



RURAL HEALTH FACTS

Dementia Care Services Project's Positive Impact on Caregiving and Cost Savings in North Dakota

April 2011

What is the North Dakota Dementia Care Services (DCS) project?

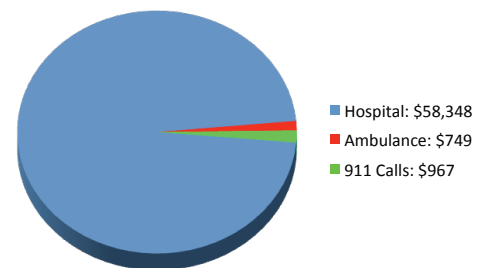
- The North Dakota DCS project has a goal of informing people with dementia and their caregivers about dementia care issues which, in turn, may lead to increased family support, decreased depression, delays in nursing home placement, and reductions in unnecessary health service use.
- The project provides care consultations to persons with dementia and their caregivers; these consultations consist of assessing needs, identifying issues and concerns and resources, developing care plans, and referrals, providing education, and follow-up assistance.
- Created by the Dementia Care Services legislation (North Dakota House Bill 1043), the project is being conducted by the Alzheimer's Association of Minnesota/North Dakota and externally evaluated by the Center for Rural Health at The University of North Dakota School of Medicine and Health Sciences.

Have there been cost savings associated with the DCS project?

- Total health care related cost avoidance associated with just three months of DCS program participation was \$60,064. Figure 1 indicates the breakdown of these savings for hospital stays, 911 calls, and ambulance runs. These amounts represent the decrease in costs incurred by people between their first three months and the following three

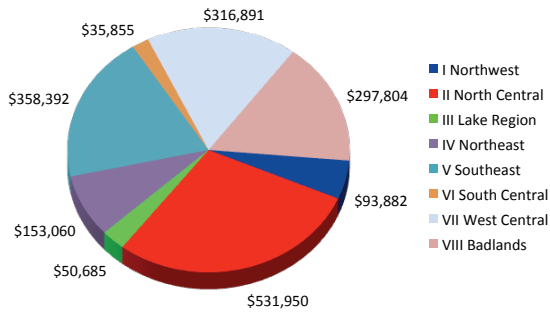
months while participating in the program. Most of the decrease in the amount of money spent was from a decrease in the number of days spent in the hospital.

Figure 1. Total quarterly savings on hospital, ambulance, and 911 calls in DCS program: \$60,064.



- Participation in the DCS program over nine months was associated with substantial long-term care cost avoidance, totaling \$1,838,519 (Figure 2). This represents potential savings due to caregivers increasing their estimated amount of time to placing the person with dementia in a long term care facility, and thus reducing the need for paying the high costs of these facilities.
- Region II North Central (Minot area) had the largest cost savings at \$531,950, followed by Region V Southeast (Fargo area; \$358,392), Region VII West Central (Bismarck area; \$316,891), and Region VIII Badlands (Dickinson area; \$297,804). A large amount of savings were found in the highly rural Regions II and VIII see (Figure 2).

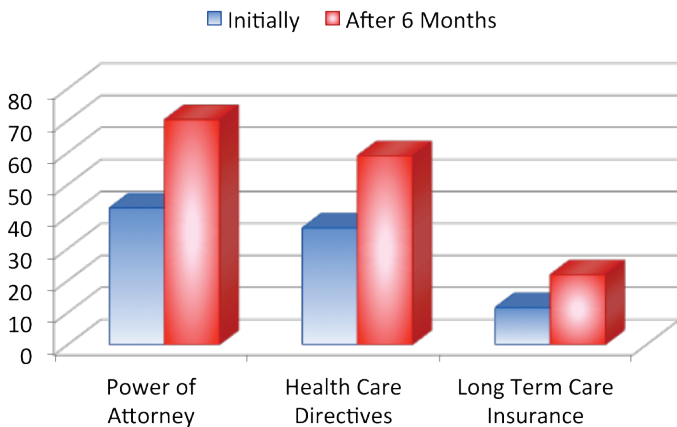
Figure 2. Estimated median long term care cost avoidance from participation in DCS program. Total:\$1,838,519.



How else has the DCS program positively impacted people with dementia and their caregivers?

- Caregiver participants of the DCS program were asked about their *completion of important dementia care related tasks*. Their completion rates were compared between initial entry into the DCS program and after six months of program participation.
- Results indicated that caregivers substantially increased their *rate of establishing power of attorney (43% increased to 70%), instituting health care directives (36% increased to 59%), and acquiring long term care insurance (12% increased to 22%)* for their person with dementia (Figure 3).

Figure 3. The percent of caregivers who had taken these health care actions nearly doubled after only six months.



Conclusion

- Preliminary results indicate that providing enhanced support to persons with dementia and their caregivers via the DCS project contributes to reduction in current health care costs and potential long term care cost savings. Caregivers also show an increase in completion of important dementia care action steps.

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