduct genetic, biological, clinical, behavioral, social, and economic research on aging. This NOSI supports mission critical areas of research for NIA as they relate to the COVID-19 pandemic.

 - <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-022.html>
- **NOT-AG-20-039** -- NOSI: Fundamental and Translational Research on Decision Making in Aging and/or Alzheimer's Disease and Alzheimer's Disease Related Dementias. This NOSI underscores NIA's continued commitment to research that seeks to better characterize the affective, cognitive, social, and motivational parameters of impaired and intact decision making in adults who are aging normally, as well as in individuals with mild cognitive impairment (MCI), AD/ADRD. Research is sought that characterizes the extent to which behavioral, psychological, and neural processes involved in decision

making are differentially impacted in normal aging, MCI, and AD/ADRD. Investigations that target the influence of social factors on decision making or other factors that render older adults (with or without cognitive impairment) vulnerable to financial exploitation and other forms of mistreatment and abuse are of particular interest. This NOSI also encourages preclinical and applied research on decision making that may facilitate the design of decision-supportive interventions for midlife and older adults with and without MCI and AD/ADRD. Specific opportunities include the development of decision-support interventions to leverage cognitive, emotional, social, and motivational strengths of these populations; tools to assess decisional capacities; strategies for simplifying choices and offering better defaults; and the promotion of timely adoption of optimal delegation practices (e.g., power of attorney, living wills, etc.). The use of animal models to explore the neural basis of affective, cognitive, social, and motivational parameters as they relate to age-related changes in decision making is also invited.

- <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-039.html>

- **NOT-AG-20-040** -- NOSI: Basic and Translational Research on Affective, Motivational, and Social Function in Normative Aging and/or Alzheimer's Disease and Related Dementias (AD/ADRD). This NOSI is intended to underscore NIA's continued commitment to psychological and neuroscientific research on affective, motivational, and social functions in midlife and aging. NIA supports research to further clarify the changes in and trajectories of these processes in adults who are aging normally and/or in individuals with MCI, AD/ADRD. NIA also seeks to understand how changes in the structure and function of neurobiological and neuromodulatory systems mediate or moderate affective, motivational, and social behaviors and interact with other psychological functions, including cognition. NIA's goals are three-fold: (1) to advance understanding of normative maturational changes in affective, motivational, and social processes, their role in behavior and cognition, and their underlying integrative neural-behavioral mechanisms; (2) to elucidate how dysfunction in these processes might manifest in MCI and the early stages of AD/ADRD; and/or (3) to determine how dysfunction in these processes might account for any of the Behavioral and Psychological Symptoms of Dementia observed in AD/ADRD. Such studies may identify novel targets for preventative or therapeutic interventions to promote social, emotional, and cognitive well-being; facilitate adaptive function in aging; normalize social or emotional dysregulation; and/or strengthen social or emotional resilience at different stages of the life course and at different disease stages in AD/ADRD.

- <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-040.html>
- **NOT-AG-20-043** -- NOSI: Administrative Supplements for NIA-VA Mentored Physician-Scientist Award in Alzheimer's Disease and its Related Dementias (AD/ADRD). The purpose of this initiative is to increase the number of early stage physician-scientists in AD/ADRD research and improve patient care for veterans. To accomplish this goal, NIA and the U.S. Department of Veterans Affairs (VA) have created a two-part opportunity for early career VA physician-scientists to pair with both VA and NIA-funded mentors in the AD/ADRD field. This will also facilitate the development of a sustainable process for collaboration and address key barriers or challenges that often hinder communication, sharing of resources, and increased coordination between the VA and NIA.

- <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-043.html>
- **PAR-20-234** -- NIA Multi-site COVID-19 Related Clinical Trial Implementation Grant on Aging-Related Topics in at-risk Older Adult Populations (R01 Clinical Trial Required). This FOA invites applications for implementation of investigator-initiated multi-site clinical

trials (all phases or stages) of interventions focused on specific aging-related issues to reducing transmission, risk, morbidity, mortality, severity, or complications of Coronavirus Disease 2019 (COVID-19).

- <https://grants.nih.gov/grants/guide/pa-files/PA-20-234.html>
- <https://www.nia.nih.gov/research/dbsr/nih-stage-model-behavioral-intervention-development>

- **RFA-AG-21-029** -- Integrative Research to Understand the Impact of Sex Differences on the Molecular Determinants of AD Risk and Responsiveness to Treatment. This FOA invites applications that employ integrative experimental and analytical approaches engaging basic and translational/clinical research aimed at developing a comprehensive understanding of the impact of sex differences on the trajectories of brain aging and disease, phenotypes of AD/ADRD risk, individualized prevention, and responsiveness to pharmacologic and non-pharmacologic interventions.

- <https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-21-029.html>

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Alzheimers.gov Redesign

NIA is in the process of revamping Alzheimers.gov. The new website, coming in early 2021, will:

- Provide information on AD/ADRD care, research, and support.
- Link people with dementia, caregivers, health care professionals, and others to resources from across the Federal Government.
- Communicate the government's commitment to addressing AD/ADRD.
- Highlight clinical trials education and how to participate.

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Funding Announcements & Notices of Special Interest

NIA has published several additional funding opportunities; here are some key AD/ADRD announcements:

- **NOSI: Sex and Gender Differences in Alzheimer's Disease and Alzheimer's Disease-Related Dementias (AD/ADRD) (NOT-AG-20-038)**. This NOSI is intended to promote multidisciplinary research to clarify sex and gender differences in the risk, development, progression, diagnosis, and clinical presentation of AD/ADRD.
 - <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-038.html>
- **NOSI: Dementia Care Workforce for Those Living with Alzheimer's Disease and Alzheimer's Disease-Related Dementias (AD/ADRD) (NOT-AG-20-026)**. This NOSI is intended to promote behavioral and social research on the dementia care workforce and the impact on outcomes for persons living with AD/ADRD and their families. Broad areas of interest include: (1) how economic and policy factors drive the composition and quality of the dementia care workforce; (2) demographic and familial factors that influence demand for and supply of dementia care workers; (3) training and certification effects on quality and retention of dementia care workers; and (4) the development of data resources required to study these issues.
 - <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-026.html>

- **Notice to Specify High-Priority Research Topic for PAR-19-070 and PAR-19-071: Health Disparities and Alzheimer's Disease (NOT-AG-18-047).** There is a need to broaden the scope and improve the rigor of scientific investigations of AD/ADRD that consider health disparities. Race, ethnicity, socioeconomic status, and sex/gender may be multifactorial in their influence on AD and cognitive impairment and decline. Studies incorporating geographical, neighborhood, education, environmental, biological, social, behavioral, lifestyle and genetic factors need to be conducted with study populations that have robust demographic diversity. Also, studies that investigate determinants of population-level differences in AD/ADRD should be designed.
 - <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-18-047.html>
- To better understand the etiology of AD/ADRD and to distinguish its manifestation from changes associated with normal cognitive aging, NIA has invested in a range of approaches to elucidate and measure early psychological changes in the disease trajectory. Two NOSIs have been issued focused on changes in decision-making and emotional function. We also are sponsoring a major initiative to enhance our ability to detect cognitive change via mobile devices and use these tools to inform prevention and treatment strategies for maintaining cognitive health.
 - <https://grants.nih.gov/grants/guide/notice-files/NOT-AG-20-039.html>
 - <https://www.mobiletoolbox.org/>
- **NIA's MD-PhD Training Program in Alzheimer's Disease and Its Related Dementias and the Behavioral and Social Sciences (T32)** is designed to help strengthen the pipeline of physician-scientist leaders dedicated to using social and behavioral science approaches to addressing the nation's challenges posed by AD/ADRD. More information can be found on this current funding opportunity in the NIH Guide.
 - <https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-21-027.html>

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2021 Alzheimer's Disease Research Summit

Please save the date for the 2021 Alzheimer's Disease Research Summit planned for April 19-21, 2021. This will be a virtual meeting.

National Institute on Neurological Disorders and Stroke (NINDS) Updates

NINDS Open and Upcoming ADRD Funding Opportunities

Several recent funding opportunities responsive to the 2019 ADRD Summit have been released, including:

- **NOT-NS-21-001:** Administrative Supplements for Connecting Pre-mortem Clinical Information with Post-Mortem Brain Analysis in (LBD)

- Expiration date: June 29, 2021
- Focus: to increase the linkage of comprehensive pre-mortem clinical information with gold standard post-mortem diagnostic analysis in patients with LBD.
- <https://grants.nih.gov/grants/guide/notice-files/NOT-NS-21-001.html>
- **RFA-NS-21-003:** Center Without Walls for Molecular Mechanisms of Neurodegeneration in frontotemporal dementia (FTD)
 - Application due date: November 2, 2020
 - Focus: to continue support for interdisciplinary team science aimed at elucidating the molecular mechanisms underlying neurodegeneration in FTD, with a focus on examining the role of tau, TDP-43 or FUS pathogenesis, and specific genetic causes and risks factors.
 - <https://grants.nih.gov/grants/guide/rfa-files/RFA-NS-21-003.html>
- **RFA-NS-21-006:** Mechanisms of Pathological Spread of Abnormal Proteins in LBD and FTD
 - Application due date: October 27, 2020
 - Focus: to increase basic and clinical research on how abnormal proteins spread in the nervous system of LBD and FTD patients.
 - <https://grants.nih.gov/grants/guide/rfa-files/RFA-NS-21-006.html>
- **RFA-NS-21-007:** Mechanisms of Selective Vulnerability in LBD and FTD
 - Application due date: October 27, 2020
 - Focus: to increase basic and clinical research on why certain brain regions are more vulnerable to abnormal protein accumulation and damage.
 - <https://grants.nih.gov/grants/guide/rfa-files/RFA-NS-21-007.html>

Additionally, the following funding opportunities will be announced shortly:

- **Treatments for LBD-Exploratory Clinical Trial** -- to encourage exploratory clinical trials (Phase I or II) testing either new or repurposed drugs or devices to treat patients with LBD.
- **Small Vessel Vascular Contributions to Cognitive Impairment and Dementia (VCID) Biomarker Validation for Clinical Trials and Coordinating Center** -- to continue support for a consortium (currently implemented as MarkVCID) to develop and validate high-quality small vessel VCID biomarkers ready for use in clinical trials, and for generating scientific breakthroughs in the understanding and treatment of VCID.

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NINDS ADRD Research Program Update

NINDS just launched a large cooperative agreement supporting 27 investigators at 12 institutions to examine the clinical significance of incidental white matter lesions. Investigators will test the hypothesis that MRI measures can determine specific characteristics of white matter lesions that, combined with clinical data for AD/ADRD and other co-morbidities, predict future cognitive decline in stroke free Caucasian, African American, and Hispanic populations with cognitive complaints. The project will also leverage resources from and synergizes with the NIH-funded MarkVCID initiative, which has developed and validated several biomarkers for the small vessel diseases of the brain that lead to vascular cognitive impairment/dementia for use in clinical trials.

Information at: <https://markvcid.partners.org/>
https://projectreporter.nih.gov/project_info_description.cfm?aid=10144032&icde=52326839