UnitedHealthcare Community Plan of Virginia started developing its Dementia Coordinator Program in October 2017 by having the Regional Managers identify care coordinators with Dementia experience and requesting volunteers from each region to act as the region’s subject matter expert (SMEs). After the SMEs were identified, Dementia Care Manager Training from the Greater Richmond Chapter of the Alzheimer’s Association was conducted for all management and the SMEs on 10/18/2017 in Richmond.

UHC contracted with NJ based AlzBetter, LLC to implement a program using their software platform, assessment tools, and training resources. The AlzBetter program focuses on the dementia member’s caregiver. Caregivers are trained on techniques to avoid common issues in the dementia population, how to identify possible triggers causing these issues, and incorporates a stress reporting system to alert the SMEs when caregiver problems arise. The regional SMEs completed on site training in May 2018 in Richmond to receive certification in AlzBetter Care Management as well as certification to teach the AlzBetter Care Management program to their fellow care coordinators. The SMEs worked with their Regional Managers to assess the population of dementia members who met criteria as potential candidates and to begin reevaluation of their caseloads and ratios of the SMEs to account for the additional assessments, coaching, and tracking necessary of the member’s enrolled into the program. The goal is to utilize the Alzbetter tool and incorporate it into the member’s overall care plan.

Initially the SMEs received a training environment to familiarize themselves with the features of the software package used by Alzbetter. In July the SMEs received the live/production environment of the platform. It was decided that the SMEs would begin introducing the program to the dementia members in their own current caseloads with the goal of becoming proficient with all aspects of the AlzBetter process of assessing, planning, implementing, and evaluating. The goal is for the SMEs to present the program to the rest of the care coordinators in their individual regions by the end of the year. The SMEs will then act as consultants, trainers, and as an additional resource for their teammates.

Most recently, UHC has enrolled ten (10) members from current caseloads in the Alzbetter program during the month of August. We estimate a minimum of 200 members will meet program criteria. Below is the draft of the planned criteria and presentation for the SMEs to incorporate into their regional presentations after the initial familiarization period:

-Do you have a member diagnosed with Dementia or Alzheimer’s or a member who displays symptoms?

-Does your member and or caregiver struggle and stress about how to care for and complete ADLs/IADLs, but they want to remain in the community?

-The VA Community and State AlzBetter Team is working together with AlzBetter to gain knowledge and skills specializing in processes, tools and tips (i.e. videos, , along with community resources to assist this
group of members and their caregivers to be successful and safe in the community as well as to enhance their quality of life.

Program Criteria:

- Member has a formal Diagnosis of Dementia/Alzheimer’s, is not in NF and plans to remain in the home.

- Member who does not have a formal diagnosis but is exhibiting symptoms of Dementia/Alzheimer’s and caregiver is reportedly struggling with stress about how to care for and complete member’s ADLs/IADLs, but they want to remain in the community (is not NF resident).

- Member doesn’t have a formal diagnosis but may be exhibiting symptoms of Dementia/Alzheimer’s as characterized by 2 or more of the following (is not NF resident):
  - History or wandering/getting lost
  - Losing things
  - Unsteady gait/repeated falls
  - Fabrication of stories
  - Hallucinations
  - Sleep problems
  - Impaired reasoning or judgement
  - Difficulty with finding words (i.e. Word salad)
  - Mood changes including sun downing
  - Inability to problem solve
  - Decline in daily life functioning’s (ADLs/IADLs)
  - Paranoia/accusatory behaviors
  - Forgetting familiar faces/names