





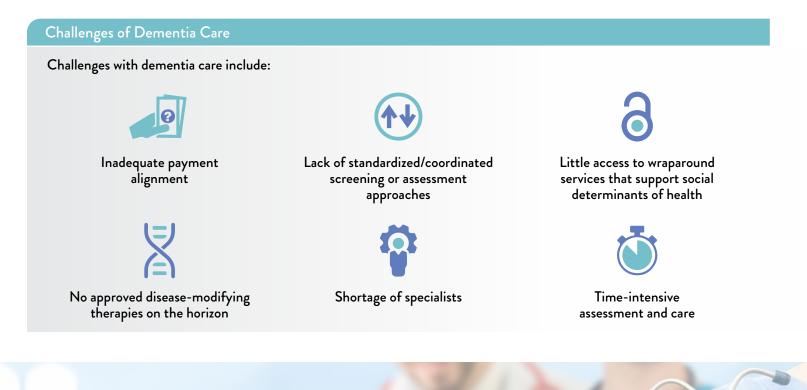
Conversation with Dr. Sawyer on approach to dementia care

Problem

With a rapidly aging population of baby boomers, high quality and timely dementia care is critical. The World Health Organization estimates that up to 82 million people worldwide could have dementia by 2030.

However, dementia patients and their caregivers experience several barriers along the dementia care pathway. This includes limited time for initial assessment in primary care, variability in diagnostic workups across health systems, and lengthy waits to see dementia specialists like neuropsychologists and behavioral neurologists.

Patients and their caregivers often feel lost after a diagnosis without a care plan beyond referrals to community resources and online education materials. This is related to non-standardized dementia assessment workflows, specialist shortages, lack of care coordination, specialist shortages, and no payment model to incentivize program development.



SOLUTION

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With initial funding from community philanthropists, Dr. R. John Sawyer and his team at Ochsner Health System (OHS) developed a comprehensive care pathway to help address those barriers.

The OHS dementia care program seeks to provide a centralized, multidisciplinary approach and coordinate points of care. It prioritizes team-based care, especially following the initial diagnosis. In that way, organizations can ease caregiver and provider burden, improve patient quality of life, and better utilize current health care services.

🖕 SEE NEXT PAGE FOR **RESULTS** AND **KEY LEARNINGS**





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Components of the Innovation

OHS uses core elements in its approach:

Examples Neuropsychologists and neurology nurse practitioner for initial dementia workup Hiring specialized staff with clinician role More specialized expertise from behavioral neurologists to assess rarer dementia syndromes and manage complex behavioral symptoms clarity around initial diagnosis and optimal · Care managers and navigators to support caregivers after diagnosis and a specialized 12-month intensive care program for high-risk patients post-diagnosis management Examples Benefits of dedicated dementia clinics Educating and supporting caregivers Co-occurrence of dementia with behavioral symptoms like paranoia/psychosis

• Need for community-based services



Aligning with a value-based care mindset through program evaluations and appropriate codes for higher hierarchical condition category (HCC) recognition to demonstrate financial viability and scalability

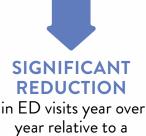
Results

Compared to a matched control group, dementia care patients cost

\$200 less PER MEMBER PER MONTH Compared to a matched control group, dementia care patients saw the HCC coding score improve by

> +0.51 YEAR OVER YEAR





matched control group

FOR MORE

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For more information about the care pathway, please contact Robert John Sawyer (robert.sawyer@ochsner.org), co-director of the Center for Brain Health and medical director for value at the Ochsner Neuroscience Institute.