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**Learning Objectives**

- Learn why early detection, diagnosis, and connections to resources are important.
- Understand the key recommendations from the 2011 Alzheimer's Disease Working Group (ADWG) Final Report.
- Be able to describe the current work of the MN ADWG and how key findings may impact care.

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**Facts & Figures**

- Americans view Alzheimer's as a major health threat.
- Alzheimer's is the second most feared disease-behind only cancer.
- Nearly 22 percent of Americans rate Alzheimer's as the disease they are most afraid of getting.

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### Minnesota and Alzheimer's

- In 2018, there are an estimated 94,000 individuals living with dementia and 254,000 caregivers.
- Caregivers provide an estimated 289 million hours of care.
- In 2025, there will be an estimated 120,000 individuals living with dementia.

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### Early Detection & Diagnosis

- Nearly 89% of Americans say that if they were exhibiting confusion and memory loss, they would want to know if the cause of the symptoms was Alzheimer's disease.
- Of those aged 60 and over, 95% say would want to know.

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### Diagnosis & Disclosure Rates

- According to the 2018, Alzheimer's Association Facts & Figures, a substantial portion of those who meet the diagnostic criteria for Alzheimer's or other Neurocognitive disorders, are not detected and diagnosed by a physician.
- Furthermore, less than 50% of Medicare beneficiaries, who have a diagnosis listed in their medical record, report they were not informed of their diagnosis.

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### Benefits of Early Detection & Diagnosis

Early and documented diagnosis leads to better outcomes for individuals living with Alzheimer's disease and their care partners.

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### Outcomes of Early Diagnosis

- Participate in available treatments
- Have access to clinical trials
- Be able to build a care team
- Participate in supportive services
- Complete POA/HCD's



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### Most Importantly.....

Individuals who are informed of their diagnosis early, can participate in conversations about their preferences of care.

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## Addressing the Significant Impact on the State

In 2009, the Alzheimer's Association and Minnesota Board on Aging drafted legislation to pass a bill to create a state plan to address the significant impact of Alzheimer's and dementia.

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## ACT on Alzheimer's

Legislation eventually led to the creation of ACT on Alzheimer's- a coalition comprised of hundreds of individuals living with dementia, staff from non- profits, government entities and private corporations.

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## ACT on Alzheimer's Goals

- Identify and invest in promising approaches that reduce cost and improve care.
- Increase detection of Alzheimer's disease and improve ongoing care and support.
- Sustain caregivers by offering information, resources, and in person support.
- Equip communities to be "dementia capable" to support residents impacted by Alzheimer's.
- Raise awareness and reduce stigma by engaging communities.

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### Final Key Recommendations (2011)

- Identify Alzheimer’s early
- Use “Health Care Home” for Alzheimer’s care
- Achieve quality and competence in dementia care
- Prepare our communities and the public
- Train medical providers in dementia care
- Pursue cost-saving policies
- Intensify research and surveillance

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### 2011 Key Recommendations Outcomes

#### Identify Alzheimer’s Early:

- Created ACT on Alzheimer’s website which houses “toolbox” of provider tools, including videos on how to detect Alzheimer’s and deliver a diagnosis.
- In Person Provider and Care Coordinator Trainings throughout the state were delivered.

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### 2011 Key Recommendations Outcomes

#### Use of “Health Care Home” for Alzheimer’s Care:

- Live Well at Home grants/CSSD grant money
- Trainings offered in T-CARE, Medical Home Models

#### Achieve Quality and Compliance in Dementia Care:

- Developed Dementia Capability Training and Cultural Consultant training
- Requirements for dementia training in Long-Term Care

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**2011 Key Recommendations Outcomes**

Prepare Communities and the Public:

- Dementia Friendly Communities and Toolkits
- Increase in Alzheimer's Association Support Groups

Train Medical Providers in Dementia Care:

- Toolkits available on the ACT on Alzheimer's website
- Annual Medicare Wellness Visit and Cognitive Screening

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**2011 Key Recommendations Outcomes**

Pursue Cost-Savings Policies:

- Economic Modeling completed. Early detection and caregiver support found cost-savings

Intensive Research and Surveillance:

- Minnesota Department of Health increased data collection

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**Fast Forward to 2018**

In 2017, the MN Legislature directed the Minnesota Board on Aging to convene a 16 member Alzheimer's disease Working Group to revisit the 2011 recommendations and revise the report, "Preparing Minnesota for Alzheimer's: the Budgetary, Social and Personal Impacts."

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### 2018 Alzheimer's Disease Working Group Committees

- Cultural Responsiveness
- Assessment of Trends and Disparities
- Diagnosis, Treatment, and Professional Education
- Public Awareness and Risk Reduction
- Residential Services

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### 2018 Alzheimer's Disease Working Group Process

- Five ADWG meetings over the past year.
- Two of these meetings held in greater MN (St. Cloud and Rochester).
- Committees reported accomplishments and recommendations to the ADWG during the meetings.
- From these recommendations, the ADWG have refined, and in some cases, expanded them into "story lines."

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### Processing Table

- Is recommendation directed to State entity or something that the State can influence?
- Is recommendation clearly actionable? Or a goal?
- Is recommendation critical now to support a story line?
- Does recommendation include element of cultural awareness?
- Should recommendation stay 'as is,' be revised or removed?

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## Next Steps

Consultants from the MN Management and Budget, and Management Analysis and Development are currently writing the final report with expected release of December, 2018.

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## Questions?

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