

Dementia Made Easier: Assessing Older Adults in Primary Care



PARTNERING WITH YOU TO OFFER

- **Rapid and robust cognitive screenings**
- **Customized neuropsychological evaluations**
- **No scheduling delays and quick turnaround**
- **Facilitated communication between all patients, clinicians and caregivers**
- **Ongoing surveillance and tracking of patient outcomes**
- **Assistance addressing depression, psychoses, behavioral disturbances, sleep disorders and risky behaviors**

BENEFITS OF EARLY SCREENING

Improves Quality of Life

- Early detection of dementia can decrease disability and dependence.¹
- Therapies effectively postpone the progression of dementia early in the disease.²
- Early detection combined with osteoporosis treatment may decrease incidence of hip fractures.¹
- Dementia dramatically increases a patient's risk of falling, hip fracture and lowers bone mineral densities.¹

Promotes Independence

- 25% of all hospitalizations are preventable in Medicare populations diagnosed with dementia.³
- Non-pharmacological interventions reduce nursing home placements by 30% and delay placement for others by 18+ months.⁴

Addresses Comorbidities

- Underlying dementia affects management of all chronic diseases.⁵
- Dementia is a primary risk factor of poor treatment compliance in comorbid conditions.⁵

Reduces Inefficiencies

- \$30,554 is an average annual total costs of dementia, as estimated by a systematic review of the main cost drivers.⁶
- Early detection and intervention saves money
 - \$5,300 /pp reduction in healthcare costs
 - \$11,400 / pp reduction in societal costs⁷

BEST PRACTICES

How do we do it best?

The Institute of Medicine recommends interdisciplinary teams to address complex dementia needs.⁸⁻⁹

Satisfaction:

- Dementia patients report greater satisfaction ratings with collaborative care.¹⁰

Savings:

- Collaborative care partnerships save cost per patient. Risk-adjusted cost savings of \$3,474 per patient are reported in a study by a healthy aging brain center and Indiana University.¹¹

Specialized:

- Core clinical criteria for a diagnosis of MCI or Alzheimer's Disease requires evidence from objective assessments suggesting lower performance on one or more cognitive domains that is greater than what would be expected for the patient's age and educational background.¹²⁻¹³
- A neuropsychologist in a memory care specialty clinic has the expertise to evaluate each patient individually, provide an accurate and objective diagnosis, and establish a baseline to monitor progression of the disease. An accurate diagnosis and determination of stage of decline increases understanding of the patient's strengths and weaknesses. This enables personalized care plans to be implemented accordingly.¹⁴

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