



# 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.

## Challenges of Dementia Care

Challenges with dementia care include:



Inadequate payment alignment



Lack of standardized/coordinated screening or assessment approaches



Little access to wraparound services that support social determinants of health



No approved disease-modifying therapies on the horizon



Shortage of specialists



Time-intensive assessment and care



## SOLUTION

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.



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## Components of the Innovation

OHS uses core elements in its approach:



Hiring specialized staff with clinician role clarity around initial diagnosis and optimal post-diagnosis management

### Examples

- Neuropsychologists and neurology nurse practitioner for initial dementia workup
- More specialized expertise from behavioral neurologists to assess rarer dementia syndromes and manage complex behavioral symptoms
- Care managers and navigators to support caregivers after diagnosis and a specialized 12-month intensive care program for high-risk patients



Educating and supporting caregivers throughout the disease process from mild to advanced stage

### Examples

- Benefits of dedicated dementia clinics
- 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**



**SIGNIFICANT REDUCTION** in caregiver burden



**SIGNIFICANT REDUCTION** in ED visits year over year relative to a matched control group

**FOR MORE INFORMATION**



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.