Affordable Care Act Funding to Support Patient-Centered Medical Homes

The U.S. Department of Health and Human Services has announced that $35.7 million in Affordable Care Act funding will be awarded to 147 health centers in 44 states, the District of Columbia, and Puerto Rico to support patient-centered medical homes through new construction and facility renovations.

The patient-centered medical home delivery model is designed to improve quality of care through (a) team-based coordination of care, (b) the treatment of the many needs of the patient at once, (c) increased access to care, and (d) the empowerment of patients to be partners in their own care.

This federal funding will help support high-quality care and update facilities for the millions of newly insured Americans.


U.S. Senate Allocates Additional $100 Million for Alzheimer’s Research

The U.S. Senate Appropriations Subcommittee on Labor, Health and Human Services, Education, and Related Agencies allocated an additional $100 million in its fiscal year 2015 funding bill for Alzheimer’s disease (AD) research.

Older adult Veterans who have experienced a traumatic brain injury (TBI) are more likely to develop dementia than Veterans without TBI, according to a study published in an online issue of Neurology. The study also found that Veterans with a history of TBI developed dementia earlier than those without TBI who had developed dementia.

The study involved 188,784 Veterans, with an average age of 68 at the start of the study. All participants were free of dementia at the start of the study and had visited a Veterans Affairs health care facility at least once at the start of the study and again an average of 7 years later.

A total of 1,229 Veterans had a TBI diagnosis. During the follow-up period, 196 (16%) Veterans with TBI developed dementia, compared with 18,255 (10%) of those without TBI. After adjusting for other factors that could affect the risk of dementia, such as diabetes, high blood pressure, depression, and alcohol abuse, researchers determined that Veterans with TBI were 60% more likely to develop dementia than those without TBI.

In addition, Veterans with TBI developed dementia, on average, 2 years earlier than those without TBI, or at an average age of 78.5 compared with 80.7. Furthermore, those who did not develop dementia died 2.3 years earlier if they had a TBI versus no TBI diagnosis (age 77 and 79.3, respectively). Researchers also found that the risk of dementia was higher in Veterans with TBI who also had depression, posttraumatic stress disorder, or cerebrovascular disease than in those with either TBI or these other conditions alone.

This allocation further builds on the $100 million allocated in fiscal year 2014 and will help maintain the momentum established by the AD research community toward the National Plan to Address Alzheimer’s goal to prevent and effectively treat AD by 2025.

More than 5 million Americans are living with AD, and this figure is poised to grow to as many as 16 million by 2050, according to an Alzheimer’s Association report. In addition, care for AD, the country’s most expensive condition, costs the nation $203 billion annually, with projections to reach $1.2 trillion by 2050. However, for every $26,500 Medicare and Medicaid spend on caring for individuals with AD, the National Institutes of Health spend only $100 on AD research.


Patient-Centered Medical Homes May Help Reduce Health Care Costs

A new report in Health Services Research indicates that patient-centered medical homes (PCMHs) may help reduce health care costs and utilization of some health care services.

The study examined patterns of health care use and expenditures for Medicare fee-for-service beneficiaries between 2007 and 2010 from a sample of PCMHs recognized by the National Committee for Quality Assurance (NCQA), as well as a set of practices without the PCMH designation.

Researchers found that the total Medicare expenditure side grew at a slower rate for patients who received care from a medical home versus those who did not. They also found that costs seemed to be lower for acute care hospitalizations when patients had received care from a medical home and that the number of emergency department visits declined relative to the comparison group.

Notably, the decline in health care costs was larger for practices with sicker than average patients, primary care practices, and solo practices.

However, researchers found that overall hospital admissions did not decline, a finding which they believe warrants future investigation.

The PCMH is a model of health care that emphasizes personal relationships, team delivery of care, coordination across specialties and care settings, quality and safety improvement, and open access.


Elder Justice Roadmap Outlines Path to Combat Elder Abuse in the U.S.

The Elder Justice Roadmap, a framework supported by the U.S. Department of Justice (DOJ) and the U.S. Department of Health and Human Services (USDHHS) that works to tackle the highest priority challenges to elder abuse prevention and prosecution, has been published.

The roadmap was developed by harnessing the expertise of hundreds of public and private stakeholders from across the United States. It will be considered by the Elder Justice Coordinating Council and others in developing their own strategic plans to prevent and combat elder abuse.

To support the mission of elder abuse prevention and prosecution, the DOJ has developed an interactive, online curriculum to teach legal aid and other civil attorneys to identify and respond to elder abuse. The first three modules of the training cover (a) information that lawyers should know about elder abuse, (b) practical and ethical strategies to use when facing challenges in this area, and (c) a primer on domestic violence and sexual assault. This training will expand to include six 1-hour modules covering issues relevant to attorneys who may encounter elder abuse victims during their practice.

The USDHHS is supporting the mission by developing a voluntary national adult protective services (APS) data system. Collecting national data on adult mistreatment will help identify and address gaps about the number and characteristics of adults who are the victims of maltreatment, as well as the nature of services that are provided by APS agencies to protect these vulnerable adults. In addition, the data will better inform the development of improved and more targeted policy and programmatic interventions.

In addition to informing these federal elder justice efforts, the roadmap has also inspired private stakeholders, including the Archstone Foundation and the Weinberg Foundation, to take action.

Research suggests that 1 in 10 Americans older than 60 has experienced elder abuse or neglect and that individuals with dementia are at higher risk for abuse.