

Arkansas Alzheimer's and Dementia State Disease Plan

Joint Public Health

Dec. 12, 2022

10:00 am

EXHIBIT F2



The Impact of Alzheimer's on Arkansas Families



Prevalence

NUMBER OF PEOPLE
AGED 65 AND OLDER
WITH ALZHEIMER'S

Year	TOTAL
2020	58,000
2025	67,000

ESTIMATED % CHANGE

15.5%



Health Care

HOSPICE (2017)

3,133

of people in hospice
with a primary diagnosis
of dementia

18%

% in hospice with a primary
diagnosis of dementia

HOSPITALS (2018)

1,530

of emergency department
visits per 1,000 people
with dementia

21.5%

dementia patient hospital
readmission rate

MEDICAID

\$396M

Medicaid costs of caring
for people with Alzheimer's
(2020)

14.6%

projected change in costs
from 2020 to 2025

MEDICARE

\$23,982

per-capita Medicare spending on people
with dementia (in 2021 dollars)

What makes Alzheimer's Unique from other Chronic diseases?

- **Prevention** - Though research is still evolving, evidence is strong that people can reduce their risk by making key lifestyle changes, including participating in regular activity and maintaining good heart health.
- **Diagnosis** - There is no single diagnostic test that can determine if a person has Alzheimer's disease.
- **Treatment** - There's no cure for Alzheimer's, but there are treatments that may change disease progression, and drug and non-drug options that may help treat symptoms.

What makes Alzheimer's Unique from other Chronic diseases?

- **Impact on Comorbid conditions** - BRFSS indicates many with other chronic conditions also have subjective cognitive decline.
- **Age of those impacted** -
 - Most are over age 65.
 - Younger Onset limits access to services.
- **Lack of federal funding for states** - BOLD funds some programs, but it does not provide a dedicated funding source to all states like other chronic disease programs

Arkansas Response

2009

Silver Alert Announced
in Arkansas

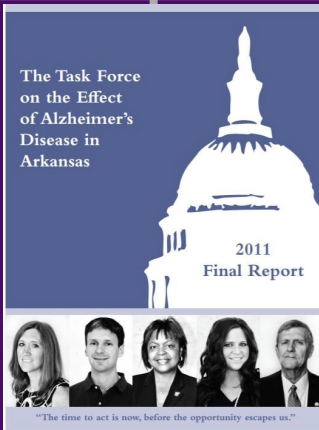
2011

NAPA Signed into
federal Law
Establishing a National
Plan to Address
Alzheimer's Disease

2018

ACT 92 Establishing
the Task Force on the
effect of Alzheimer's
Disease

2009



2012

Independent
Working Group
Convened to
begin update to
Alz. State Plan

Arkansas Response

February
2019

Full legislative support of the Alzheimer's and Dementia Advisory Council ACT 391

Authorizing Legislation to fund the Pilot Dementia Caregiver Respite Grant \$200k

November
2021

January
2022

October
2022

Bipartisan support of the Alzheimer's Awareness Day Resolution

March
2021

Arkansas Awarded Federal Funding under the BOLD ACT

Alzheimer's Dementia Advisory Council Approves updated Alzheimer's and Dementia State Plan

Alzheimer's and Dementia Advisory Council



Senator Ricky Hill
Co-Chair (ADAC)



Representative Julie
Mayberry
Co-Chair (ADAC)

State Agency Partners

**AR. Department of
Health**

**AR. Department of
Human Services**

**AR. Minority Health
Commission**

Alzheimer's and Dementia Advisory Council

- AARP
- Alzheimer's Association
- Alzheimer's Arkansas
- Arkansas HealthCare Association
- Arkansas Hospital Association
- Broyles Foundation
- Homecare Association of Arkansas
- Hospice and Palliative Care Association of Arkansas
- The University of Arkansas for Medical Sciences Centers on Aging

Alzheimer's and Dementia State Plan

State Plan (2022-2026) General Outline

A. SECTION ONE

1. Introduction (Process and Exec. summary)

B. SECTION TWO

1. Alzheimer's and Dementia Definitions
2. Risk Factors, Warning Signs, etc.)

C. SECTION THREE (Priority Issues and recommendations)

1. Public Awareness
2. Access to Care
3. Family Caregiver Support
4. Dementia Training/Workforce Development

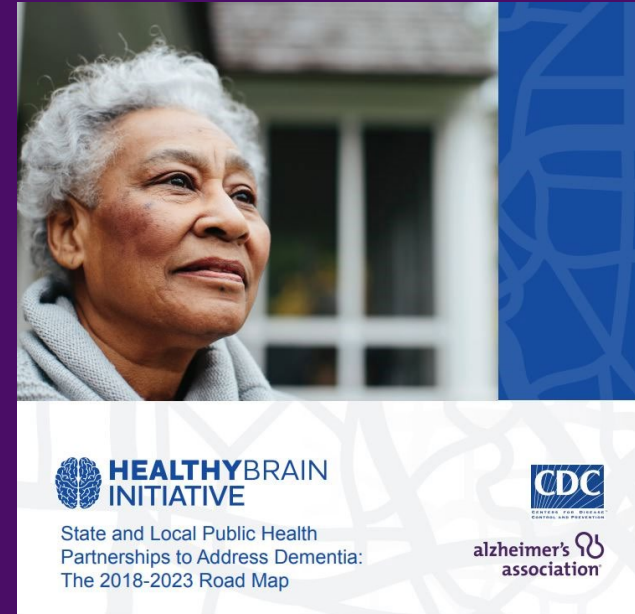
D. Appendix and References

SECTION ONE: Introduction and Process

General Outline and Section Areas

- Access and Quality of Care
- Public Awareness
- Family Caregiver Support
- Strengthening the Healthcare Workforce and ensure Dementia capable.

**National Healthy Brain Initiative Roadmap Series -Centers of Disease Control*



Establishing the Position of Dementia Services Coordinator

- A State Dementia Services Coordinator is an individual (or team of individuals) within the state government whose job is to ensure coordination of Alzheimer's programs and policies across state agencies.
- Assist with the coordination of the Alzheimer's and Dementia Advisory Council
- Establish and maintain relationships with all relevant state agencies and community organizations in order to meet community needs and prevent duplication of services
- Evaluate existing Alzheimer's and dementia programs and services Identify service gaps within the state government
- Increase awareness of and facilitate access to quality, coordinated care for people with dementia.

Public Awareness

NEEDS:

- Increased public health messaging about the importance of risk reduction, early detection and diagnosis, Ten Warning Signs.
- Improve Data Collection
- Continued coordination of the state's response to Alzheimer's and other dementia

Public Awareness Recommendations

- **Establish the position of Dementia Services Coordinator within the state government**
 - Create a position and obtain specific funding to hire a full time Dementia Services Coordinator (DSC) to coordinate the services provided to persons with Alzheimer's Disease and Related Dementias, providing support to the Alzheimer's and Dementia Coordinating Council."
- Increase collaboration among service providers, The UAMS Centers on Aging, Alzheimer's Assoc., AAA's, etc. to expand access to educational material relating to cognitive health, caregiver education and support services, and statewide dementia resources.
- **GOAL: To strengthen the existing public health infrastructure to better serve the needs of Arkansans who are impacted by Alzheimer's and related dementia?**

Public Health Education

- Develop brain health awareness campaigns and community education events
- Include risk reduction information in a dementia curriculum and/or on public health agency website
- Use other communication vehicles to disseminate information on risk factors
- Incorporate brain health messaging into existing health campaigns focused on head injury, smoking cessation, diabetes, exercise, and cardiovascular health

Access and Quality of Care

NEEDS:

- Coordination of existing support services
- Monitor and assess existing and future 1915(c) waivers to ensure they are inclusive of the dementia population.
- Increased Access to Care Planning Services, Dementia education, and resources

Access and Quality of Care Recommendations

- Expand access to dementia education, training, and support services by increasing the collaboration of service providers and the Arkansas Area Agencies on Aging.
 - Establish a dementia resource center in each Area Agency on Aging
- Research and support innovative models to finance the delivery of home and community-based services. Support the development and testing of pilot programs to improve options for people with dementia to remain at home instead of more costly Medicaid-funded long-term care services.

Supporting Family Caregivers

NEEDS:

- Coordination of existing support services
- Monitor and assess existing and future 1915(c) waivers to ensure they are inclusive of the dementia population.
- Increased Access to Care Planning Services, Dementia education, and resources

The Public Health Impact of Alzheimer's and Dementia Family Caregivers

Over 93 thousand Arkansans provide **unpaid** care to people with Alzheimer's or other dementias. These caregivers provided more than **139 million hours** valued at over **\$2.2 BILLION.**



Profile of a Dementia Caregiver

Over 60% of caregivers are **women** .

26% are 65 or older, and two-thirds are over the age of 50.

More than half have been providing care for at least four years.

41% have a household income of \$50,000 or less.

The Impact of Caregiving on the Workforce

57%

had to go in late/leave early/take time off

18%

had to go from full-time to part-time work

16%

had to take a leave of absence

9%

had to quit work entirely

8%

turned down a promotion

7%

lost job benefits

Work-Related changes experienced by Dementia Caregivers

Supporting Family Caregivers

Recommendations

- Work in coordination with state agencies and non-governmental organizations, such as the Area Agencies on Aging, the UAMS Centers on Aging, and the Alzheimer's Association, to develop and deliver no-cost training for family caregivers of people with dementia to improve the delivery of care and support better outcomes for family caregivers.
- Establish a permanent dementia-caregiver respite grant program.
 - We are currently working within a pilot program funded by the Department of Human Services to provide respite grants specific to dementia caregivers.

Healthcare Workforce and Dementia

NEEDS:

- Ensure we are preparing the healthcare and professional workforce to meet the unique needs of a rising dementia population.
- Address the healthcare workforce shortage

Healthcare Workforce Development and Dementia Training

- Expand collaboration between the non-profit sector and the medical community to ensure they are aware of the resources available to them and to caregivers.
- Establish dementia-specific training requirements for Adult Protective Service, LTC Ombudsman, LTC Investigators and other state and local government employees serving people with dementia.
- Establish dementia-specific training requirements for members of law enforcement and first responders as part of the initial curriculum and ongoing training.

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