Care Coordination:
Does It Really Work?

North Carolina Institute of Medicine

Task Force on Alzheimer's Disease and Related Dementia

July 24, 2015

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Change Is Blowing in the Wind

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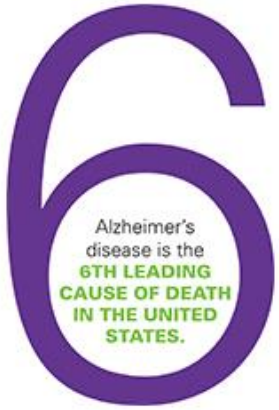
The Sobering Statistics on Alzheimer's

It's the only cause of death in the top 10 in America that CANNOT BE PREVENTED, CURED OR SLOWED.

ALMOST TWO THIRDS of Americans with Alzheimer's disease are women.

SENIORS dies with Alzheimer's or another dementia.



Every **67 seconds** someone in the United States develops the disease

By 2050, these costs could rise as high as **$1.1 TRILLION.**

In 2015, Alzheimer's and other dementias will cost the nation **$226 BILLION.**

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Source: *2015 Alzheimer's Disease Facts & Figures*, Alzheimer's Association

The Cost of—and On—Caregivers

Year	# of NC Caregivers	Total Hours of Unpaid Care	Total Value of Unpaid Care	Higher Health Costs of Caregivers
2012	437,000	497,000,000	$6,132,000,000	$245,000,000
2013	442,000	504,000,000	$6,272,000,000	$252,000,000
2014	448,000	510,000,000	$6,208,000,000	$263,000,000

Source: North Carolina Alzheimer's Statistics, Alzheimer's Association, 2015

- Nationally, nearly 60% of Alzheimer's and dementia caregivers rate the emotional stress of caregiving as high or very high; about 40 percent suffer from depression.
- The physical and emotional toll of their caregiving added significantly to their own health care costs

Source: 2015 Alzheimer's Disease Facts and Figures, Alzheimer's Association, 2015

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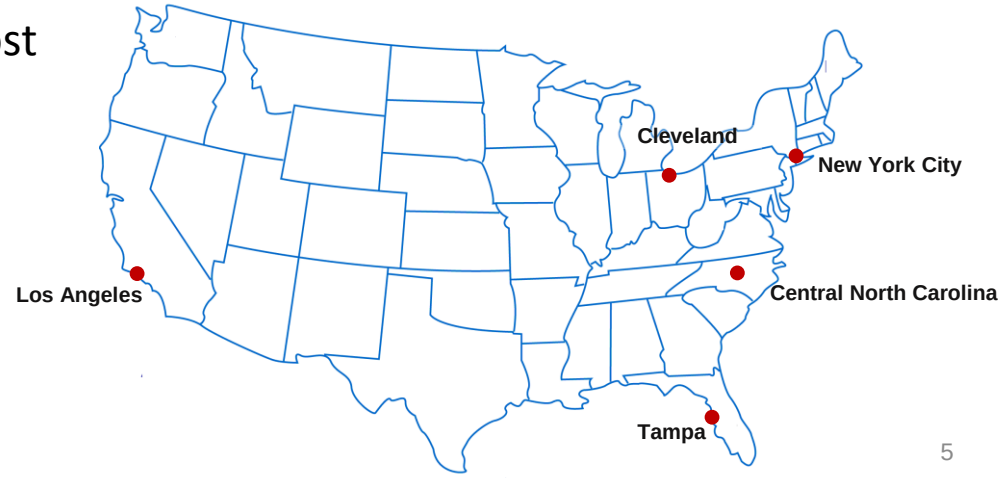
YOUR CARE CONNECTED:

Integrated Health Care Management Pilots

Recognizing that **an individualized, holistic approach to health care delivery is essential to health care transformation**, UnitedHealth Group, in collaboration with AARP Services, Inc., launched a series of care management pilot programs in January 2009

- Participants included AARP members insured in the *AARP Medicare Supplement Plan* in 5 locations, including Central North Carolina.
- Designed to improve health outcomes and determine if care coordination can be successful in a traditional fee-for-service Medicare environment
- Program offered at no additional cost



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YOUR CARE CONNECTED:

Integrated Health Care Management Pilots

Chronic Illness/ High Risk Case Management (HRCM)

Helping people identified at high predictive risk for catastrophic health events or deterioration through on-site and telephonic case management

Disease Management

Helping individuals afflicted with select chronic diseases reduce their risk of disease progression, future catastrophic events or deterioration

Integrated Pilot Programs

Prescription Drug Adherence

Helping people in tandem with disease management programs to comply with and adhere to evidence-based standards of pharmaceutical care for their chronic disease

Depression Management

Helping people, physicians, and other caregivers identify depression, and access educational resources, referral information, condition monitoring, treatment adjustment, and relapse prevention

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Implementation of the Integrated Chronic Care Program

- Design efforts commenced early 2008; program launched January 2009
- Unique nature of Medicare Supplement claim data required adaptation of more conventional health information technology for identification, intervention and reporting — industry's first medical management technology competent to serve Medicare Supplement participants
- 5 markets serving 216,000 Medicare Supplement members served as our learning laboratory
- Built a stratification model and discipline that has been adapted broadly for many of UnitedHealthcare's largest clients
- Enrollment targets have been exceeded in all but one program. Novel nature of depression program has led us to experiment with a variety of engagement strategies

Program Evaluation: Study Population

- The program is open to qualified high-risk participants who are relatively diverse in age, gender, and comorbidities, but less diverse in terms of socioeconomic status
  - Participants had a Hierarchical Condition Category (HCC) score of 3.74 or greater or were referred from other clinical programs in about 20% of cases
  - Some participants were co-managed by a depression management program
- The program is offered to the sickest of patients (i.e., those with multiple comorbidities and/or life-threatening illnesses)
  - Average participant age entering the program: 78
  - Mostly female (61%)
  - Many (28%) had a Hospital admission during the post period
  - Average health care expenditures average about $5,000 per month for those who engage in the program

Integrated High-Risk Case Management Pilot Program Services

- Individualized care plans, including interventions, based on a health assessment of participants' conditions, needs, strengths, lifestyle and health habits, and preferences

The Interdisciplinary Team Includes:

- Medical Directors
- Pharmacists
- Nurses
- Social Workers
- Behavioral Health Advocates
- Engagement Specialists
- Dieticians
- Non-Clinical Administrative Staff

- Includes home visits, doctor visits and a telephonic component
- Care for all patients coordinated while the patient is in the hospital, during discharge, and post hospitalization, as applicable
  - Our care team works with the patient throughout the entire process

Results

- **Satisfaction**

  From 2009–2011, 98% of members were either satisfied or very satisfied with the program

- **Engagement**

  Member months of engagement doubled from 2009–2010 and increased by 30% from 2010–2011

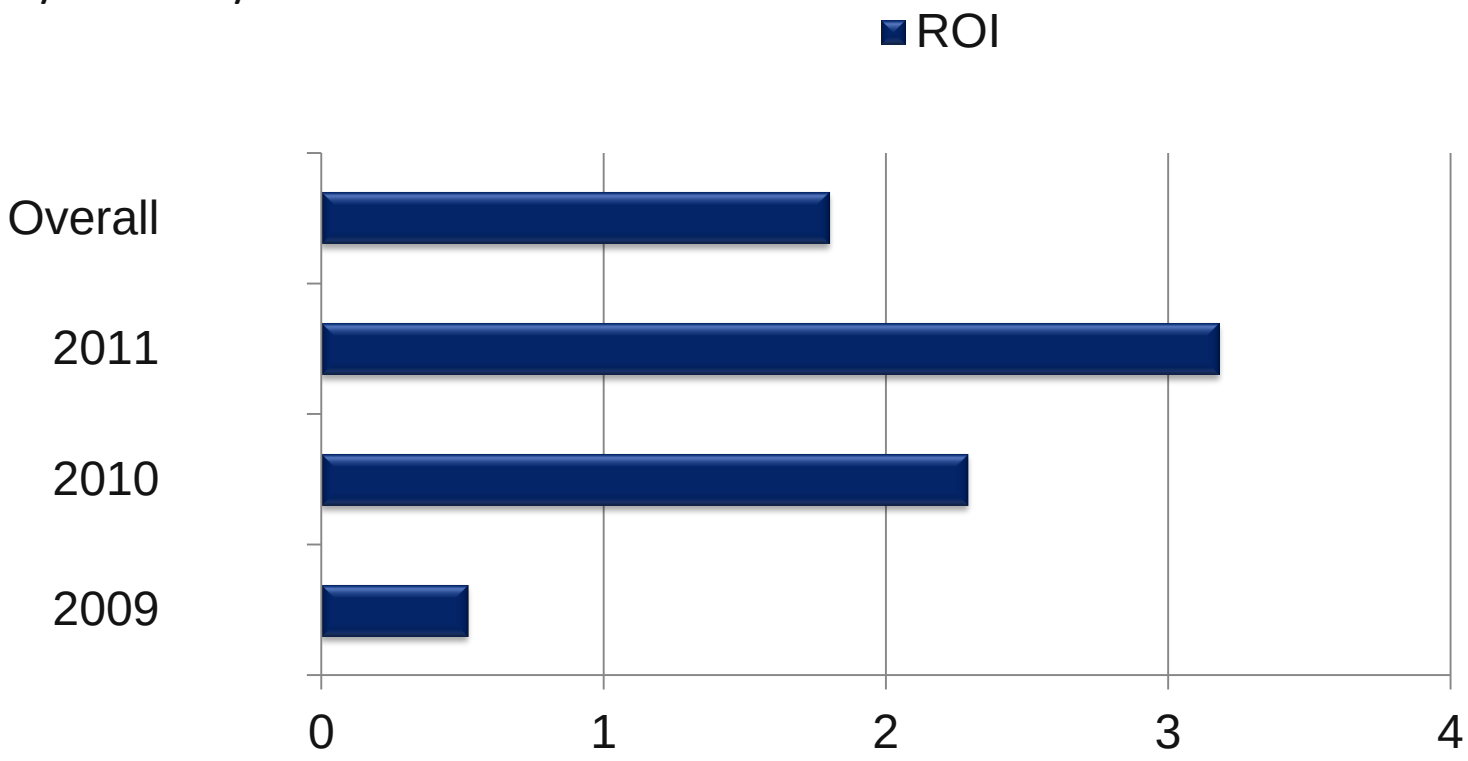
- **Clinical Quality**

  The program had a positive impact on many quality metrics

  - Duration in the program was associated with fewer readmissions
  - Assessing Care of Vulnerable Elderly (ACOVE) measures: 100% screened for falls (75% had no additional falls), hearing loss, pain, and nutritional status
  - EBM metrics: Members were significantly more likely (58%) to have recurring office visits and recommended laboratory tests

Total Program Savings

The program ROI demonstrated savings over the first three years—and increased year over year



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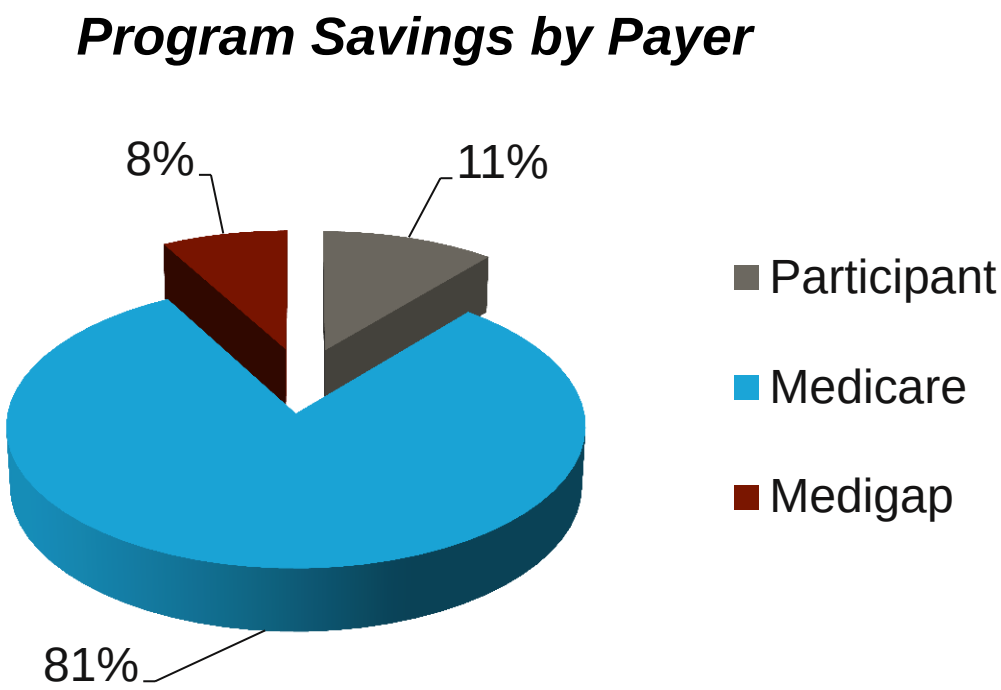
Total Program Savings

The total savings for the program was $8.3 million during 2009–2011



Insights on Engagement

Engaged

- ✓ Saw themselves as “sick”
- ✓ Had less communication from their doctors
- ✓ Had less support at home

Not Engaged

- ✓ Saw themselves as “well”, and were less likely to report symptoms of depression
- ✓ Could get answers from their doctors
- ✓ Felt comfortable managing their health for now

How is your health? 58%: “Better than others my age.”

“Living independently at home” vs. “managing my health”

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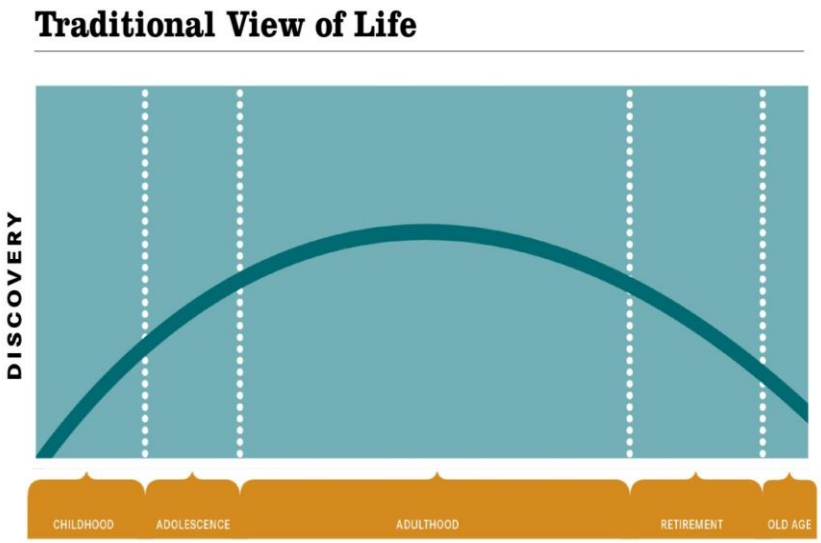
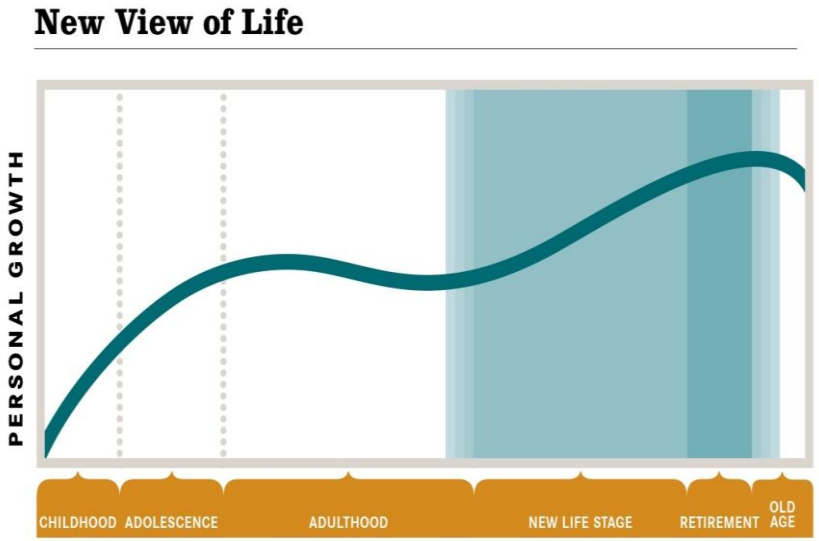
First ‘A-Ha’
We’ve Missed the Emotional Connection





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Second ‘A-Ha’
Provide Patients with the “How”

Real health care happens at home

Care must be conceptualized not merely as what you get when you go to the doctor’s office, but also as the decisions people make and resources they have at home — to stay healthy.

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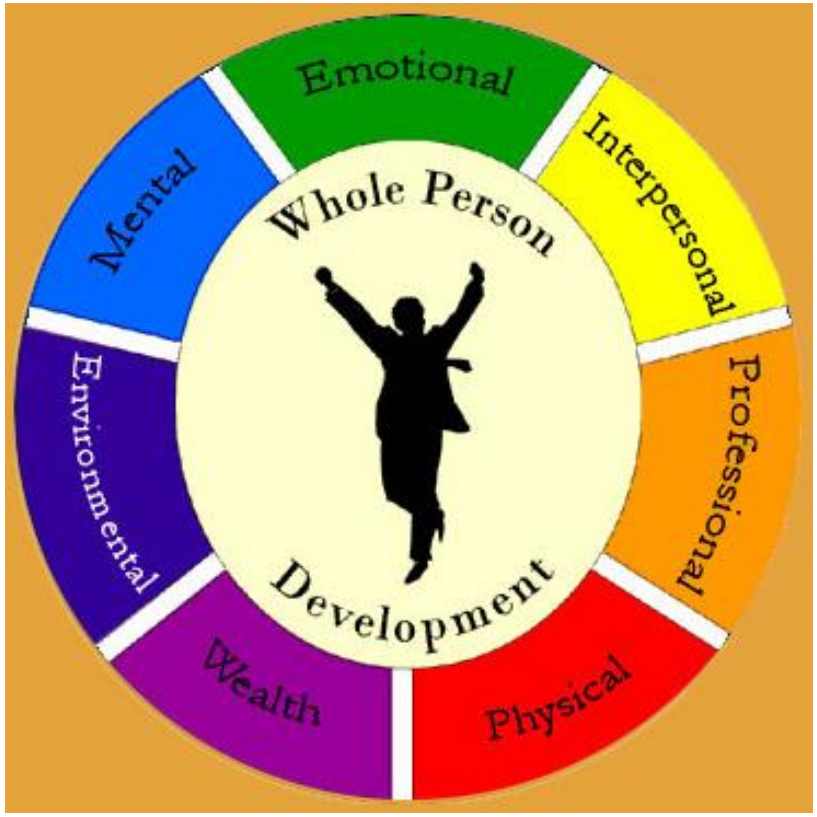
Third ‘A-Ha’
It’s about the Whole Person



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360° Case Stories

Mr. N has Alzheimer's dementia, and recently was re-admitted for COPD exacerbation. He has become increasingly agitated and violent towards his wife and staff. Mr. N's wife, out of desperation, has been giving Mr. N one of her own medications, thinking it would calm him down…

— *The Story of Mr. N, Alzheimer's Dementia Patient*

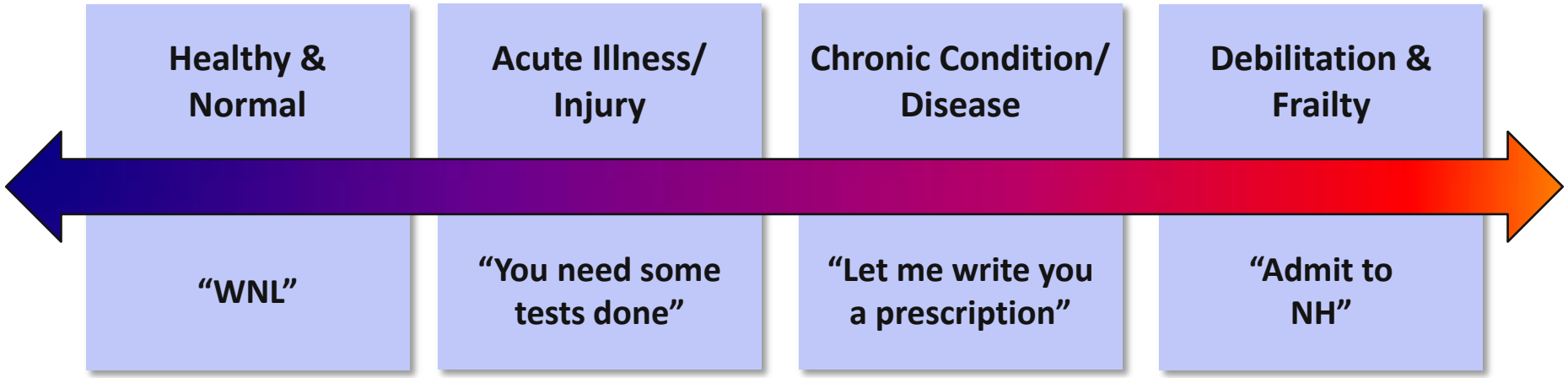
Laura has been caring for her husband fulltime, and now is suffering her own medical issues, from needing oxygen herself, and unable to afford her medicines…

— *The Story of Laura, Caregiver for husband with Alzheimer's Disease*

Mrs. P has steadily worsening Parkinson's Disease, is bedridden most of the time, and now having hallucinations. Her devoted husband is her primary caregiver, not sleeping, with his own health affected, and is considering nursing home placement as his only recourse…

— *The Story of Mrs. P, Parkinson's Patient*

Medical Model of Health Care



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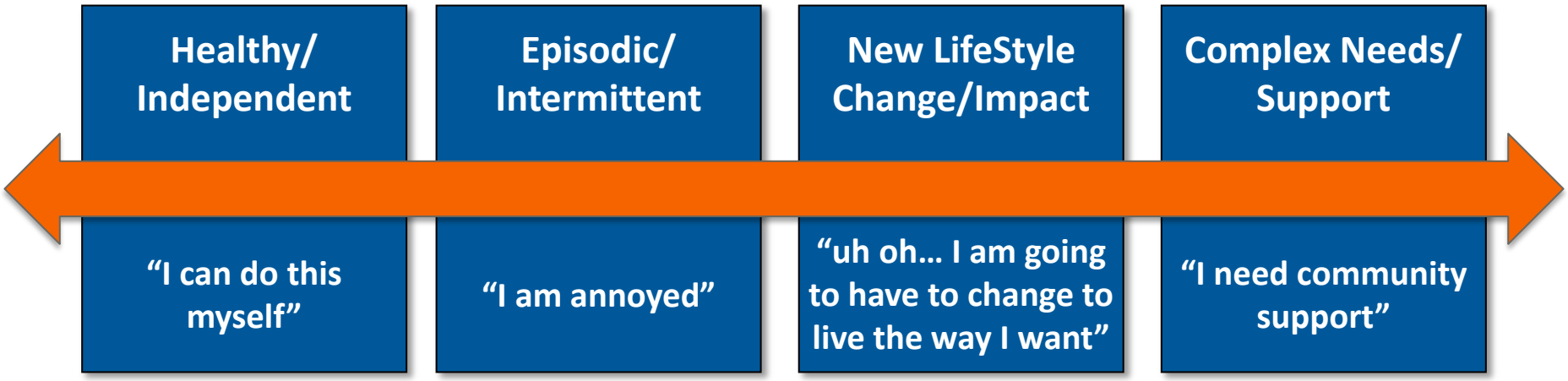
Consumer Model of Health Care

"Living Well / Enjoy Life Every Day in Bite Size Pieces"



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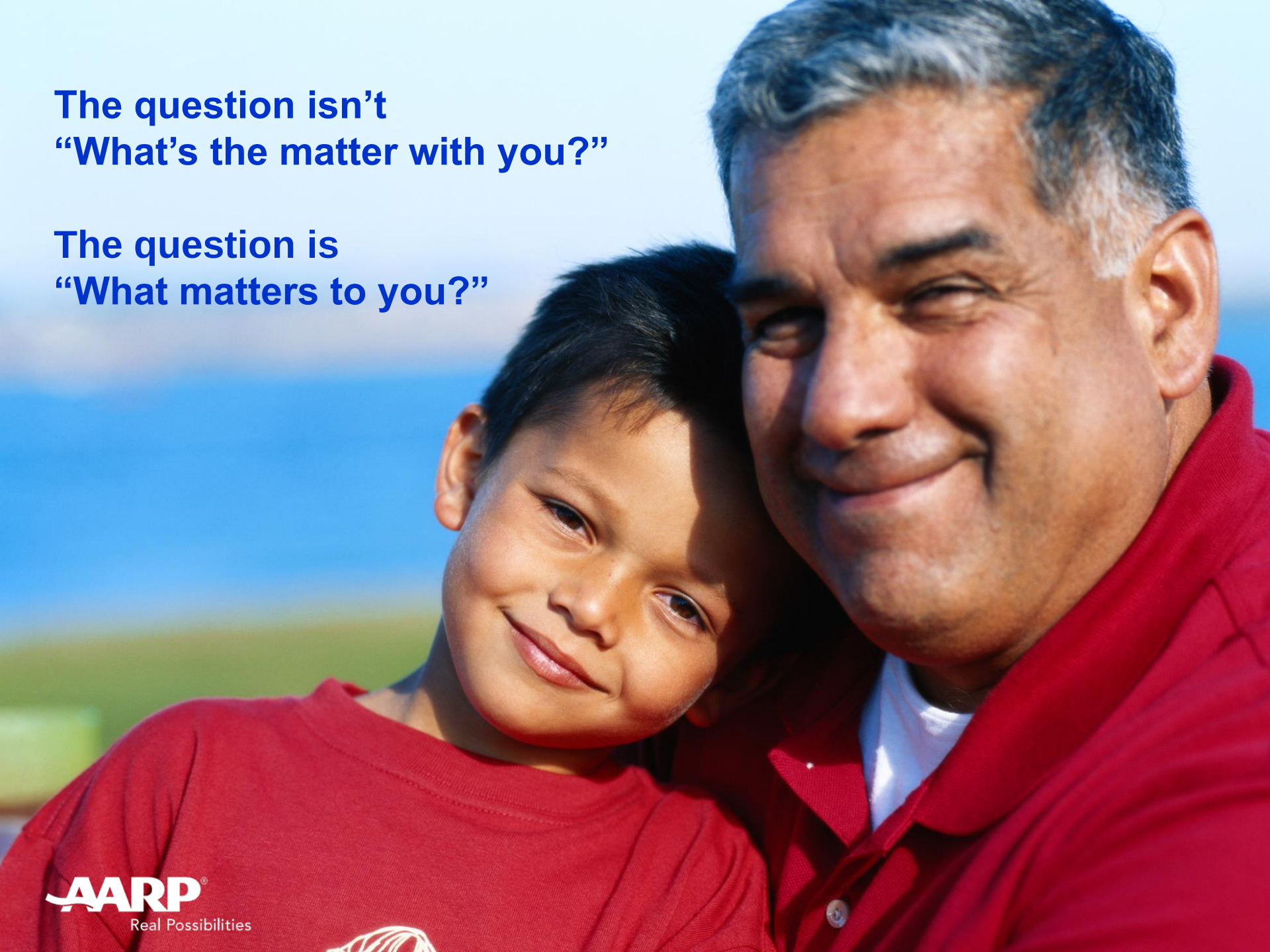
The question isn't
"What's the matter with you?"
The question is
"What matters to you?"
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The future is here.
Are you ready?
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Questions?

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