

# Collaborative Approaches for Older Individuals with Complex Needs

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# Objectives

- Define the population
  - Review the medical needs
  - Identify social needs
  - Prioritize policy and financial barriers 10 min
  - Analyze the barriers to providing the best care possible
  - Explore solutions
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- **No Disclosures**

# Abstract:

- ▶ The needs of older individuals can be very complex, not just due to normal physiological and cognitive changes due to aging, but also their higher risk for more complex pathological changes, loss of natural supports, and more barriers to transportation and finances.
- ▶ The Program of All-inclusive Care for the Elderly (PACE), an evidence-based proven, collaborative care approach for older individuals with complex needs, does not uniformly include treatment for mental health and substance misuse.
- ▶ This session will present how behavioral health care was added to a PACE team and their integration as a collaborator was achieved and improved patient outcomes.
- ▶ In addition, this session will present work done by the National Coalition on Mental Health and Aging that provides opportunities for professional, consumer and government organizations to work together towards improving the availability and quality of mental health, preventive and treatment strategies to older Americans and their families through education, research and increased public awareness.

## Medical Problems with Serious Mental Illness

Misra S, Ganzini L. Medical care for patients with severe and persistent mental illness. *J Gen Intern Med.* 2006 Nov;21(11):1207-8.

doi: 10.1111/j.1525-1497.2006.00619.x.

PMID: 17026735; PMCID: PMC1831671.

- ▶ The population of older patients with schizophrenia is growing. In 2000, there were an estimated 350,000 people with schizophrenia over the age of 65 in the United States and this number is expected to increase 50% by 2020.<sup>2</sup>
- ▶ Most patients with schizophrenia receive psychiatric services in community mental health systems which offer medication, social and rehabilitative services, but are isolated from delivery of medical care.
- ▶ Psychiatric physicians are being drawn back to their medical roots by the need to monitor patients for hyperglycemia, hyperlipidemia and obesity, and to collaborate more closely with primary care physicians.
- ▶ For patients with schizophrenia, negotiating a separate, complex, medical health care system can be challenging. Integrated services offering both mental and medical care at the same location, sometimes even by the same clinician, can overcome systems-based barriers.

# Serious Mental Illness includes:

- ▶ Schizophrenia
- ▶ Bipolar Illness
- ▶ Substance Use Disorder
- ▶ Mental Health and Substance Use Disorder
- ▶ Antisocial Personality Disorder
- ▶ Borderline Personality Disorder
- ▶ Anxiety
- ▶ Depression
- ▶ ADHD
- ▶ Eating Disorder
- ▶ PTSD
- ▶ Seasonal Affective Disorder

# Prevalence of Serious Mental Illness and Medical Illnesses

- In 2022, there were an estimated 15.4 million adults aged 18 or older in the United States with SMI. This number represented 6.0% of all U.S. adults.
  - The observed prevalence of SMI was higher among females (7.1%) than males (4.8%).
  - Young adults aged 18-25 years had the highest prevalence of SMI (11.6%) compared to adults aged 26-49 years (7.6%) and aged 50 and older (3.0%).
  - The prevalence of SMI was highest among adults reporting two or more races (11.8%), followed by American Indian / Alaskan Native (AI/AN) adults (7.3%). The prevalence of SMI was lowest among Native Hawaiian / Other Pacific Islander (NH/OPI) adults (3.5%).
- ▶ [NIMH mental illness](#)
- People with depression have a **40%** higher risk of developing cardiovascular and metabolic diseases than the general population.
  - People with serious mental illness are nearly twice as likely to develop these conditions.
  - **33.5%** of U.S. adults with mental illness also experienced a substance use disorder in 2021 (19.4 million individuals)
- ▶ [Mental Health by the Numbers NAMI](#)

# PACE

## Programs of All Inclusive Care for the Elderly

- ▶ There are 178 PACE organizations operating in 33 states and the District of Columbia.
- ▶ More than 300 PACE centers serve over 78,500 participants across the country.
- ▶ Participants are >55 yrs. old
- ▶ Meet NH level of care in their state
- ▶ Live in a specific geographic area
- ▶ Can live safely in the community with the supports and services of the PACE Program
- ▶ Three-way agreement
  - ▶ PACE program
  - ▶ CMS
  - ▶ State Medicaid
- ▶ Patients may pay the Medicaid portion privately and VA can contribute in certain circumstances
- ▶ Funded through annual payments based on the medical conditions the patient has (HCC) and from the state for the home and community-based care (waiver services)

# PACE

[www.NPAonline.org](http://www.NPAonline.org)

Transportation

Adult day health center

Aide care

Clinic

Rehabilitation services

Breakfast/lunch

Medications

All physician and hospital services/SNF/rehab





# Clinic in the day center

- ▶ Initial intake included evaluation by MD/NP/MSW/RN/OT/PT/ST if needed/Dietitian/Rec Therapy/Pharmacist
- ▶ Care plan developed
- ▶ Come to center daily for first 2 weeks then as scheduled
- ▶ Scheduled for weekly check in with nursing
- ▶ Monthly check in with medical team
- ▶ Schedule referrals to necessary/desired consultants
- ▶ Required reevaluation every 6 months

# Collaboration with mental health

- ▶ 3.5 LCSW/MSW
- ▶ 1 part time psychiatrist at psychiatry residency
  - ▶ 1-2 psychiatry residents
- ▶ Came to the PACE center weekly and if needed patients were transported to their main office
- ▶ Able to provide counseling
- ▶ Directed treatment
- ▶ Compliance with psych meds and medical regimens with ease of use!
- ▶ Pharmacogenomics
  - ▶ Shad MU. Genetic Testing for Antipsychotic Pharmacotherapy: Bench to Bedside. Behav Sci (Basel). 2021 Jun 30;11(7):97. doi: 10.3390/bs11070097. PMID: 34209185; PMCID: PMC8301006.

# Addendum

▶ Thank you!