Alzheimer’s is the only top-ten disease in the U.S. without an effective treatment or cure, and, according to the CDC, creates a financial burden on our economy equal to that of smoking. At nearly $290 billion annually, with 5.8 million Americans living with the disease together with 16 million caregivers, it is a leading Medicare and Medicaid cost-driver. However, researchers increasingly challenge the view that dementia is an expected and unavoidable condition of old age, over which we have no control and for which we can do nothing. Rather, they point to steps that individuals, communities, and healthcare providers can take to prevent or reverse mild cognitive impairment and improve cognitive function, performance, and brain health in the population overall, and throughout an individual’s lifespan. The action steps summarized below set forth a framework to address this new perspective and blunt what is currently America’s most significant healthcare crisis.
**Key Insights**

**Dementia is interconnected to other diseases.** Dementia is a complex, multifactorial condition involving multiple disease processes (e.g., diabetes, hypertension).

**Modifying certain lifestyle and other health factors may reduce the risk of and/or delay cognitive decline.** Management of population level risk factors (e.g., diet, exercise, smoking) and individualized health risk factors (e.g., hypertension, sleep, stress, high cholesterol, diabetes, and depression) are important in minimizing risks of cognitive decline.

**Dementia has a lifespan continuum, beginning in early life.** Promoting brain health earlier in life is advised to strengthen the brain’s resistance to brain conditions later in life.

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**Action Area 1: Equip Healthcare Providers with Solutions to Support Brain Health Across the Lifespan**

When providers detect the earliest manifestations of mild cognitive impairment or decline, they can prioritize managing interconnected diseases and connect patients to interventions that slow progression. Depending on underlying disease, physicians can potentially help patients reverse mild cognitive impairment, or prevent or delay the progression of dementia.

**High Potential Action Steps.**

1. **Make an Annual Brain Health Check-Up Standard Practice.** Every American—not just older Americans—should discuss brain health with their healthcare provider.

2. **Help Providers Promote Healthy Brains for Patients of All Ages.** We need solutions and tools to promote patient-provider health conversations with healthy individuals before symptoms occur.

3. **Connect Physicians with Regional and Local Resources.** Physicians need resources and solutions to offer patients.
Action Area 2: Create Consumer Demand for Lifelong Brain Health Care

As the primary stakeholders in the healthcare system, consumers have an important role in demanding change in the care delivery landscape. Ample precedent has been set—in hospice care, HIV, and mental health, for example—showing that consumer movements can lead to an overhaul in approach. When consumers claim ownership of a health issue, they become a critical element in changing the healthcare system.

High Potential Action Steps.

To shift the culture of medical practice and elevate brain health within the healthcare system, education efforts must reach the public and encourage consumers to proactively ask healthcare providers about brain health and to demand preventive care to reduce the risk of cognitive decline.

1. Expand Brain Health Education to Increase Patient Demand for Healthy Brain Care. Existing brain health campaigns should consider incorporating measurable strategies to encourage consumers to discuss brain health with their healthcare providers, even when they may be non-symptomatic.

2. Leverage Technology Innovation to Enhance and Expand Consumer Engagement. Technology is narrowing the gap between patient-provider dialogue, providing accessible data and information that allow for dialogues with doctors about diagnosis and treatment options.

3. Develop Strategic Partnerships to Reach Consumers. Many stakeholders can amplify, elevate, and distribute consumer-facing communication on brain health, along with tools to support engagement with physicians and other healthcare providers.
Action Area 3: Align Business Incentives for Payers and Providers to Promote Brain Health

Financial incentives in the healthcare system have been slow to reward preventive care. Further, they do not adequately compensate for the time intensive, complex task of assessing cognitive function and having difficult conversations with patients. An evidenced-based medical care innovation takes many years to integrate widely into clinical care, and an accelerated approach is needed.

High Potential Action Steps.

1. **Enlist Cities and States as Partners in Promoting Prevention and Early Detection.** Cities and states have many incentives and opportunities to influence lifetime brain health in their populations. Enhancing community-based resources, along with investments in education, prevention, and detection initiatives, are all within their purview and have the potential to promote prevention and reduce dementia risk.

2. **Develop a National Medicare Dementia Prevention and Detection Strategy.** CMS should develop a strategy that would specifically encourage providers and payers to proactively address brain health among non-symptomatic, healthy older adults and to strengthen early detection and interventions that delay disease progression.

3. **Develop the Business Case For Payers and Health Systems.** Working with payers and providers, develop a compelling business case for risk reduction and early detection under current payment incentives and quality measurement.
Contributors

Neelum T. Aggarwal, MD, FAMWA
Chief Diversity and Inclusion Officer, American Medical Women’s Association (AMWA)

Gretchen Alkema, PhD
Vice President of Policy and Communications. SCAN Foundation

Julie Anbender
Senior Advisor, Nurse Practitioners in Women’s Health

Rhoda Au, PhD
Professor of Anatomy & Neurobiology, Neurology and Epidemiology
Boston University Schools of Medicine and Public Health

Karin Bolte
Senior Director, Health Policy, National Consumers League

Sandra Bond Chapman, PhD
Founder and Chief Director, Center for Brain Health at The University of Texas at Dallas

Malaz Boustani, MD
Richard Fairbanks Professor of Aging Research, Indiana University School of Medicine

Bruce Chernof, MD, FACP
President and CEO, SCAN Foundation

Lindsay Chura, PhD
Senior Policy Advisor and Chief Scientific Officer, Global Council on Brain Health (GCBH), AARP

Meryl Comer
Founding Board Member, UsAgainstAlzheimer’s

Jeffrey Cummings, MD, ScD
Director, Cleveland Clinic Center for Neurodegeneration and Translational Science

Susan Dentzer
Visiting Fellow, Duke-Margolis Center for Health Policy

Nancy-Ann DeParle
Partner, Consonance Capital Partners/(Previously) White House Office of Health Reform

Kevin Donnellan
Chief of Staff, AARP

John Dwyer
CEO, Global Alzheimer’s Platform Foundation

Linda Elam, PhD, MPH
Plan President, Amerigroup/D.C. Medicaid

Howard Fillit, MD
Founding Executive Director and Chief Science Officer, Alzheimer’s Drug Discovery Foundation (ADDF)

Lori Frank, PhD
Senior Behavioral Scientist, RAND Corporation

Jill Goldstein, PhD
Professor, Psychiatry and Medicine, Harvard Medical School; Executive Director, Women, Heart, and Brain Global Initiative

Philip B. Gorelick, MD, MPH
Adjunct Professor of Neurology, Northwestern University Feinberg School of Medicine

Glenda Greenwald
Founder and President Aspen Brain Institute

Henry Harbin, MD
Adviser/Board member, Brain Futures Inc.; Former CEO Magellan Health Services

Katherine Hayes, JD
Director of Health Policy, Bipartisan Policy Center

Karin Hellsvik
Director, Global Patient Advocacy, Biogen

Marsha Henderson
Former Associate Commissioner for Women’s Health and Director of the Office of Women’s Health (OWH), U.S. Food and Drug Administration

Drew Holzapfel
Director, Global CEO Initiative on Alzheimer’s

Richard S. Isaacson, MD
Weill Cornell Medical College/New York-Presbyterian Hospital Director, Alzheimer’s Prevention Clinic, Weill Cornell Memory Disorders Program