# Alzheimer's Disease and Related Disorders Advisory Committee Meeting Minutes

June 9, 2022 10:00 AM – 1:00PM

## Locations: California Department of Aging, Alzheimer's Association (Los Angeles), and via Zoom

### Members, Speakers, and State Representatives Present

#### Members:

Catherine Blakemore, Chair
Darrick Lam, Vice Chair
Meg Barron
Andrea Roberts
Wynnelena Canlas Canio
Sarah Tomaszewski Farias
Dolores Gallagher-Thompson
William Mobley
Pam Montana
Celine Regalia
Julie Souliere
Todd Shetter

### **Speakers & State Representatives**

Sarah Steenhausen Darci Delgado Susan DeMarois Eva Saechao Lauren Groves Amanda Lawrence Karen Mark Claire Ramsey Diana Ramos Kim McCoy Wade Jared Giarrusso

Call to order: Welcome, Committee Member Updates, and approval of minutes

The meeting was called to order by Committee Chair, Catherine Blakemore. The Chair welcomed a new member. Members provided updates to the committee.

### 10:00 am | Fiscal Year 2022-2023 Committee Priorities Recap

- Catherine Blakemore, Committee Chair and Committee members

### **Updates by Chair**

- Subgroup met to discuss concerns related to Advisory Committee statute
  - Shorter terms for those living with dementia on committee group achieved consensus that terms should be the same length for all members. That has been incorporated into AB 1618
- Vice Chair is going to work with a small group to discuss issues related to isolation in individuals living with dementia during the pandemic, especially those living in long-term care communities how to better balance protection of health with mental health needs and the impact of social isolation
- Chair is going to work with Dr. Mobley and others related to intersection of individuals living with Down syndrome and Alzheimer's put together a presentation
- Heard from Dr. Canio related to incapacity letters and what options exist to honor wishes in a way that is legally binding – future presentation

### **Dementia Care Aware Presentation & Discussion**

Dr. Karen Mark, CA Department of Health Care Services

### Dementia Care Aware (DCA)

- Noted new name
- CMS announced that HCBS Spending Plan funds can be spent through March 31, 2025 (extra year), funding approved remains at \$25 million
- Training to be launched in July at Dementiacareaware.org
- Phase I (April August 2022)
  - Screening tool recommendations, training development, continuing medical education, accreditation, and maintenance
- Phase 2 (September 2022 March 2024)
  - Practice-level implementation support, training evaluation and updates, training outreach and engagement
  - Education and practical support
- UCSF and DHCS established a Clinical Advisory Board (CAB) to inform DCA activities
- CAB comprised of key stakeholders, including: primary care providers, community-based organizations, dementia experts from UC campuses, Alzheimer's Disease Centers, and CDPH

#### Senate Bill 48

• SB 48 establishes an annual cognitive health assessment as a Medi-Cal benefit for beneficiaries aged 65 and older if they are otherwise ineligible for a similar assessment as part of the Medicare Annual Wellness Visit.

- Pending legislative appropriation, Medi-Cal providers will be eligible to receive payment for this Medi-Cal benefit, for Medi-Cal-only beneficiaries, if they:
  - Complete cognitive health assessment training, as approved DHCS (Dementia Care Aware training)
  - Use one of the validated tools recommended by DHCS

### Cognitive Health Assessment (CHA)

- Designed by UCSF to be used by PCPs
- Includes initial assessments that are
  - o Free to use
  - Quick to administer
  - Easy to score
  - Validated in primary care
  - Available in multiple languages
- Assessments can be done by different members of the health care team
- Assessments can be done longitudinally over multiple visits
- 65+ who don't already have a dementia diagnosis will be eligible for assessment
- CHA allows you
  - 1. to have **improved awareness of cognitive and functional symptoms** that could be dementia and
  - 2. to start a brain health plan for all older adults.
- The CHA is: 3 steps, head to toe, in 15 minutes, in any language
  - 1. Head (Cognition)
  - 2. Arms (Function)
  - 3. Legs (Support System)
- There are next steps, based on results of screening, making sure people get the care they need
  - Cognition additional screening/tests, referrals
  - Function Referrals for caregiver support, money management, meal delivery, etc.
  - Support system document caregiver info, support them

### **DCA Training**

- Case based and interactive
- Addresses key populations
  - Non-English speaking
  - Co-morbid substance use disorder
  - Co-morbid serious mental illness
  - People living with disabilities
  - Older adults experiencing homelessness
- Addresses how to do the assessment over the phone, asynchronously, and by other team members
- Aiming for 90-minute training; will have guizzes

### Question and Answer

Q: Is this connected to work American Hospital Association is doing related to Age-Friendly Health Systems?

A: It's not, but we can reach out to them.

Q: Why is it starting at 65? Some people are diagnosed at younger ages. Could it help those who are younger?

A: There was a lot of discussion around this. We recognize that there are some younger than 65 who develop dementia. We didn't feel that it was appropriate to screen <u>everyone</u> who is younger than 65, but we will include in the training that people can present with symptoms at a younger age. Screening starts out asking if people are having any cognitive issues – providers will be trained that if someone younger reports those, they should be screened (billed under a different payment code).

Q: I was diagnosed at 52. It is a big issue for younger people with cognitive decline who are trying to become eligible for SSDI. There's a gap in getting a full assessment to be able to qualify. It would be nice if they could add that to the consideration.

A: Training is designed for all providers, no matter what insurance they accept. Thanks for bringing up the issues re: coverage.

### **Standards of Dementia Care**

- Dr. Diana Ramos & Lauren Grove, CA Department of Public Health (CDPH)

### Overview

- 2021-22 Budget Act CDPH received \$24.5M for new Alzheimer's funding
- 5 areas one of those was Standards of Dementia Care
- Includes \$1.7 Million for Statewide Standards of Dementia Care Model and \$2.12 Million for Predictive Analytics
- Using recommendations provided in the *Our Path Forward* report
- Focusing on how to integrate caregivers into care planning
- Predictive analytics how to optimize primary care practices to identify high-risk individuals
- Conducted key informant interviews to ensure work complements other efforts

#### Statewide Standards of Dementia Care Model Direction

- Will look at what can be done with a prevention/risk reduction focus use best practices from Healthy Brain Initiative and other models
- Focus on peer to peer and what can be done at the community level
- Also focus on creating a public health prevention and risk reduction workgroup (internal CDPH workgroup from multiple programs) – how to partner with other programs on standard and strong statement around prevention of dementia
- Integrating caregivers into care planning
- Partnering with Alzheimer's Disease Centers to update clinical care guidelines (last updated in 2017)
- Update and make available for providers to use and share with caregivers
- Predictive analytics Alzheimer's Predictive Algorithm
- Study to validate and identify sensitivity in Underserved/Underrepresented Populations
- Integrate into Primary Care Provider Practices so patients can get a dementia risk score

### **Dementia Care Aware**

- Meg Barron and Jared Giarrusso, Alzheimer's Association (AA)
  - Alzheimer's Association has hired a DCA Director: Ron Spingarn
  - Looking forward to the partnership going forward
  - Less than half of individuals with Alzheimer's receive a diagnosis
  - It's a priority for AA for people to get an early and accurate diagnosis
  - They're very hopeful that it will engage providers and encourage them to provide diagnosis and care for their patients and that it will be extended beyond direct beneficiaries of SB 48, through the provider trainings
  - Taking steps to building evidence-based, consensus guidelines that can show better outcomes for dementia patients

### **Question and Answer**

Q: Is there a way that screening data (Medicare) can be looked at?

A: Would be a great project for an academic partner. Good issue to keep in mind.

Q: Is there anything Advisory Committee can do to be helpful? Participate in trainings? Other?

A: Training will be web-based and open to everyone. You are welcome to attend training and send feedback if you have any. They can send a link once it's up. Your input during the meeting has also been helpful as they prepare the training. There will probably be additional requests as they continue planning and get input along the process.

Q: Will you include healthy lifestyle promotion in updated clinical care guidelines?
A: Yes, CDPH plans to include prevention and risk reduction messages in all their documents.

Q: How is risk factor data going to be rolled out to PCPs? Checklist through electronic medical records? A: CDPH is looking at funding multiple practices – including in electronic medical records, might not be feasible in all settings. That may be one route, but there may be other options.

Q: Is there an active/informal role for new Office of Medicare Innovation and Integration in thinking about data sets and what might be possible?

A: Yes, they are working with them (e.g., looking at data on dual eligible). Diana will talk with them about potential of looking at Medicare cognitive screening data.

Q: When do you expect the clinical care guidelines to be updated and out? A: They don't have a timeline yet, but CDPH can provide updates.

### 10:55 am | Legislative & Budget Updates

- Jared Giarrusso, Alzheimer's Association and Committee Members

### Jared Giarrusso's Legislative and Budget Updates

29 bills introduced this year; five are Alzheimer's-specific. All bills are in second house or have been held for the session. Alzheimer's Association tracked ALZ bills, as well as bills that focused on Long-Term Services & Supports/Affordability, conservatorship, law enforcement training, housing, and home and community-based services.

January proposal and May Revise included a \$10 million continuation of funding for Healthy Brain Initiative; \$350 million Community Health Workers, Climate & Homelessness, and Dementia; \$36.6 million for Master Plan for Aging Implementation.

Last week, the Legislature agreed on priorities; budget agreement includes \$20 million for an ALZ/Dementia caregiver pilot program.

### Alzheimer's-specific bills:

- AB 2175 (Rubio): CA Wandering Taskforce. Status: Held in appropriations.
- **AB 1684 (Voepel):** for Department of Aging to implement an ALZ Public Awareness Campaign. Status: Amended to focus on needs of unpaid caregivers; likely to return next year, needs clarifications from Department of Justice (per Debra Cherry)
- **SB 861 (Limón):** To provide Dementia Care Navigation via Community Health Worker's (CHW) and *promotoras*. Designed to be a pass-through grant program via CA Department of Aging. ALZ Assoc has been encouraged by the Governor's \$350 million CHW proposal and are hopeful there will be an opportunity to move the bill forward. Status: With Assembly 0 Long Term Care, no bill hearing set yet. Have had only positive engagement on the bill.
- **AB 2583 (Mullen):** To provide dementia training for law enforcement and peace officers, including dementia competency in the crisis intervention for Police Training Officers and extend to all officers by 2030. Cost: \$13.5 mill & \$1 million annually. Status: Positive feedback from legislators; held in appropriations; will likely move forward with a similar bill tomorrow.
- AB 1618 (Aguiar-Curry): Healthy Brain Initiative & Advisory Committee Updates. Expands HBI grant program, updates the Advisory Committee membership, establishes HBI Office in the CA Department of Public Health. Governor's proposal: \$10 mill past this week (6/8) Status: Passed through Senate Health Committee yesterday

**Committee Updates:** 20 members (previously 14), Removing term limits priority, add local health representative, modify caregiver language, remove stigmatizing language, language uplifting diversity, allows CHHS Secretary authority to appoint additional members (limited to 25), Senate health committee staff request

### **CDA & MPA Updates by Susan DeMarois**

Talked with the committee about the Elder & Disability Justice Coordinating Council. This Committee is welcome to provide a presentation at the EDJCC meeting given overlapping priorities.

\$5 million in this year's budget to relaunch the Alzheimer's day care resource centers – CDA is working closely with partners and will release a request for applications soon.

Conducting final interviews for Alzheimer's Specialist position who will likely start in July.

Launched the Office of the Patient Representative, led by Susan Rodrigues. Focuses on serving nursing home residents who lack capacity and who lack a representative, many of whom have Alzheimer's and dementia.

Submitted Administration for Community Living statewide grant application for a Dementia Care Navigation model to be embedded in Area Agencies on Aging and Aging and Disability Resource Connections using Community Health Workers.

### May Revise Updates:

- Caregiver Resource Centers administrative responsibilities to be shifted to CDA the focus, role & responsibilities will remain unchanged.
- CDA continuing work on the No Wrong Door system, a single point of entry for families and caregivers.
- CDA still actively working on COVID-19 in collaboration with CDPH on vaccination, boosters, treatment.
- Long-term Care Ombudsman active on facility closures around the state.
- World Elder Abuse awareness Day: Collaborated with Department of Rehabilitation and Department of Social Services to screen a film on loneliness & Isolation.

### 11:25 am | 15 Minute Break

### 11:40 am | Healthy Brain Initiative Updates & Discussion

Lauren Grove, CA Department of Public Health

### **Healthy Brain Initiative (HBI) Update**

HBI Purpose: To advance cognitive health as an integral part of public health in each of the six funded counties, implementing the CDC's HBI 2018-2023 Roadmap.

Six counties have been funded at \$750k/year for two years ending in June 2022: LA, Placer, Sacramento, San Diego, Santa Clara, Shasta

HBI's Goals/Domains: 1) Educate & empower, 2) Develop policies & mobilize partnerships, 3) Assure a competent workforce, and 4) Monitor & Evaluate.

Lauren shared project highlights from each county:

- Los Angeles: Developed a culturally tailored community education curriculum, webinars for health care professionals
- Placer: Implemented Project Lifesaver (emergency preparedness for a person living with dementia who is lost), developed a transportation guide for older adults, become a virtual dementia tour license provider
- Sacramento: Implemented Dementia Dialogues, 10 Warning Signs of AD, and bilingual campaign, partnered with CSUS for student-led medical clinics
- San Diego: Monitoring & evaluation, annual plans and eval documents, using the information to update caregiver handbook, worked with 2 Federally Qualified Health Centers to implement ALZ & dementia guidelines, incorporated ALZ messaging into public health messaging, developed a provider training series
- Santa Clara: Implemented media campaign "Know Where Alzheimer's and All Dementia Hide in Santa Clara County," held many Healthy Brain workshops, worked with SCC Medical Association's quarterly magazine to feature brain health.
- Shasta County: Launched a health education campaign; hosted several lunch and learns, health
  fairs, and a symposium; launched 8-week caregiver support cohorts; emergency and disaster
  training with individuals living with ALZ.

HBI program has allowed counties to integrative, asses, and tailor programs to community's needs. Counties have built great partnerships across sectors

### What's Next for HBI?

\$10 million one-time funding is anticipated in 22-23 State Budget.

HBI will continue supporting programs, building sustainability, funding new programs for local depts.

Future of Healthy Brain initiative (HBI 2.0): added focus on sustainability (continued partners, added focus on rural counties), a train-the-trainer program for current finding recipients to support future funding recipients, develop a HBI Best Practice Toolkit

 Best practices identified: strong community assessments, community specific tailored messaging; healthy eating & moving curriculum/ messaging resonated with communities; resource libraries; coalitions and advisory councils; IT connectivity, especially in rural communities

At the end of the grant funding, CDPH will collect the grantees' materials and make available to the public.

CDPH is currently developing the next round of HBI's Request for Applications. Focus is on underserved and underrepresented communities. Open to feedback on how to best identify underserved and underrepresented communities. Catherine Blakemore suggested having partners representing diverse communities identified in the application. There was a suggestion to include a diverse advisory committee for the project as an application criterion.

## 12:10 pm | Master Plan for Aging Updates & CA4ALL Ages & Abilities Day of Action Presentation & Discussion

- Amanda Lawrence, CA Department of Aging; Nancy McPherson, AARP California

#### CA for All Ages & Abilities: Day of Action (September 20<sup>th</sup>)

The event will be held at the Sacramento Convention Center and will be attended by key leaders working on aging and disabilities issues and priorities.

The IMPACT Stakeholder Committee released its annual report, which identified three top priorities for the next phase of the Mater Plan for Aging: Ending older adult homelessness, strengthening the direct care workforce, and elevating equity for all.

Seven stakeholder committees will attend the event and present their top 2-3 priorities for the MPA to pursue in 2023-2023

- i. ALZ Disease & Related Disorders Advisor
- ii. CA Aging & Disability Research Partnership
- iii. CA Elderly & Disability Justice Coordinating Council
- iv. Equity in Aging Advisory
- v. IMPACT Stakeholder
- vi. Disability & Aging Community Living Advisory
- vii. CA Commission on Aging

A small workgroup will meet to develop the recommendations and report back to the larger Committee at the September 9<sup>th</sup> meeting.

### 12:30 pm | Public Comment

Clarification in chat: Barbara McLendon is with Alzheimer's Los Angeles, not the Alzheimer's Association.

### 12:40 pm | Finalize Recommendations and Items for CalHHS Secretary

- Darrick Lam, Committee Vice-Chair

Feedback will be taken forward to the CA HHS Secretary

- Catherine Blakemore: Presentations about Dementia Care Aware and Standards of Dementia Care were very informative. I look forward for opportunities for Committee to be involved. Committee provided good suggestions re: younger-onset, Medicare data sharing, etc. Expressed appreciation to Agency for leading this effort.
- Darrick Lam: expressed appreciation for upcoming 9/20 meeting on Master Plan on Aging.
   Thanked Jared for updates on legislative activities and Susan for sharing all that is going on a CDA and the wonderful presenters.
- Andrea Roberts: Recommendation that anyone applying to RFP should have to ensure that a certain percentage of funding should be going to underserved communities. Also address who can help them recruit more people of color.
- Meg Barron: Excited that Committee is going to help advance standards of care work.
- Appreciation for work of staff and for having two in person options

### 12:20 pm | Closing Comments and Next Steps

- Darrick Lam, Committee Vice-Chair None

### 12:28 pm | Adjourn

The Vice-Chair adjourned the meeting.