



## Alzheimer’s and Other Dementias Revision

“...identify health care services for which there are substantial variation in practice patterns or high utilization trends in Washington state, without producing better care outcomes for patients, that are indicators of poor quality and potential waste in the health care system.”

### PROBLEM STATEMENT:

As the population continues to age quickly, so does the risk of Alzheimer’s disease and other dementias. Since the publication of the 2017 Alzheimer’s Disease and other Dementias Bree Report and Recommendations, there have been updated treatments and evidence for optimal Alzheimer’s disease and other dementia care and risk reduction. In 2020, there were around 125,116 people living with dementia, including Alzheimer’s disease in Washington state. By 2040, this number is expected to exceed 270,000 people.<sup>1</sup> Individuals living with dementia are hospitalized 2-3 times as often as people of the similar age who do not live with dementia, and Washington Medicaid beneficiaries living with dementia are significantly more costly than beneficiaries without dementia (\$2,229 Per Member Per Month (PMPM) versus \$803 PMPM). African Americans are less likely than whites to be diagnosed, and usually diagnosed at a later stage. . An increased awareness and stronger evidence base has also emerged around social determinants of health and how they affect health outcomes and risks, including delays in detection and treatment among racial and ethnic groups. Economic modeling data showing early diagnosis is associated with a per-person savings of around \$64,000 on average per person. This proposal is to update the existing report with the most up to date modifiable risk factors, treatments, strategies, and payment methodologies. In addition, the WA State Plan to Address Alzheimer's Disease and Other Dementias, first published in 2016, was updated in fall 2023. It lays out strategies for multiple sectors, including health care, to enhance practices in diagnosing and treating dementia to promote both improved outcomes and potential cost savings. An updated Bree report could help operationalize those recommendations.

### DOES THE TOPIC HAVE (CHECK ALL THAT APPLY):

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|---|---|
| <input checked="" type="checkbox"/> VARIATION IN CARE           | <input checked="" type="checkbox"/> SAFETY CONCERNS |
| <input checked="" type="checkbox"/> HIGH COST AND POOR OUTCOMES | <input checked="" type="checkbox"/> EQUITY CONCERNS |

### PROPOSED SCOPE:

Reducing variation in access to high quality dementia care by updating the state of the science including biomarkers and new drug therapies, advances in lifestyle modifications to impact risk for dementia, and long-term supports and services, including caregiver supports.  
 Out of Scope: Other conditions that cause cognitive dysfunction (e.g., TBI),

### EVIDENCE-BASED IMPACT STRATEGY:

*Clinicians & Delivery Systems:* Early identification of cognitive impairment in primary care, integration of new medication therapies as appropriate, counseling patients on modifiable risk for or delay onset of dementia (40% of all dementias could be reduced based on modifiable risk factors), implement multidisciplinary care teams with coordination support for patient and caregivers.  
*Payers/Purchasers:* contract in value-based payment arrangements to cover for comprehensive model of care to support patient and caregivers, rates that cover coordination services and caregiver support

<b>AVAILABLE DATA:</b>
<ul style="list-style-type: none"> <li>• Claims data, prescriptions, BFRSS Cognitive Decline Module, economic modeling</li> <li>• Within the last year, the CMS Guiding an Improved Dementia Experience (GUIDE) Model demonstration began which includes a value-based payment methodology for dementia care managing within Medicare; there is at least one demonstration site in Washington State.</li> </ul>
<b>POTENTIAL PARTNERS:</b>
The Dementia Action Collaborative and its members including people living with dementia and caregivers, UW Memory and Brain Wellness Center, UW Medicine, Providence, Washington State Chapter of the Alzheimer’s Association, Franciscan Hospice and Palliative Care, Swedish Medical, and UW School of Nursing.
<b>HOW MAY A BREE REPORT ON THIS TOPIC SUPPORT THE HEALTH OF WASHINGTONIANS:</b>
Medicaid and Commercial alignment including payment reform, reinforcing team-based dementia care approaches, early and accurate diagnosis for all Washingtonians, and provider education will all result in lower costs and positive health outcomes for Washingtonians.

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<sup>1</sup> Washington State Department of Social and Health Services. (2023). Washington State plan to address Alzheimer’s disease and other dementias 2023-28. Retrieved from <https://www.dshs.wa.gov/sites/default/files/AL TSA/stakeholders/documents/AD/Washington%20State%20Plan%20to%20Address%20Alzheimer%E2%80%99s%20Disease%20and%20Other%20Dementias%202023-28.pdf>