

CDC PUBLIC HEALTH GRAND ROUNDS

Healthy Aging: Promoting Well-being in Older Adults



Accessible version: <https://youtu.be/Zdfw8uQ-vA4>

September 19, 2017



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention

Promoting Health, Well-being, and Independence as We Age



Sarah Lenz Lock, JD

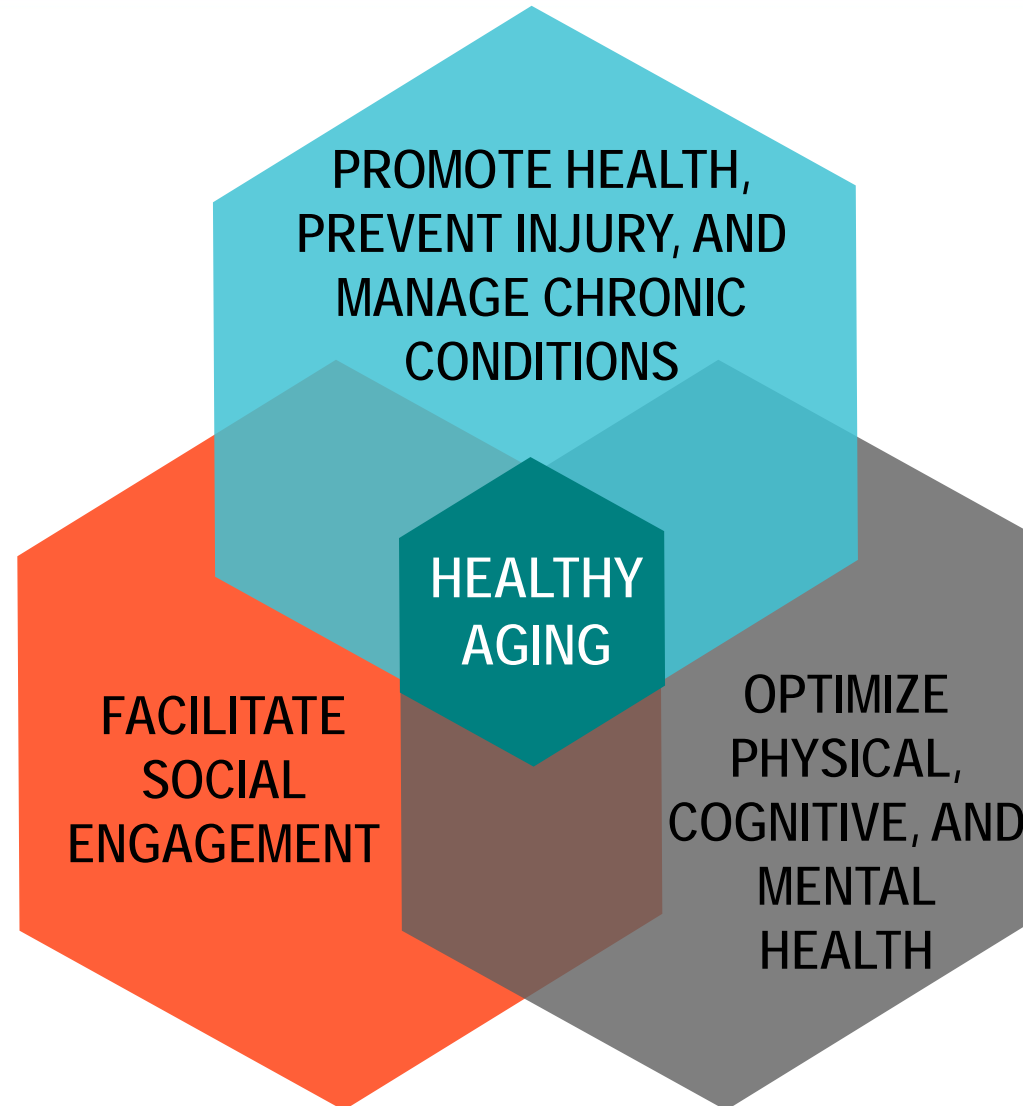
Senior Vice President for Policy, AARP

Executive Director, Global Council on Brain Health



**U.S. Department of
Health and Human Services**
Centers for Disease
Control and Prevention

Guiding Model for Healthy Aging

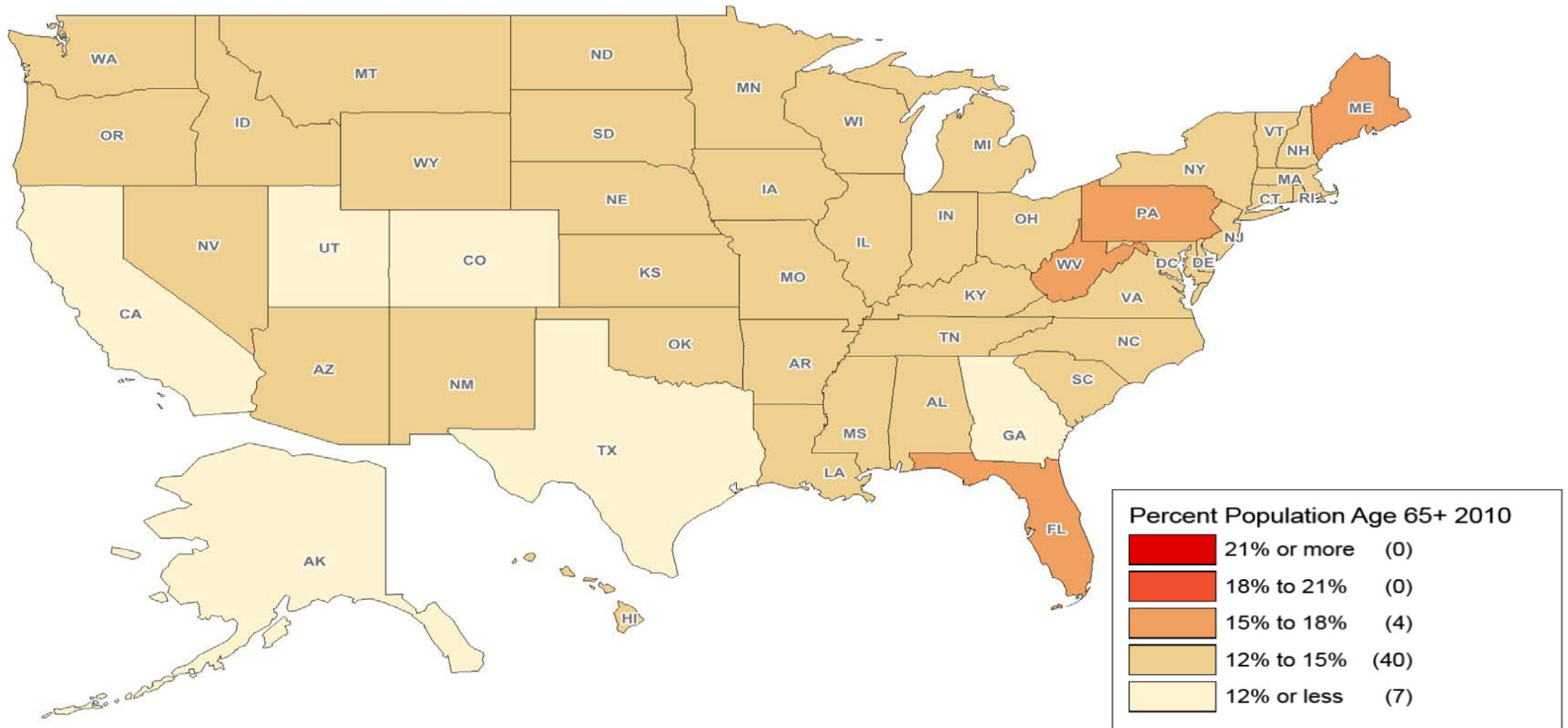


Americans Are Living Longer than Ever

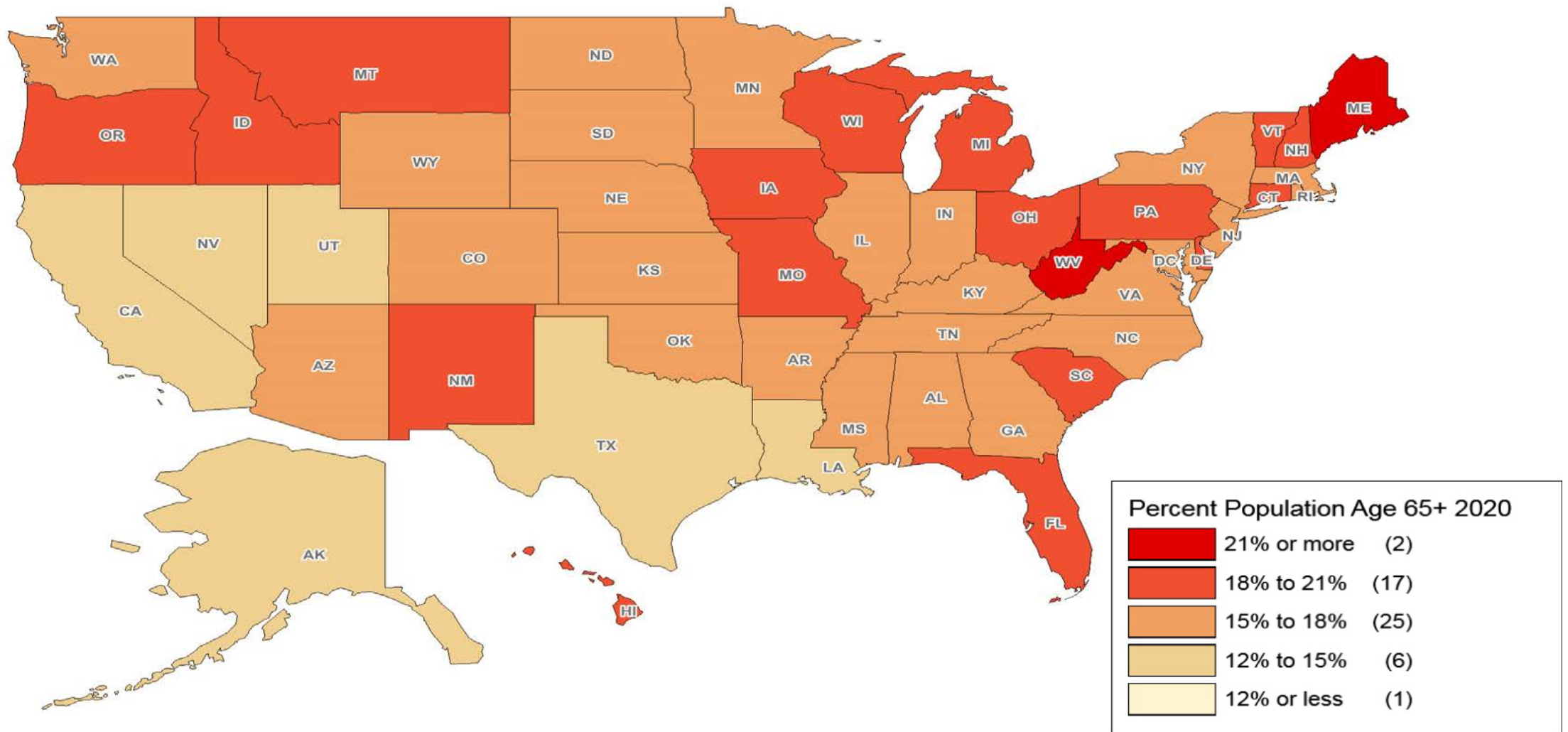
- **10,000 people a day** are turning 65
 - Trend will continue through 2030
- **Between 2012 and 2050, the number of adults age 65 and older will nearly double in the US, reaching 84 million**
 - By 2030, 1 in 5 Americans will be age 65 or older
- **In 2033, the number of adults age 65 and older will outnumber people younger than 18 for the first time in the US**



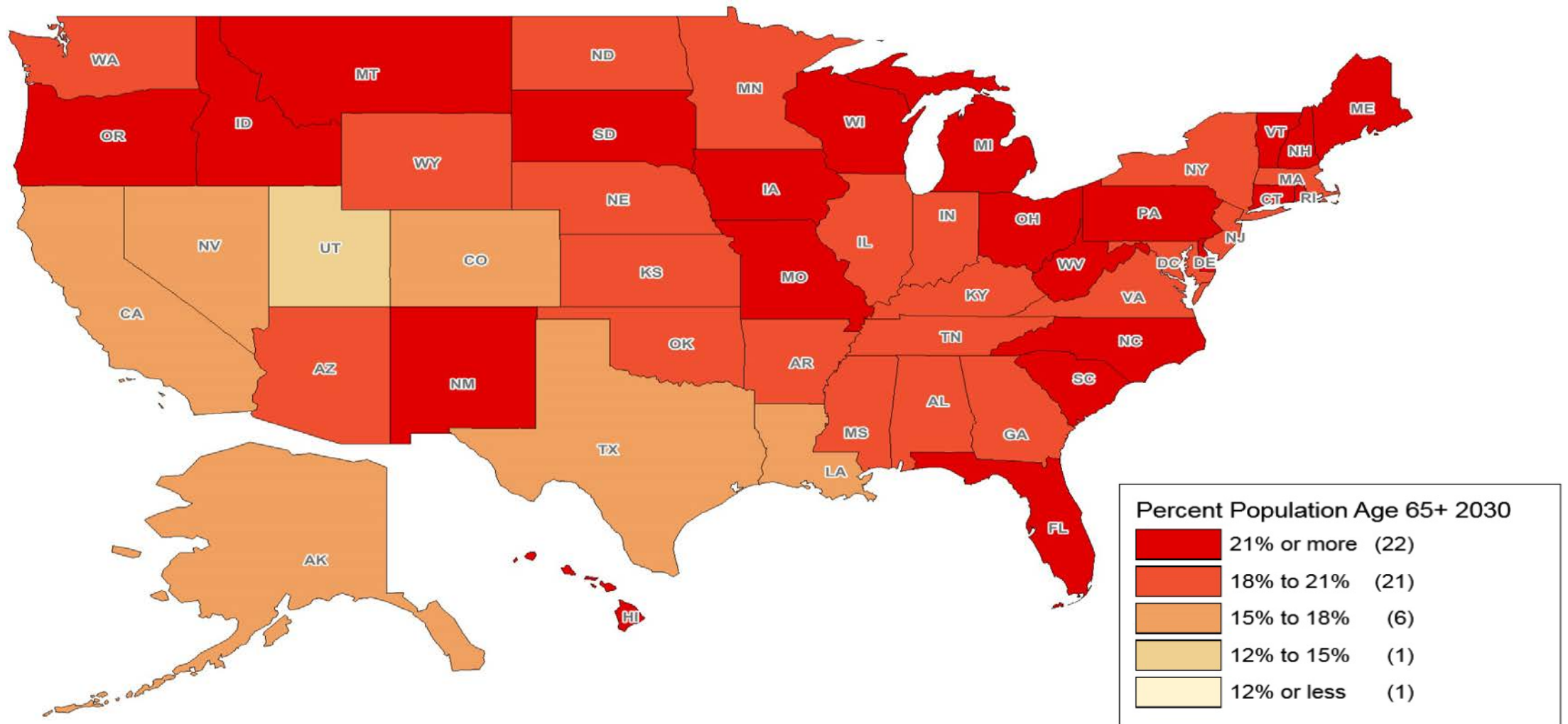
Percent of U.S. Population Age 65 and Older, 2010



Percent of U.S. Population Age 65 and Older, 2020



Percent of U.S. Population Age 65 and Older, 2030



Longevity Bonus

Older People Are a Resource for Our Nation

- **Older workers contribute to the nation's wealth**
- **The proportion of people age 65 and older who work has grown significantly**
 - 80% of people age 50 and older plan to work past 65
 - Almost half of all entrepreneurs are above age 45; one-quarter are above age 55
- **Older workers are experienced, motivated, and highly engaged**

Demographics of Aging



➤ Heterogeneity of older adults

- Racial and ethnic diversity is increasing
- Between 2014 and 2060, the percent of U.S. adults age 65 and older that identify as non-Hispanic white is expected to drop from 78% to 55%

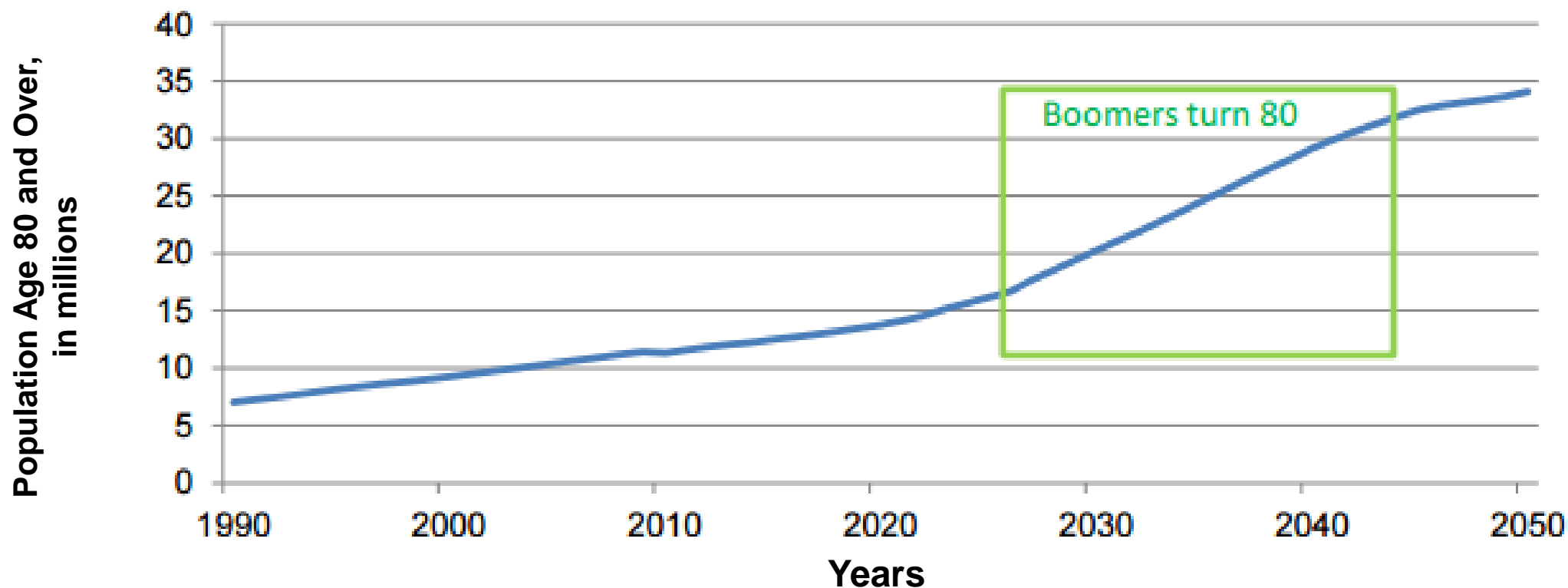
The Fastest Growing Segment is the Oldest Old (Age 85 and Older)

- **The number of people age 85 and older will roughly triple in the U.S. between 2012 and 2050**
- **By 2050, more than 18 million Americans will be age 85 or older**
- **By 2050, more than 439,000 Americans will be age 100 or older**



Increases in Aging Population Present Future Challenges

Projected U.S. Population Aged 80 and Older



Boomers: Individuals born between 1946–1964

www.aarp.org/content/dam/aarp/research/public_policy_institute/lrc/2013/baby-boom-and-the-growing-care-gap-insight-AARP-ppi-lrc.pdf

Challenges We Face as Society Ages

- Some people are **not living the dream** of a longer and better life
- Life expectancy has increased but **not equally** for all racial and ethnic groups
- Some are **living longer but not living better**—increased disability
 - 80% of older adults, aged 60 and older, have at least one chronic condition
- Many have **inadequate incomes to match** their increased lifespans



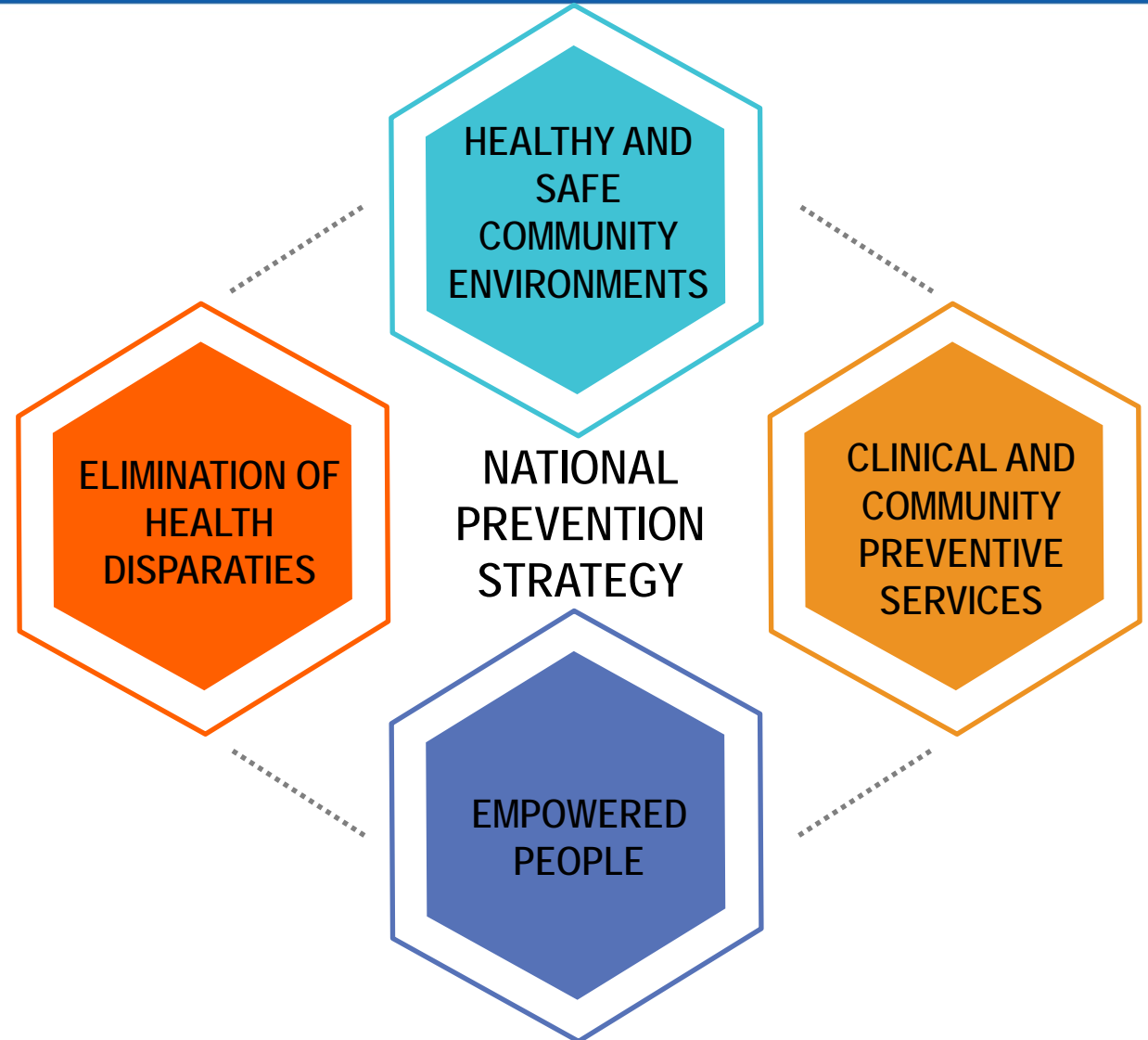
Need for Assistance With Daily Living Activities Will Increase

- **Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL) limitations**
 - 1 in 3 older adults 65+ have ADL limitations

**Instrumental Activities of Daily Living include:
managing money, shopping,
telephone use,
travel in community, housekeeping,
preparing meals, and
taking medications correctly.**



Healthy Aging in Action Plan



Clinical and Community Preventive Services: Getting Patients to Service

While the health industry offers preventive services, patients can face challenges in getting to those services if they no longer drive and have limited or no access to transportation



Rides to Wellness

***Department of
Transportation***

Empowered People: Making Physical Activity a Way of Life

The *Go4Life*® exercise and physical activity campaign from the National Institute on Aging at the National Institutes of Health offers exercise, tools, and tips to motivate people age 50 and older to increase their level of exercise and physical activity



Go4Life®

***Department of
Health and Human
Services***

Eliminate Health Disparities: Bringing Services to the Community

Vote & Vax, a national program of Sickness Prevention Achieved through Regional Collaboration (SPARC, Inc.), aims to increase the number of Americans who get flu shots by offering them near polling places



Vote & Vax

SPARC, Inc.

Ways Medicare Is Working to Maintain Health and Independence

➤ **Welcome to Medicare Visit (WMV)**

- Initial Preventative Physical Exam
- Goals are health promotion, disease prevention, and detection
- Review medical and social history
 - ▣ Including risk for depression and mood disorders

➤ **Create a written plan, like a checklist**

- Discuss advance directives and end-of-life planning
- Educate, counsel, and refer based on findings



Annual Visits Focus on Wellness

- **Medicare Annual Wellness Visit (AWV)**
 - Annual update of history, health risk assessment, and needed interventions
- **Develop personalized prevention plan and provide preventive services**
 - Vaccinations
 - Screenings for diabetes, high blood pressure or high cholesterol, and cancer
- **Visits include cognitive assessment screening**

Medicare Aims to Promote Prevention

- **Goals are to**
 - Increase uptake of preventive services
 - Reduce overall costs
- **Only 7% of older adults receive all recommended preventive services**
- **Only 16% of Medicare recipients had an Annual Wellness Visit in 2014**
 - Increasing utilization is a HP2020 objective
- **Evidence on improved health outcomes related to “Welcome and Wellness” visits is limited**
 - Research is at an early stage

Community-based Wellness Programs in Medicare Can Promote Health and Independence

- **Potential to improve health outcomes and reduce costs**
- **Evidence-based community wellness and prevention programs decreased costs for beneficiaries**
- **Several physical activity programs decreased unplanned hospital utilization and costs, with potential long-term savings**
- **More work needed before these benefits can be optimized in the healthcare system**



How We Can Promote Healthy Aging in our Communities

- **Facilitate cross-sector collaboration and create incentives**
- **Expand evidence base for strategies**
 - Include older adults in public health surveillance and research
- **Make resources that address barriers more widely available**
- **Promote prevention across lifecycle**
 - Vaccines and education are not just for children!
- **Embrace a multidimensional view of healthy aging**



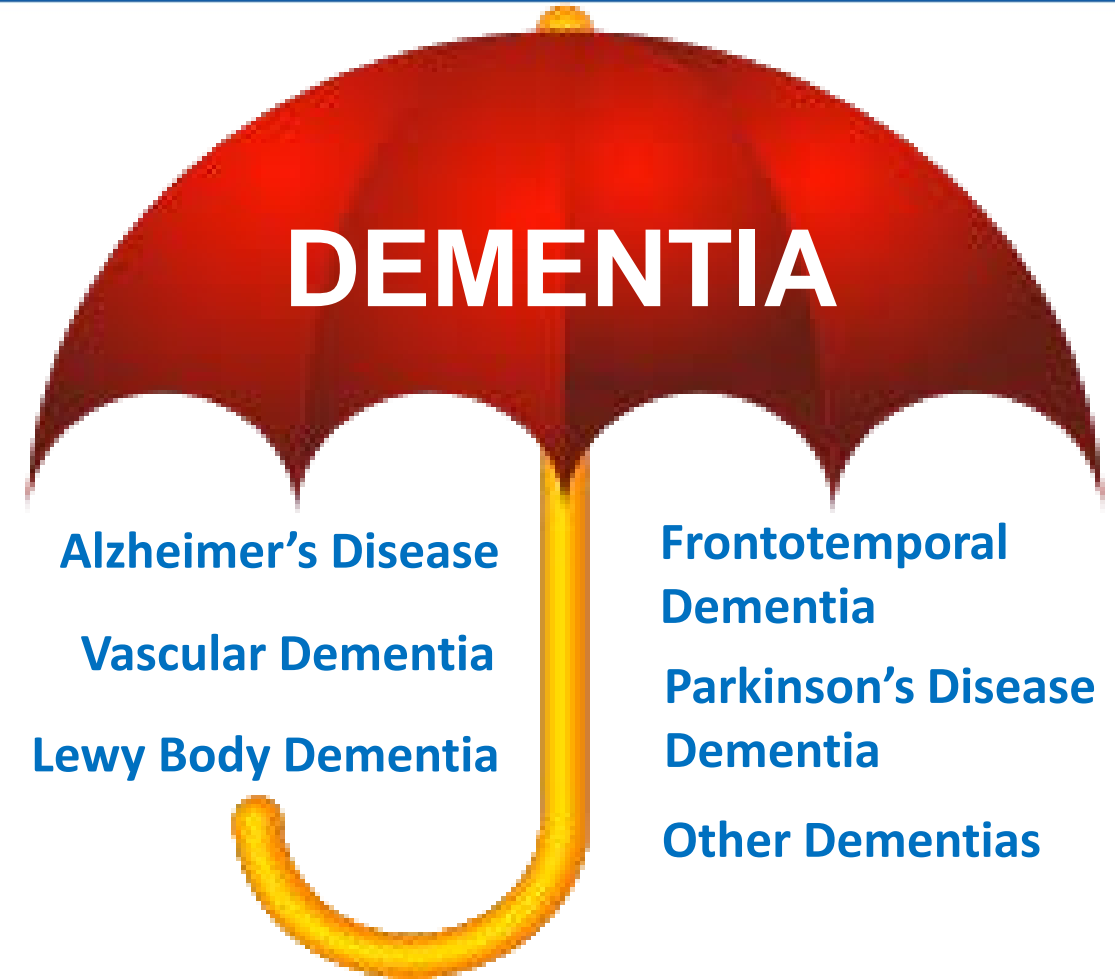
Healthy Body, Healthy Brain: The State of the Science and the Way Forward



Matthew Baumgart
Senior Director of Public Policy
Alzheimer's Association

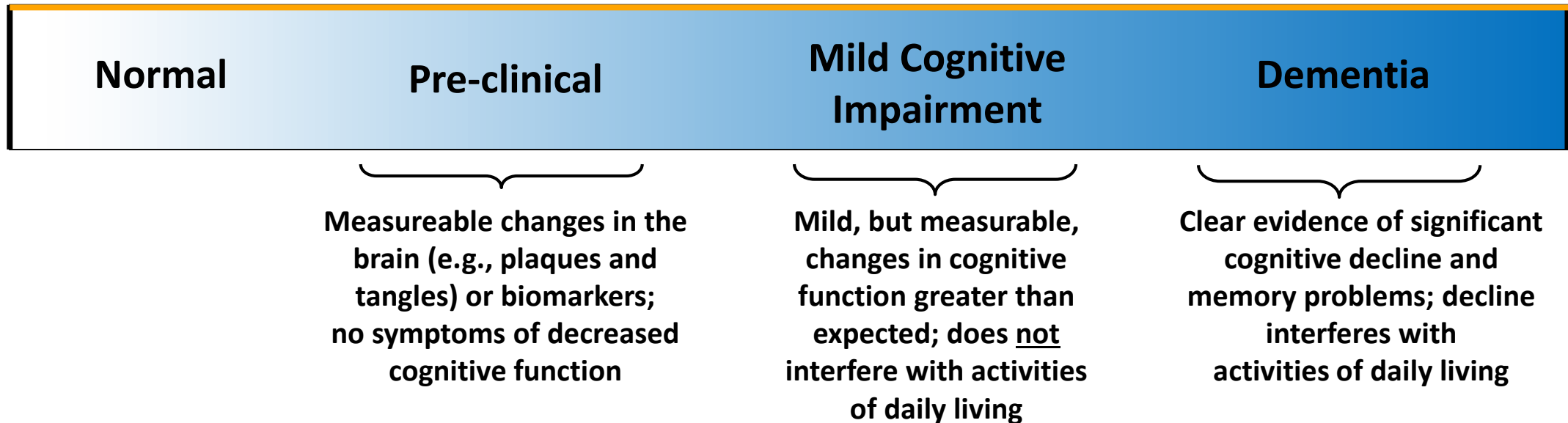
What is Dementia?

- **Dementia is changes in the brain resulting in loss of cognitive function that interferes with daily life**
- **Alzheimer's is the most common cause of dementia**
- **Many (maybe majority) of cases have multiple causes**



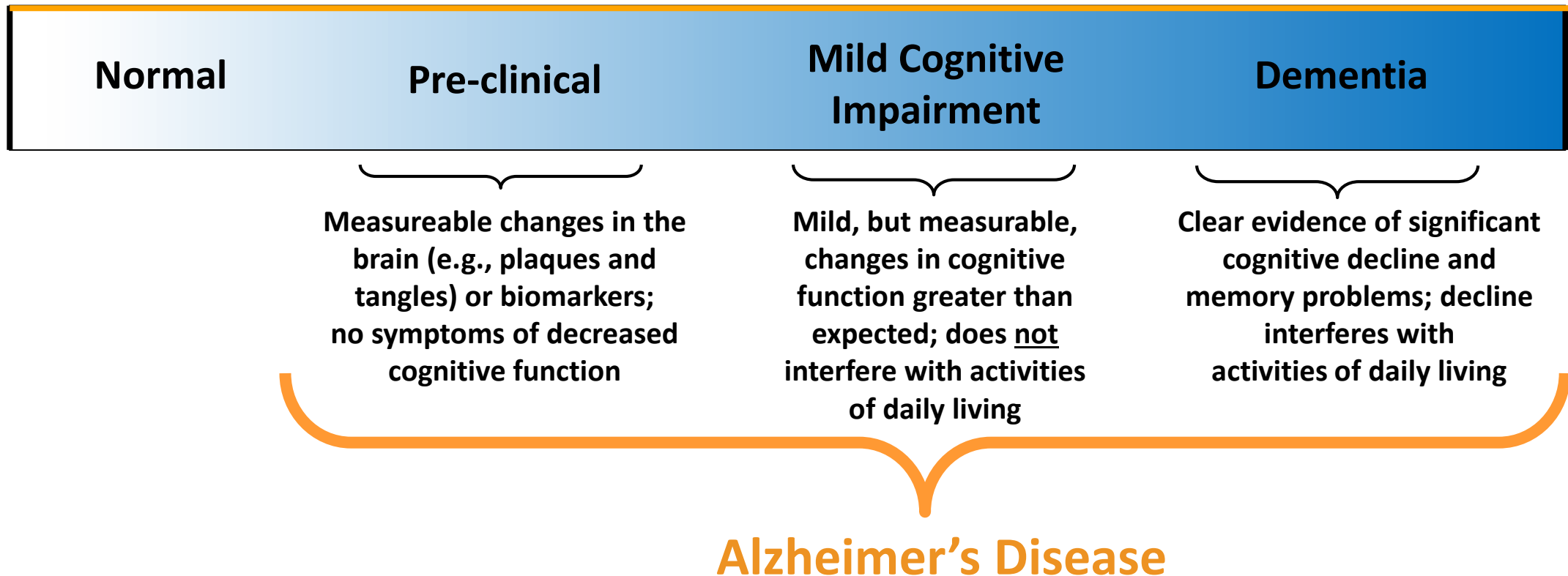
Redefining our Understanding of Alzheimer's

➤ Traditionally, Alzheimer's used to mean dementia



Redefining our Understanding of Alzheimer's

- **New way of thinking: Alzheimer's is a disease where dementia is one stage in the continuum**



Redefining Our Approach to Alzheimer's

“Alzheimer’s is the most under-recognized threat to public health in the 21st century.”

*--Dr. David Satcher
Former Director, CDC
Former U.S. Surgeon General*

Alzheimer's as a Public Health Issue



- **5.5 million with Alzheimer's**
- **\$259 billion costs in 2017**
- **Dementia most expensive disease in America**
 - 6th leading cause of death
 - 5th leading cause of death among Americans aged 65 and older
- **1999–2014: 55% increase in death rate, 110% increase in number of deaths**

Alzheimer's as a Public Health Issue

The
IMPACT
is **MAJOR**



- **African Americans have 2 times greater risk and Hispanics 1.5 times**
- **25% of hospitalizations are preventable**
- **More than 15 million caregivers, providing \$230 billion in unpaid care in 2016 for those with Alzheimer's or other dementias**
- **67% of costs are borne by Medicare and Medicaid**

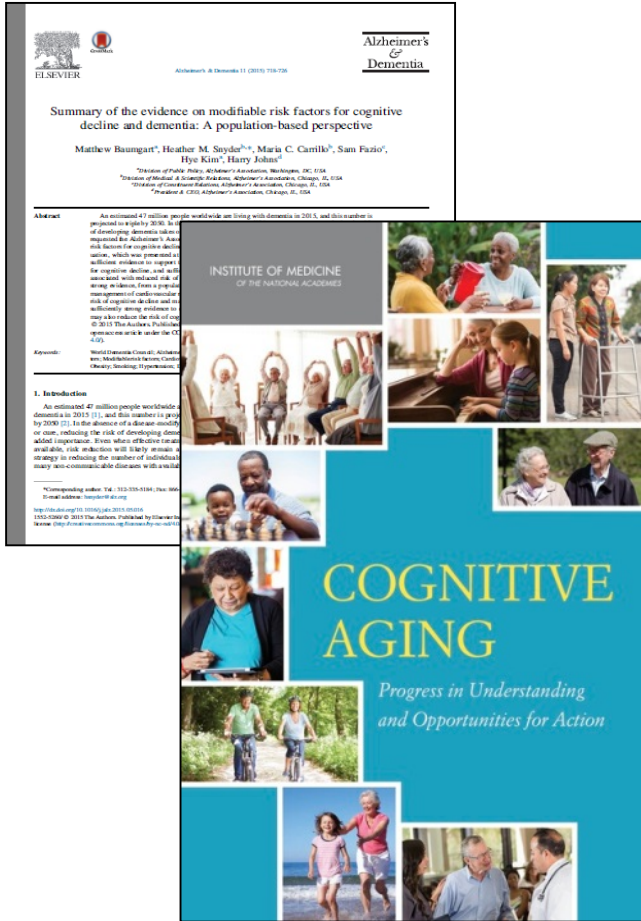
Alzheimer's as a Public Health Issue

There are
WAYS to
INTERVENE



- **Surveillance**
- **Risk reduction—primary prevention**
- **Early detection and diagnosis—secondary prevention**
- **Management of co-morbidities—tertiary prevention**

Primary Prevention: Risk Reduction for Cognitive Decline

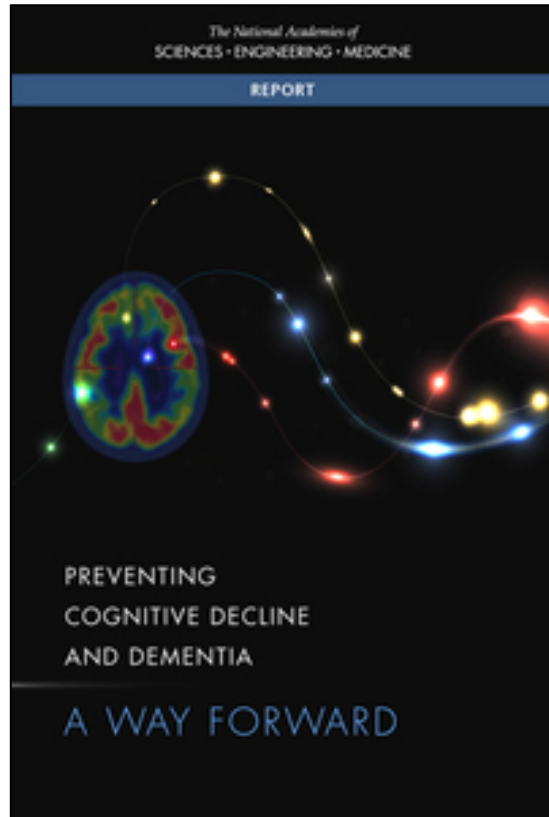


Evidence supports reducing risk of cognitive decline through:

- Physical activity
- Management of cardiovascular risk factors:
 - Smoking
 - Diabetes
 - Mid-life hypertension
 - *Mid-life obesity*

Mid-life obesity was identified as a risk factor only by Alzheimer's Association Institute of Medicine, Cognitive Aging (2015). Baumgart, et al., Alzheimer's & Dementia (2015).

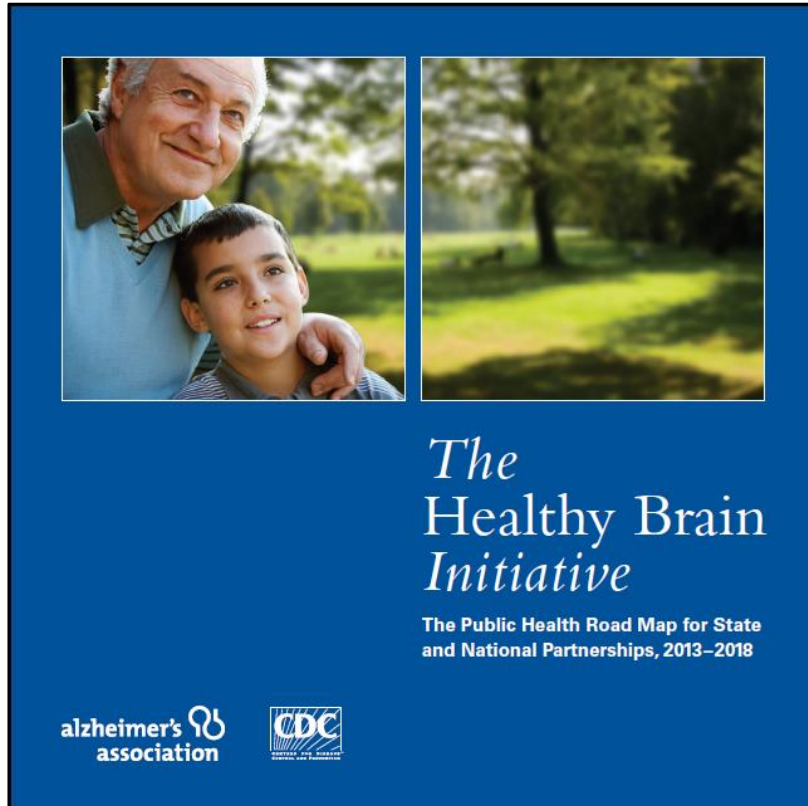
Primary Prevention: Risk Reduction for Dementia



Encouraging but limited evidence on reducing risk of Alzheimer's or cognitive decline through:

- Physical activity
- Management of blood pressure
- Cognitive training

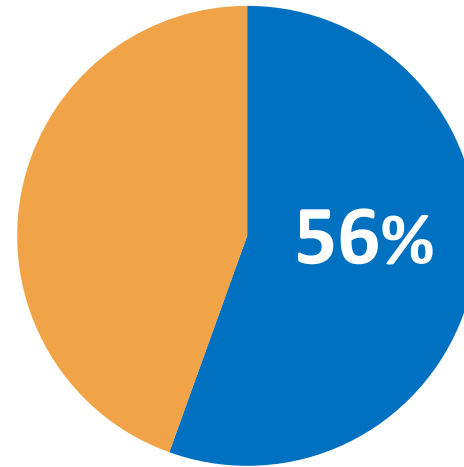
Primary Prevention: Risk Reduction



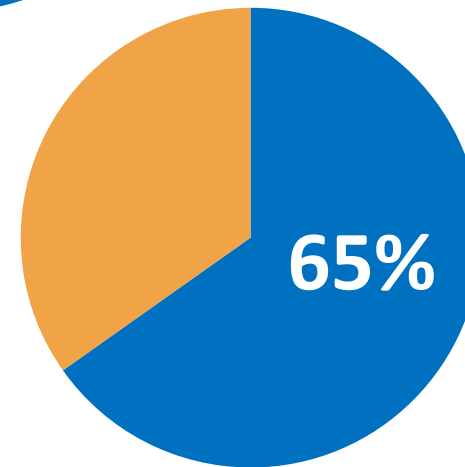
- **Disseminate evidence-based messages about reducing risk of cognitive decline**

Secondary Prevention: Diagnosis and Disclosure

- **People are reluctant to talk to healthcare providers about memory problems**
- **As many as half of those with Alzheimer's have not been diagnosed**
- **Doctors frequently do not disclose an Alzheimer's diagnosis either to patients or their caregivers**



Percent of individuals age 45 and older with Subjective Cognitive Decline who have not talked to a healthcare professional about their memory issues

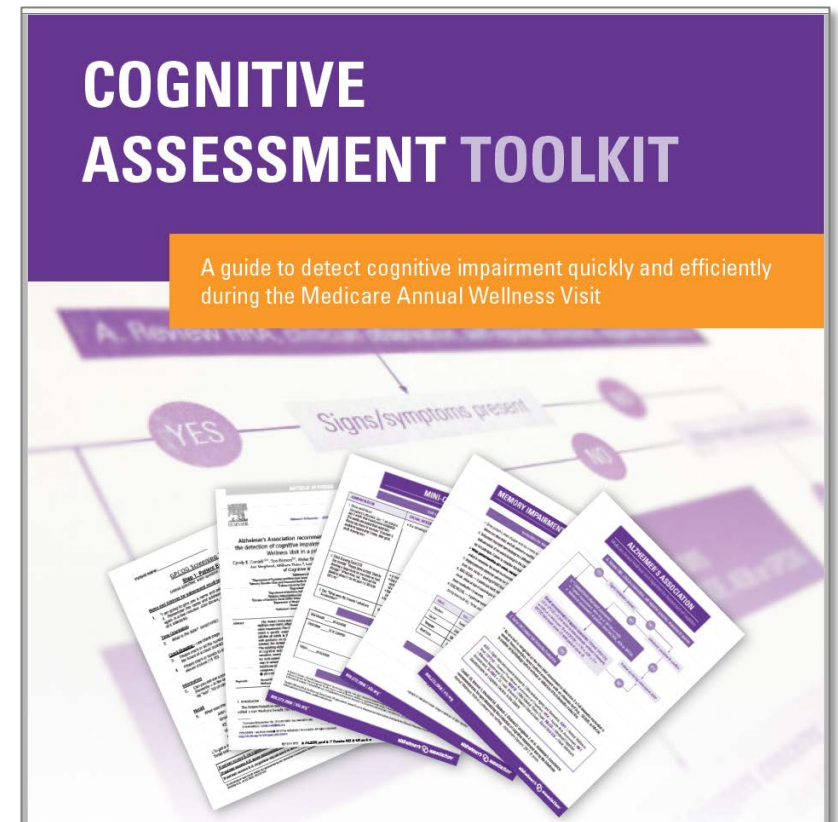


Percent of seniors with a dementia diagnosis where they or their caregivers were unaware of the diagnosis

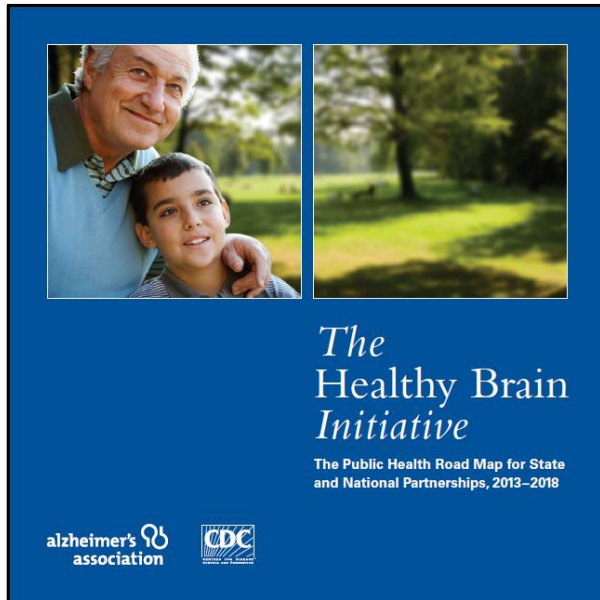
Secondary Prevention: Diagnosis and Disclosure

Early and disclosed diagnosis leads to better outcomes

- **Access available treatments**
- **Build a care team**
- **Improve medication management**
- **Enroll in clinical trials**
- **Participate in support services**
- **Create advance directives**
- **Receive counseling**
- **Address driving and safety issues**



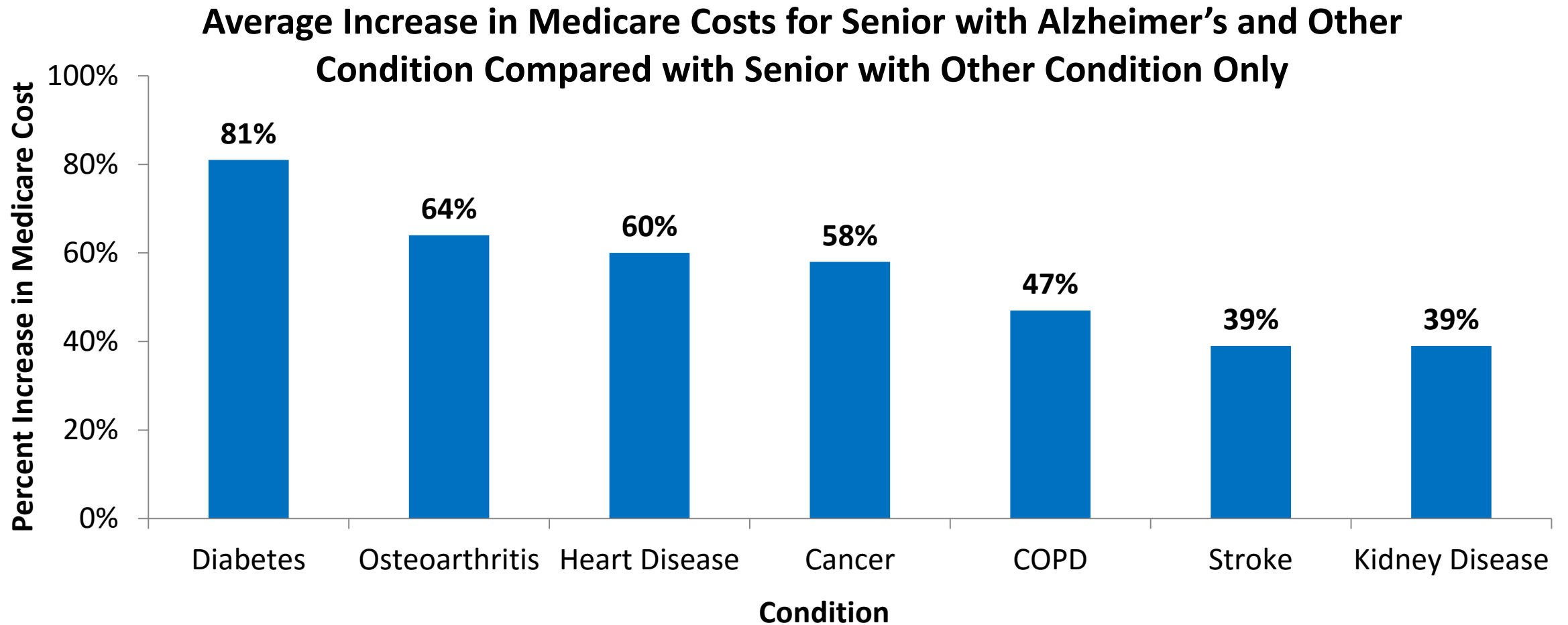
Secondary Prevention: Diagnosis and Disclosure



- **Educate healthcare providers about**
 - Early signs of dementia
 - Validated cognitive assessment tools
- **Promote culturally appropriate strategies to encourage early diagnosis among the public**
- **Increase percentage of people diagnosed with dementia, or their caregivers, who are aware of the diagnosis**



Tertiary Prevention: Improving Chronic Disease Management



Tertiary Prevention: Improving Chronic Disease Management

- **Care planning is key to care coordination and management of co-occurring chronic conditions**
- **Better disease management and medication management will result in**
 - Fewer hospitalizations
 - Fewer emergency room visits

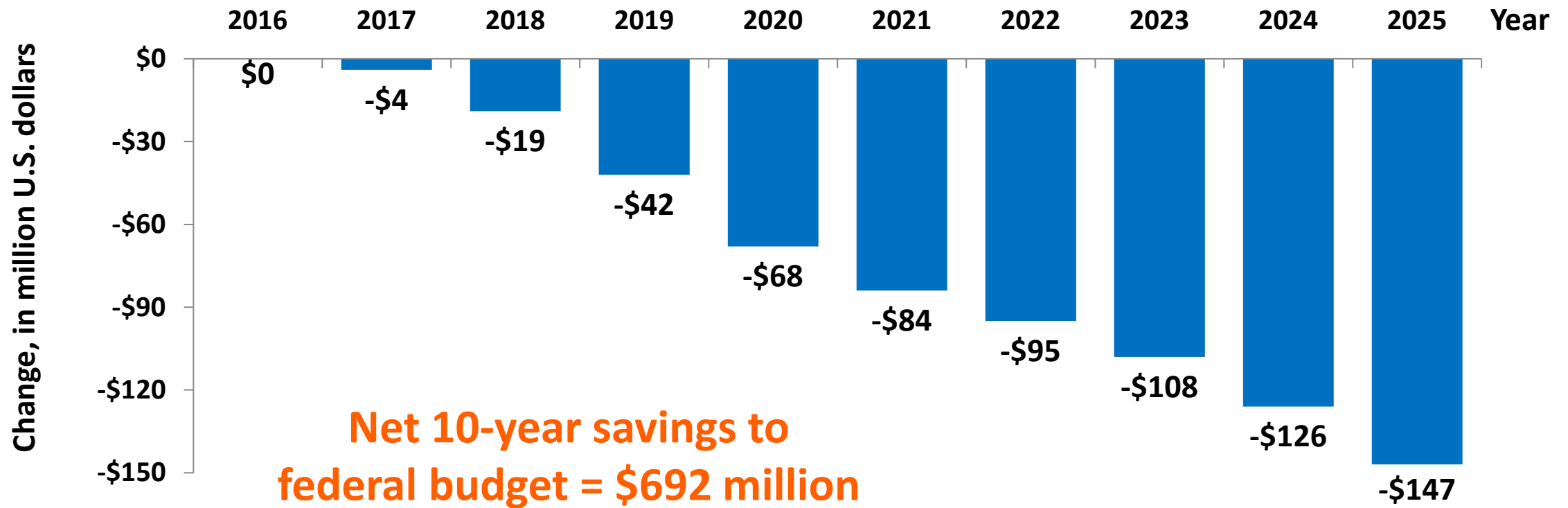
Tertiary Prevention: Improving Chronic Disease Management

Medicare Billing Code G0505

- **Effective January 1, 2017, care planning for individuals with cognitive impairment, including Alzheimer's and other dementias includes:**
 - Evaluating cognition and function
 - Measuring neuropsychiatric symptoms
 - Evaluating safety
 - Identifying and assessing primary caregiver
 - Helping develop advance care directives
- **Can be provided by physicians, physician assistants, nursing practitioners, clinical nurse specialists, and certified nurse midwives**

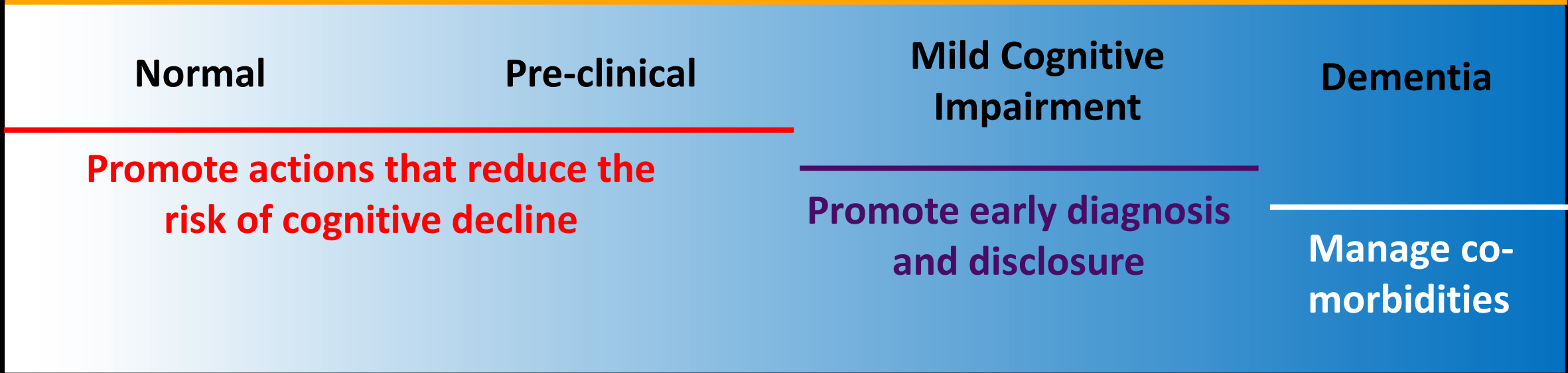
Tertiary Prevention: Savings Due to Care Planning

Estimated Net Annual Change in Federal Medicare and Medicaid Spending as a Result of Care Planning Benefit for Those with Alzheimer's and Other Dementias, In Millions of Dollars



Healthy Body, Healthy Brain: The Way Forward

Three public health touch points in the Alzheimer's continuum



Healthy Caregiver, Healthy Patient: Importance of Healthy Aging for Caregivers



C. Grace Whiting, JD

Chief Operating Officer

National Alliance for Caregiving

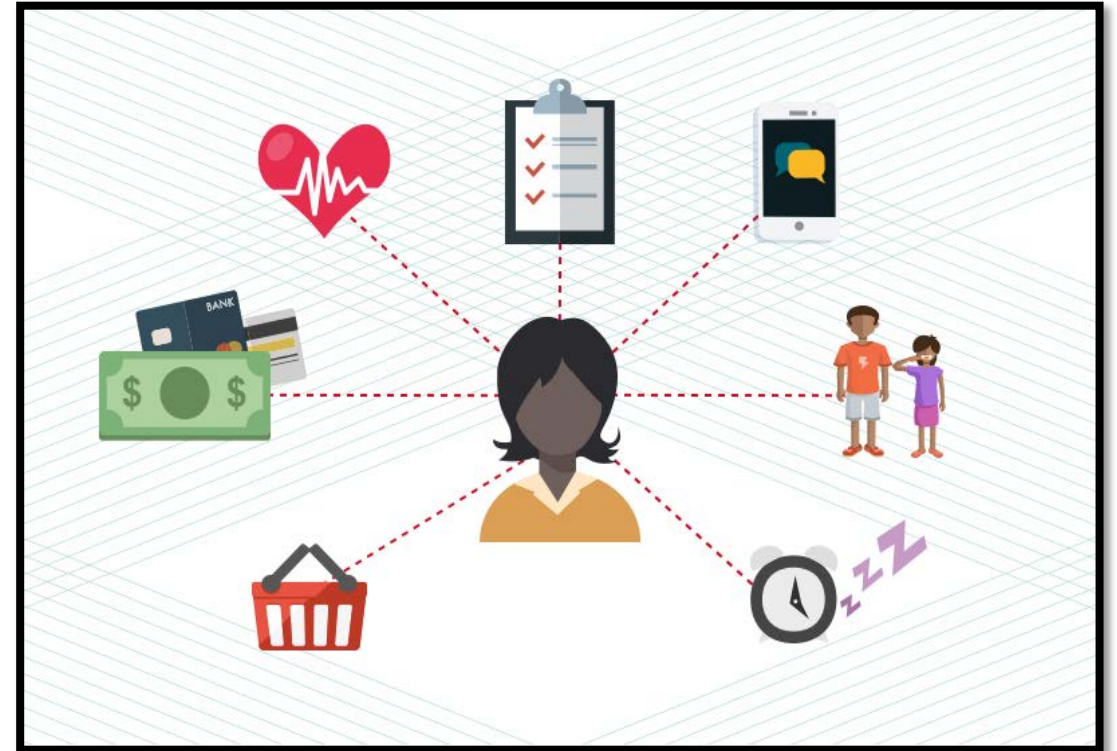
National Alliance for Caregiving

- Nonprofit coalition of over 50 national organizations
- Our mission: To advance family caregiving across the lifespan through research, innovation, and advocacy in the U.S. and internationally



Family Caregiving is a Public Health Issue

- **There are an estimated 44 million family caregivers in the U.S.**
 - Providing assistance with Activities of Daily Living (ADL) to an adult
- **Overall estimated economic value of family caregiving in the U.S. is more than \$470 billion annually**
- **As many as 15 million people are Alzheimer's or dementia caregivers**



Family Caregivers in a Snapshot

- **Caregivers support many tasks, caring 24.4 hours each week on average**
 - 2 Activities of Daily Living (ADLs)
 - 4 Instrumental Activities of Daily Living (IADLs)
 - Medical or nursing tasks
- **Most caregivers are working: 34% full-time job, 25% part-time**
 - 28% are in the “sandwich generation” with children or grandchildren at home

SNAPSHOT

- ✓ 60% Women
- ✓ 40% Men
- ✓ 13% African American/Black
- ✓ 6% Asian American Pacific Islander
- ✓ 17% Hispanic/Latino
- ✓ 62% White

Caregivers Are Members of the Healthcare Team

Caregiving Activity	All Caregivers (n=1,248)	Cancer Caregivers (n=111)	Dementia Caregivers (n=372)
Communicating with healthcare professionals (doctors, nurses, social workers) about care plan	66%	82%*	80%*
Monitoring severity of recipient's condition to adjust care accordingly	63%	76%*	79%*
Advocating for care recipient with healthcare providers, community services, government agencies	50%	62%*	65%*

**Indicates statistically significant difference when compared to all caregivers.*

Caregivers Support Healthy Aging of Populations

- **Caregivers can reduce avoidable hospital readmissions in discharges to the home**
 - By 25% at 90 days and by 24% at 180 days
- **Sometimes, caregivers can help an older adult or person with disability to live in the community longer, delaying costly institutionalization**



Caregivers Need Care Too

- **Neglecting caregiver health, psychological, and financial well-being can put the care recipient at risk**
 - Caregivers may have declining health, especially when caring for someone with high-burden diseases, such as dementia and cancer
 - Many express higher psychological stress, such as depression and anxiety, especially when caring intensifies
 - On average, caregivers spend nearly \$7,000 out of pocket, and minority populations bear a higher cost relative to income

Health Systems Can Help Support Family Caregivers

- **Support evidence-based interventions to promote health and well-being**
 - [REACH](#) (Resources for Enhancing Alzheimer's Caregiver Health), administered through the Department of Veterans Affairs and the Rosalyn Carter Institute
 - [Powerful Tools for Caregivers](#), a self-care training course for family caregivers
 - United Hospital Fund's [Next Step in Care](#), for managing care transitions for chronically or terminally ill individuals who are supported by a caregiver
 - The [Chronic Disease Self-Management Program](#), which can help both caregivers and people with chronic disease manage their health

Providers Can Include Caregivers in the Health Care Team

- **Expand the use of caregiver assessments that can identify the willingness, ability, and readiness of the caregiver to provide care**
 - Medicaid 1915 HCBS Waiver assessments
 - International efforts to assess caregivers and refer to services can be a model for the U.S.
- **Include caregivers as part of the healthcare team**
 - List caregivers in medical records and electronic health records



Everyone Can Educate Caregivers About Existing Programs

- National Family Caregiver Support Program
www.acl.gov/programs/support-caregivers/national-family-caregiver-support-program
- Lifespan Respite Care Program
www.acl.gov/programs/support-caregivers/lifespan-respite-care-program
- VA Caregiver Support Program (Department of Veterans Affairs)
www.caregiver.va.gov/
- Eldercare Locator
www.eldercare.gov
- State and federal tax credits, where available
- Family and Medical Leave Act (FMLA), including the federal FMLA benefit and state paid-leave programs (available in CA, RI, NJ, NY, WA, and DC)

CDC's Healthy Brain Initiative: Moving Forward Together



Lisa C. McGuire, PhD

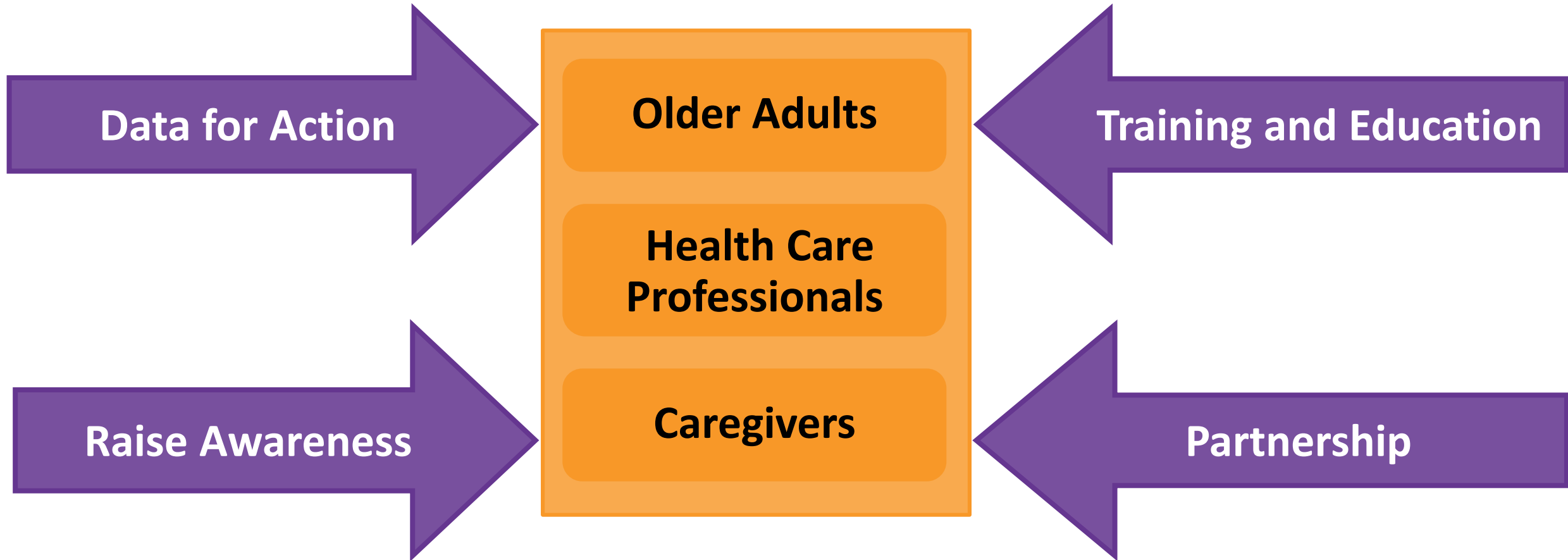
Lead, Alzheimer's Disease and Healthy Aging Program

Applied Research and Translation Branch, Division of Population Health

National Center for Chronic Disease Prevention and Health Promotion

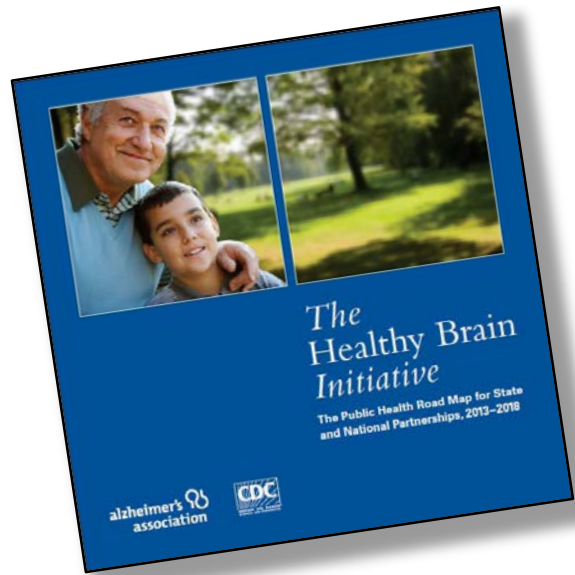


Approaches, Activities and Audiences



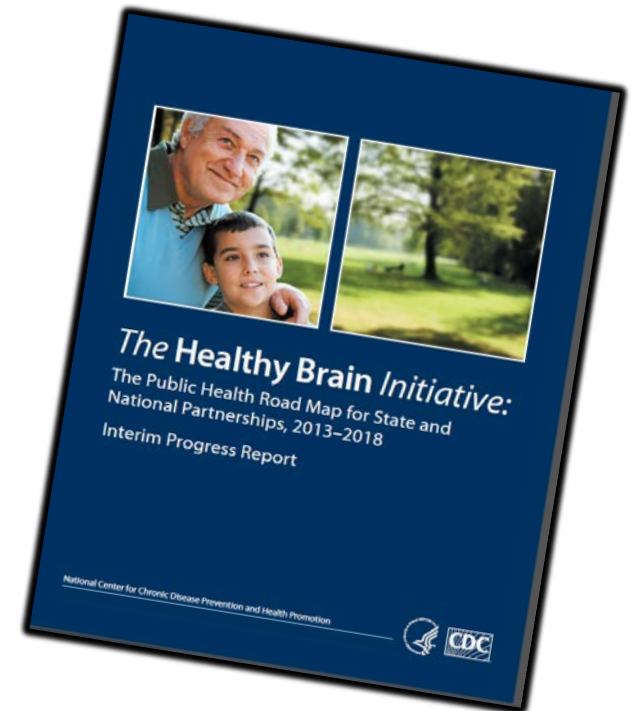
CDC's Public Health Road Map

The Public Health Road Map for State and National Partnerships 2013–2018



35 action items for public health officials to:

- Promote cognitive functioning
- Address cognitive impairment and Alzheimer's disease
- Meet the needs of caregivers



National Plan to Address Alzheimer's Disease

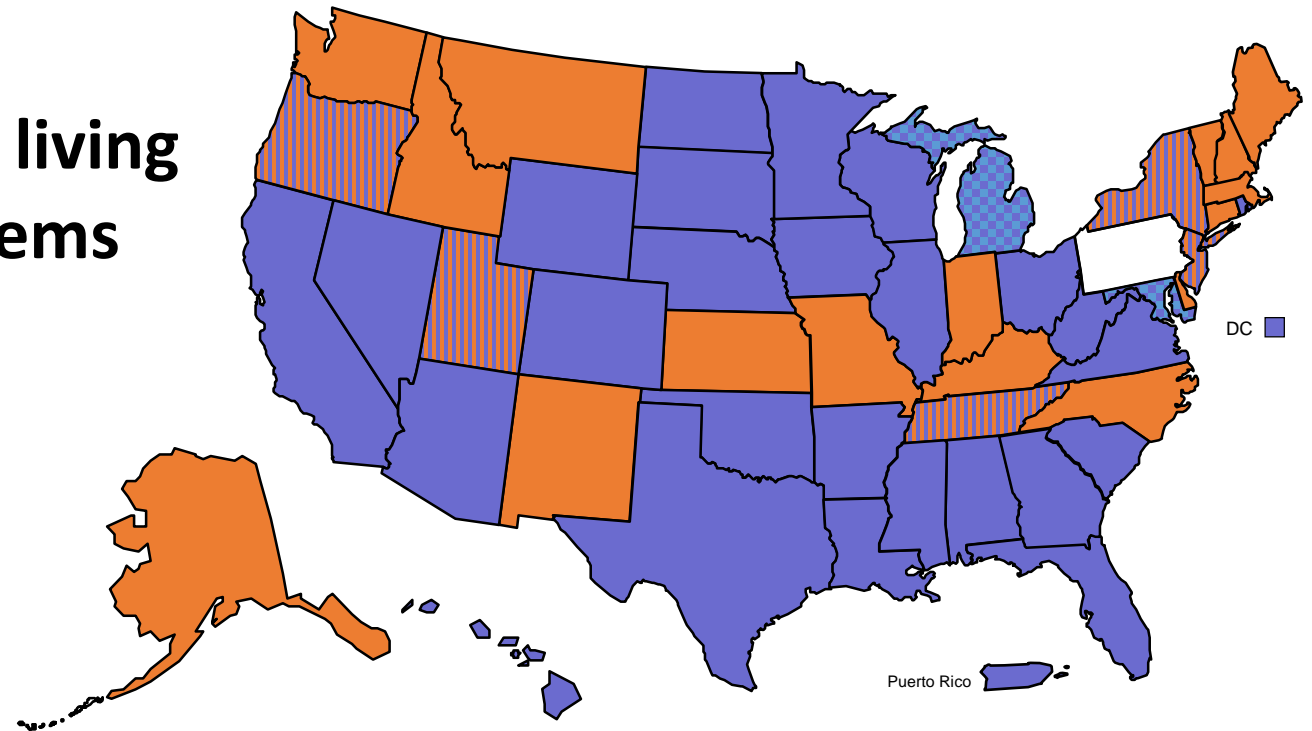
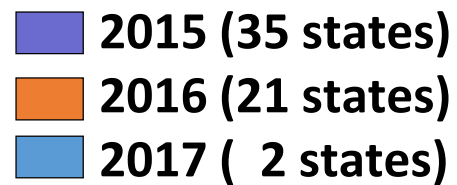


- 1. Prevent and effectively treat Alzheimer's disease by 2025**
- 2. Optimize care quality and efficiency**
- 3. Expand supports for people with Alzheimer's disease and their families**
- 4. Enhance public awareness and engagement**
- 5. Track progress and drive improvement**

<https://aspe.hhs.gov/national-plans-address-alzheimers-disease>

Subjective Cognitive Decline (SCD) Surveillance

- **Worsening memory problems**
- **Potential difficulties with daily living associated with memory problems**
- **Any discussions with healthcare professionals**
- **Adults 45 years or older**



2015 SCD Surveillance Data

- **Across 35 states, 12% reported Subjective Cognitive Decline (SCD), up slightly from 11% in 2013**
- **People with lower levels of education report more SCD**
- **More people who reported SCD live alone than live with others**



Caregiving Surveillance

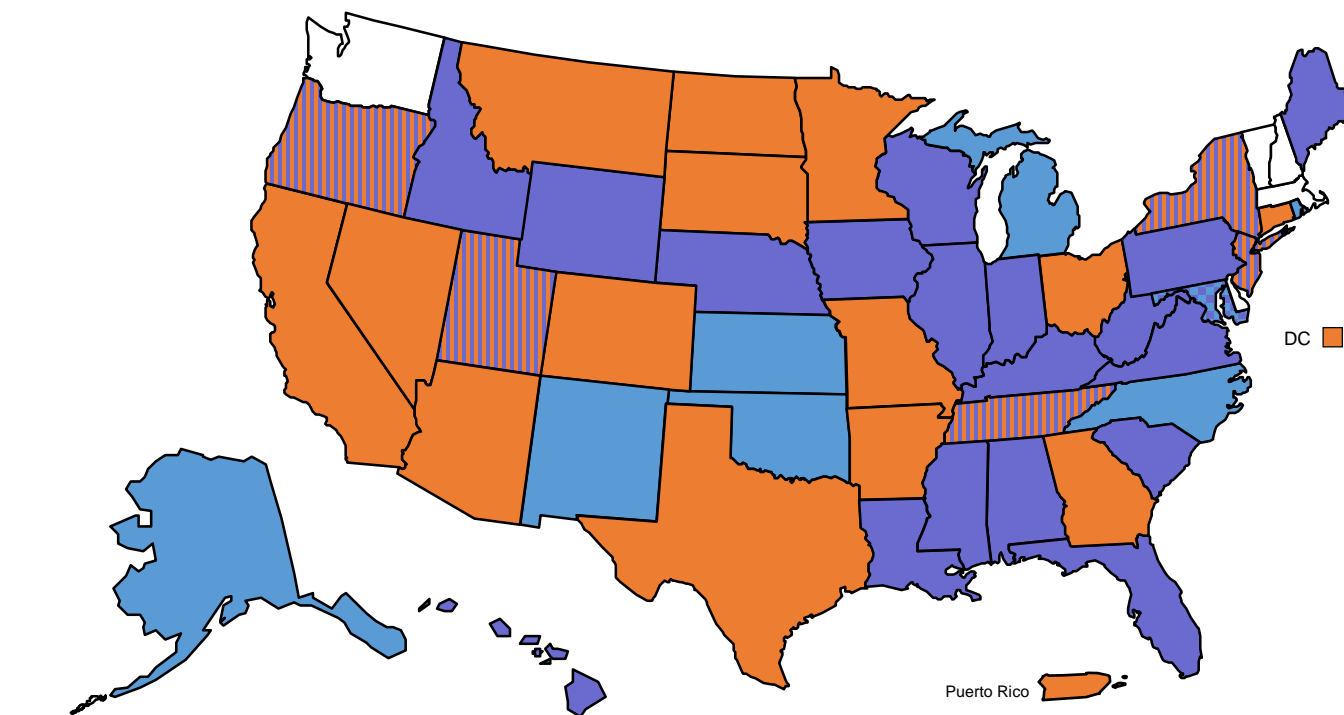
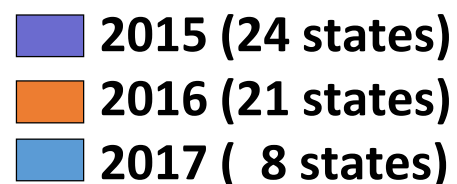
➤ Characteristics of caregivers

- Adults 18 years or older

➤ Problems they face

➤ Greatest care needs

➤ Anticipate being a caregiver in next 2 years



2015 Caregiving Surveillance Data

- **22% of respondents provided regular care or assistance**
- **9% of caregivers reported caring for someone with dementia**

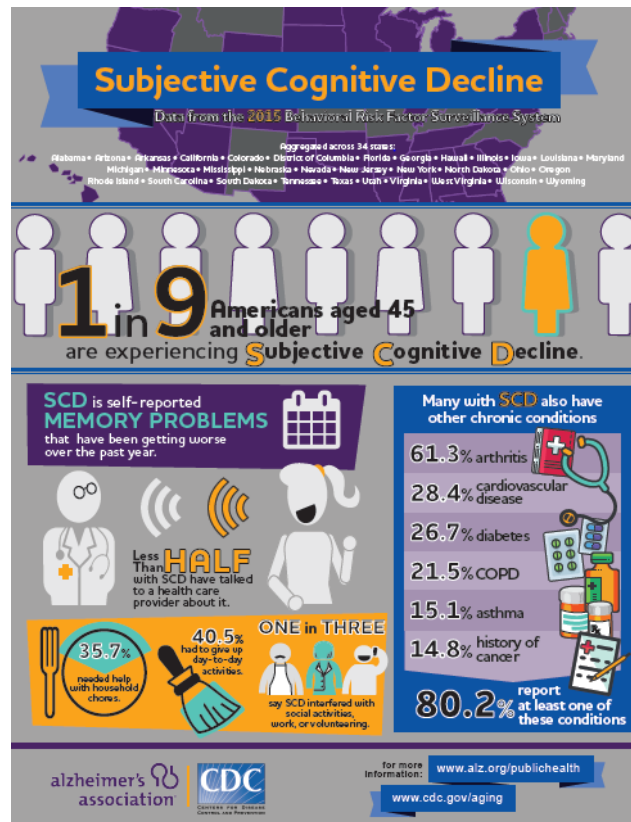


2015 Caregiving Surveillance Data

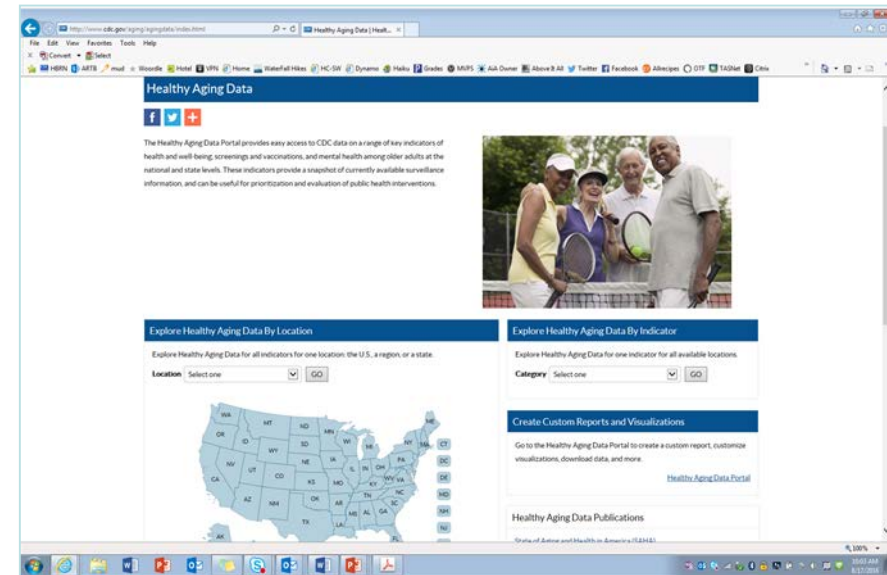
- **Caregivers are more likely to report fair to poor physical health, depression, frequent mental and physical distress, and obesity than non-caregivers**
- **Caregivers and non-caregivers report no differences in**
 - Coronary heart disease, stroke, CVD, or diabetes
 - Check-up in the last two years



Data for Action: Infographics and Data Portal



Subjective Cognitive Decline Infographic

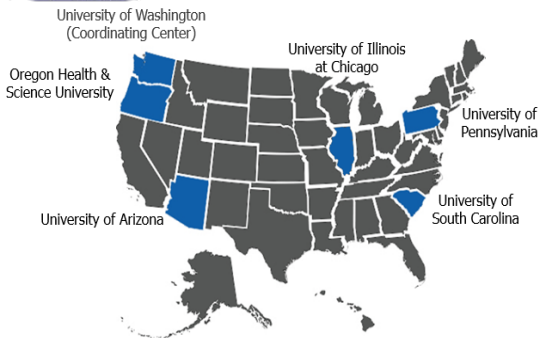


Public Data Portal on the Health of Older Adults



The Healthy Brain Initiative Partnerships

*The
Healthy Brain
Initiative*



The National Brain Health Center for African Americans



MEMORY SUNDAY: June 11, 2017

Utilizing the Power and Influence of the African American Pulpit

THE BALMING LEAD INC.



MEMORY SUNDAY

June 11, 2017

WHAT IS MEMORY SUNDAY?

MEMORY SUNDAY, the **SECOND SUNDAY IN JUNE**, is a designated Sunday, within congregations serving African Americans, that provides education on Alzheimer's: prevention, treatment, research studies and caregiving.

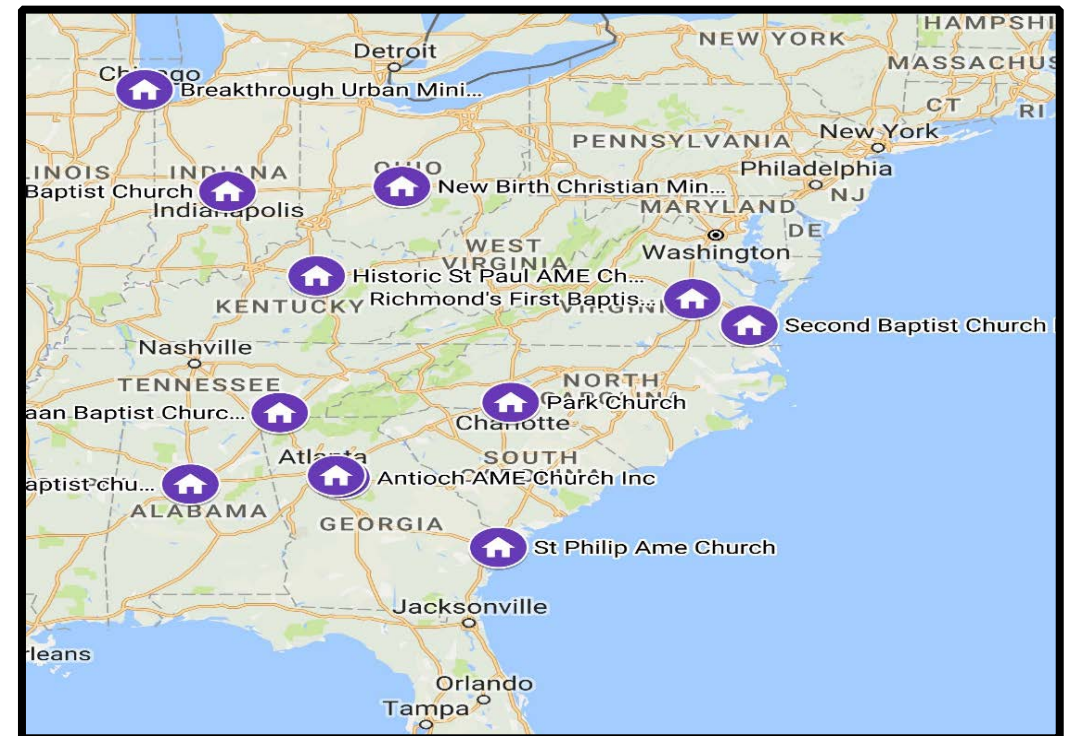
PURPOSE

The purpose of **MEMORY SUNDAY** is to bring national and local attention to the tremendous burden that Alzheimer's and other Dementias are having on the African American community; to utilize the power and influence of the African American pulpit to bring awareness; to distribute the facts about Alzheimer's; to encourage participation in research studies and to support persons living with Alzheimer's and their caregivers.

SAVE THE DATE

MEMORY SUNDAY June 11, 2017

#balmingilead/memorysunday www.balmingilead.org/memorysunday



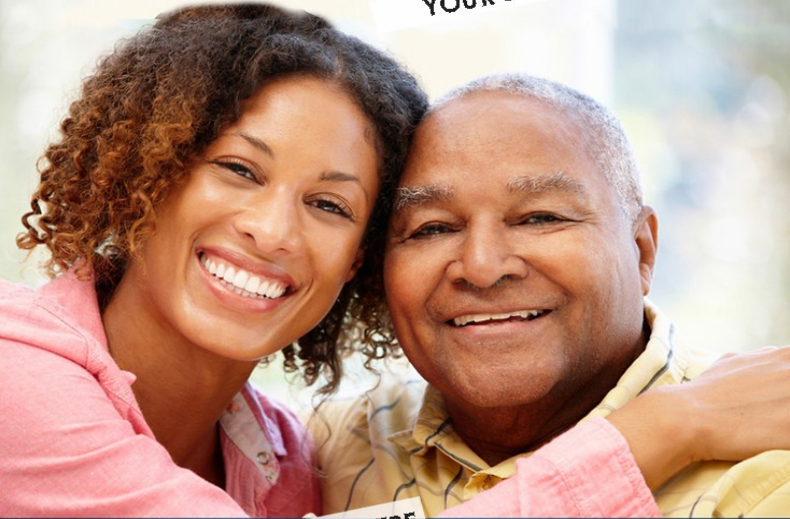
Memory Sunday Locations

Culturally Relevant, Research Driven Ads

Is your loved one experiencing memory loss or confusion that disrupts his daily life?

He was there for you, now be there for him.

Go with him to see a memory doctor. **YOUR SERVICE HERE**



Call the Penn Memory Center at 215-662-7810 **YOUR ORGANIZATION HERE** Penn Medicine www.pennmemorycenter.org

Together make a visit.
Together make a plan.

You might think your mother doesn't want you to visit a memory doctor with her, but she needs you there.

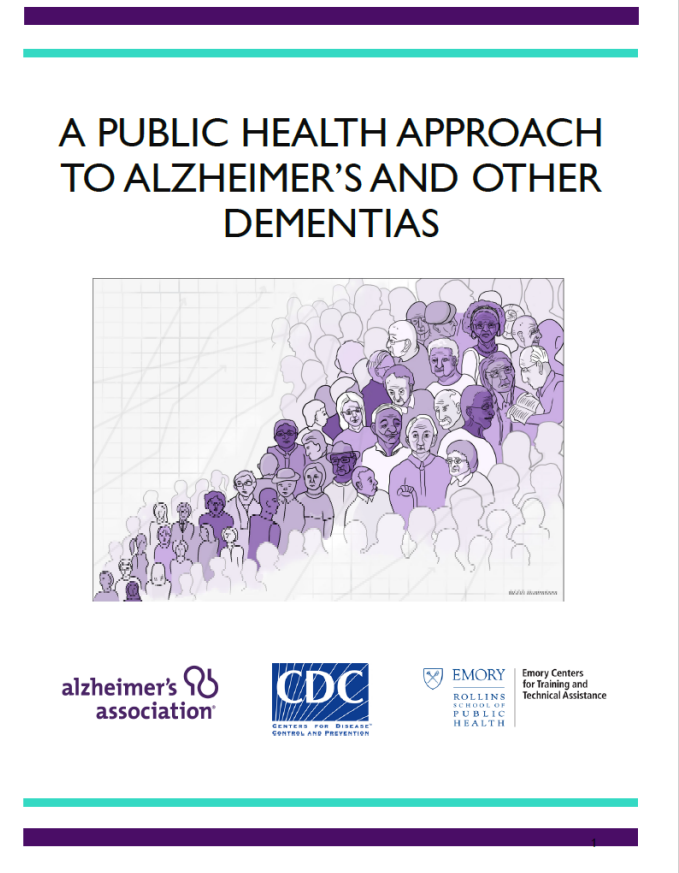


Call the Penn Memory Center at 215-662-7810 Penn Medicine www.pennmemorycenter.org



Training Public Health Workforce

- **Increases understanding of Alzheimer's disease and related dementias as a multilayered, growing public health issue**
 - For faculty to use with undergraduate public health courses
 - Developed by the Alzheimer's Association, Emory Centers for Training and Technical Assistance and CDC
- **Flexible curriculum linked to public health competencies**



Training African American Healthcare Professionals

- **Train health professionals on issues affecting cognitive health among African Americans via partnerships with the National Black Nurses Association and National Medical Association**



Cognitive Assessment Resources for Healthcare Providers



A 4-STEP PROCESS TO DETECTING
COGNITIVE IMPAIRMENT AND
EARLIER DIAGNOSIS OF DEMENTIA

- **Developed by Gerontological Society of America Workgroup**
- **Increase use of evidence-based tools for assessing cognitive impairment by primary care providers**
- **Better use of Medicare Annual Wellness or Welcome to Medicare Visits as a springboard for assessing cognitive decline**

Road Map Grants to States

Two Focused on Healthcare Provider Education

- **Grantees include CO, LA, MD, NM, SC, UT, WA**
- **Train first responders to effectively interact with people with dementia living in communities (Colorado)**
- **Develop dementia-related competencies of primary care providers (including medical and nursing students) and other non-health workforces across continuum of care through Dementia Dialogues (Utah)**



Next Steps: Moving Forward Together

- **Data for action**
- **Raise awareness**
- **Training and education**
- **Partnerships**



Partnerships: Moving Forward Together



CDC PUBLIC HEALTH GRAND ROUNDS

Healthy Aging: Promoting Well-being in Older Adults



September 19, 2017



U.S. Department of
Health and Human Services
Centers for Disease
Control and Prevention