# Implications of Novel Disease Progression Framework on Population Health Strategies for Patients Living with Alzheimer's Disease



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## Background

Patient-centric chronic disease management approaches are not effective for patients with dementia because these patients are difficult to engage, unable to follow instructions, and often fail to report symptoms accurately. Patients with ADRC utilize hospitals and other facilities 2-3 times more frequently than those without the condition, and drive more than 20% of the total costs of major chronic conditions. Yet, most payers do not quantify the costs of patients with dementia and thus lack a framework managing those with Alzheimer's disease and related dementia (ADRC).

#### Methods

A combination of claims analysis, published studies and extensive experience in the care management of patients with ADRC were used to determine a novel disease management framework for the progression of ADRC. This disease management framework has been validated through conversations with many clinicians and medical directors, and has immediate implication for the effective population health management of patients with ADRC and their caregivers.

#### Conclusion

Reducing the frequency and intensity of the step-wise cognitive/functional declines associated with facility care for acute incidents is of paramount importance to effective population health management of those with ADRC.

### Results

Higher costs are driven by acute events that lead to higher facility utilization. Many patients that are admitted to the hospital or stay in a nursing facility experience often-irreversible step-wise declines in cognition/function. The cause of the step-wise decline in cognition/function after a facility utilization is still being understood, but initial research suggests that it may be due to a sensitivity to irreversible hospital-induced delirium and a disruption to a patient's cognitive reserves.

