



Alzheimer's Association and Alzheimer's Impact Movement Statement for the Record

United States Senate Committee on Health, Education, Labor and Pensions (HELP) Hearing on "Telehealth: Lessons from the COVID-19 Pandemic"

June 17, 2020

The Alzheimer's Association and Alzheimer's Impact Movement (AIM) appreciate the opportunity to submit this statement for the record for the Senate Committee on Health, Education, Labor and Pensions (HELP) hearing entitled "Telehealth: Lessons from the COVID-19 Pandemic." The Association and AIM thank the Committee for its continued leadership on issues important to the millions of people living with Alzheimer's and other dementia and their caregivers. This statement provides an overview of telehealth policies that would help people living with Alzheimer's and other dementia, including efforts to expand capacity for health outcomes through Project ECHO, and the temporary expansion of Medicare and Medicaid coverage of certain telehealth services during the COVID-19 pandemic.

Founded in 1980, the Alzheimer's Association is the world's leading voluntary health organization in Alzheimer's care, support, and research. Our mission is to eliminate Alzheimer's and other dementia through the advancement of research; to provide and enhance care and support for all affected; and to reduce the risk of dementia through the promotion of brain health. AIM is the Association's sister organization, working in strategic partnership to make Alzheimer's a national priority. Together, the Alzheimer's Association and AIM advocate for policies to fight Alzheimer's disease, including increased investment in research, improved care and support, and development of approaches to reduce the risk of developing dementia.

Expanding Capacity for Health Outcomes (Project ECHO)

The Alzheimer's Association and AIM support legislative efforts to expand the use of technology-enabled collaborative learning and capacity-building models. These innovative education models, often referred to as Project ECHO, help build workforce capacity and improve access to care. These models use a hub-and-spoke approach by linking expert specialist teams at a 'hub' with the 'spokes' of health providers in local communities to increase on-the-ground expertise. Using case-based learning, Project ECHO models can improve the capacity of providers, especially those in rural and underserved areas, on how to best meet the needs of people living with Alzheimer's and other dementia.

The Alzheimer's Association has conducted multiple Project ECHO programs in primary care and assisted living communities. These Project ECHO models focus on increasing access to dementia diagnosis and care through primary care providers and on increasing person-centered dementia care in assisted living communities. According to an evaluation of the Association's first two pilot programs by the Center for Evaluation and Applied Research at The New York Academy of Medicine, primary care participants reported the most significant knowledge gains in identifying and screening for dementia, medication management, and communication with patients and

family members. The evaluation also showed that participants from assisted living communities said the increased knowledge led to a change in their practices and gave them a better understanding of person-centered care.

The Alzheimer's Association is formalizing a global network of ECHO hubs to address Alzheimer's and other dementia, and will build momentum for additional ECHO hub creation by partnering with the research community, medical professionals, key stakeholders in the dementia care industry and policy leaders and advocates. This consortium of thought leaders across the spectrum will increase evidence around the use of ECHO in promoting best practice dementia care, accelerate the uptake of evidence into practice, and help policy makers understand and support Project ECHO dementia models.

Project ECHO is currently playing an important role in how health providers, public health officials, and scientists are sharing best practices and information for addressing the COVID-19 pandemic. Project ECHO dementia models are helping primary care physicians in real-time understand how to use validated assessment tools appropriate for virtual use to make early and accurate diagnoses, educate families about the diagnosis and home management strategies, and help caregivers understand the behavioral changes associated with Alzheimer's, which can be heightened during social isolation. Project ECHO is also helping long-term care providers in real-time understand how to train temporary staff that may not be familiar with how to best care for people with Alzheimer's, implement important health strategies, such as hand-washing and social distancing for people with Alzheimer's, and effectively communicate with residents to help them understand the COVID-19 pandemic.

The Alzheimer's Association has also developed a COVID-19-specific Project ECHO series based on our guidance [*Emergency Preparedness: Caring for persons living with dementia in a long-term or community-based care setting*](#). This series focuses on sharing best-practice recommendations for person-centered care, illness prevention, resident engagement and connectedness to family and friends, nutrition support and mobility, and strategies related to dementia-related behaviors in emergency situations. This will help providers understand how to best respond to challenging cases related to the COVID-19 pandemic within their own communities.

The Alzheimer's Association and AIM urge the Committee to pass the *Expanding Capacity for Health Outcomes (ECHO) Act of 2019* (S. 1618/H.R. 5199) and ensure that Alzheimer's and other dementia are included. This bipartisan bill would provide federal funding to help expand the use of Project ECHO models. This expansion and evaluation of Project ECHO would increase timely access to specialized health care, like better dementia diagnosis and care, and improve the quality of life for those that need it the most.

Expansion of Telehealth Services

The Alzheimer's Association and AIM also support the expansion of Medicare and Medicaid coverage for certain telehealth services in response to the COVID-19 pandemic. The Centers for

Medicare & Medicaid Services (CMS) has temporarily expanded coverage for numerous codes that are beneficial to people living with Alzheimer's and other dementia. This population is particularly vulnerable to the effects of COVID-19 due to their typical age and their co-occurring chronic conditions, so we appreciate the flexibilities CMS has implemented to reduce the risk of their exposure to the virus and ensure regular access to quality care. We encourage CMS to evaluate the effectiveness of these temporary codes, to the extent possible, as the pandemic subsides to determine whether some are appropriate for permanent telehealth eligibility.

The Alzheimer's Association and AIM particularly support CMS's decision to allow for telehealth coverage of the Medicare care planning CPT® code 99483. Care planning is critical for people with cognitive impairment under normal circumstances to help them manage comorbid conditions and make decisions about long-term care and support services, among others. Ensuring that a plan is established, documented, and updated is now more important than ever. Making this service available via telehealth will improve access to care planning for this vulnerable population. To that end, we also urge Congress to pass the bipartisan *Improving HOPE for Alzheimer's Act* (S. 880/H.R. 1873), which would educate clinicians on the importance and availability of this crucial Medicare care planning service.

Finally, we appreciate CMS's flexibility in allowing telehealth technology to be used in home health delivery. Thirty-two percent of individuals using home health services have Alzheimer's or other dementia. The ability to receive care in the home decreases visits to unfamiliar places that may cause agitation in people with dementia and can ease some burden on caregivers. This increased flexibility can reduce interruptions in access to this kind of quality care. We also support CMS's expansion of the licensed practitioners, such as nurse practitioners and physician assistants, who can order Medicaid home health services. Twenty-seven percent of older individuals with Alzheimer's or other dementia who have Medicare also have Medicaid coverage, compared with 11 percent of individuals without dementia.

Conclusion

The Alzheimer's Association and AIM appreciate the steadfast support of the Committee and its continued commitment to advancing legislation important to the millions of families affected by Alzheimer's and other dementia. We look forward to working with the Committee and other members of Congress in a bipartisan way to advance policies that would help this vulnerable population during the COVID-19 pandemic and beyond, through the expansion of Project ECHO models and through Medicare and Medicaid coverage of certain telehealth services.