

# AGING JUST ISN'T WHAT IT USED TO BE: OVERCOMING BARRIERS TO AGING IN THE THE 21<sup>ST</sup> CENTURY:

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# WHAT'S AGE GOT TO DO WITH IT?

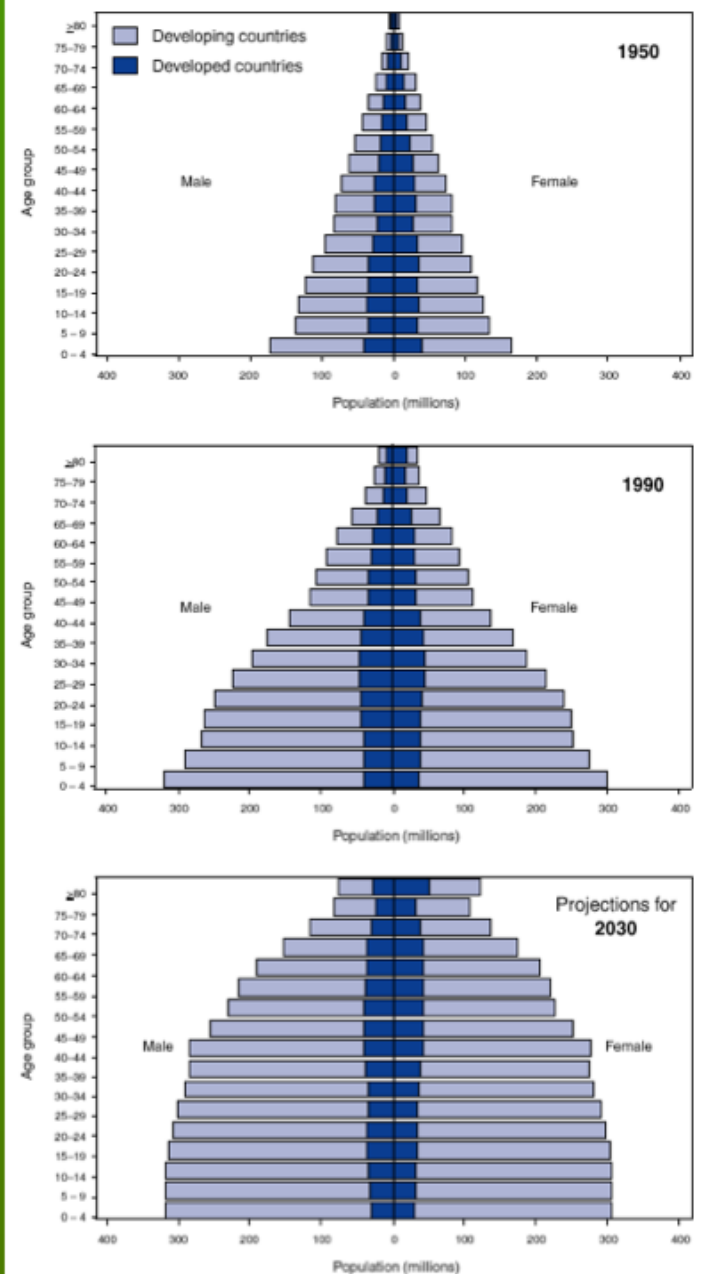
## Objectives:

- ▶ Understand the demographics of an aging society
- ▶ Know the factors that influence aging
- ▶ Identify strategies for improving wholistic approaches to aging well in the 21st century.



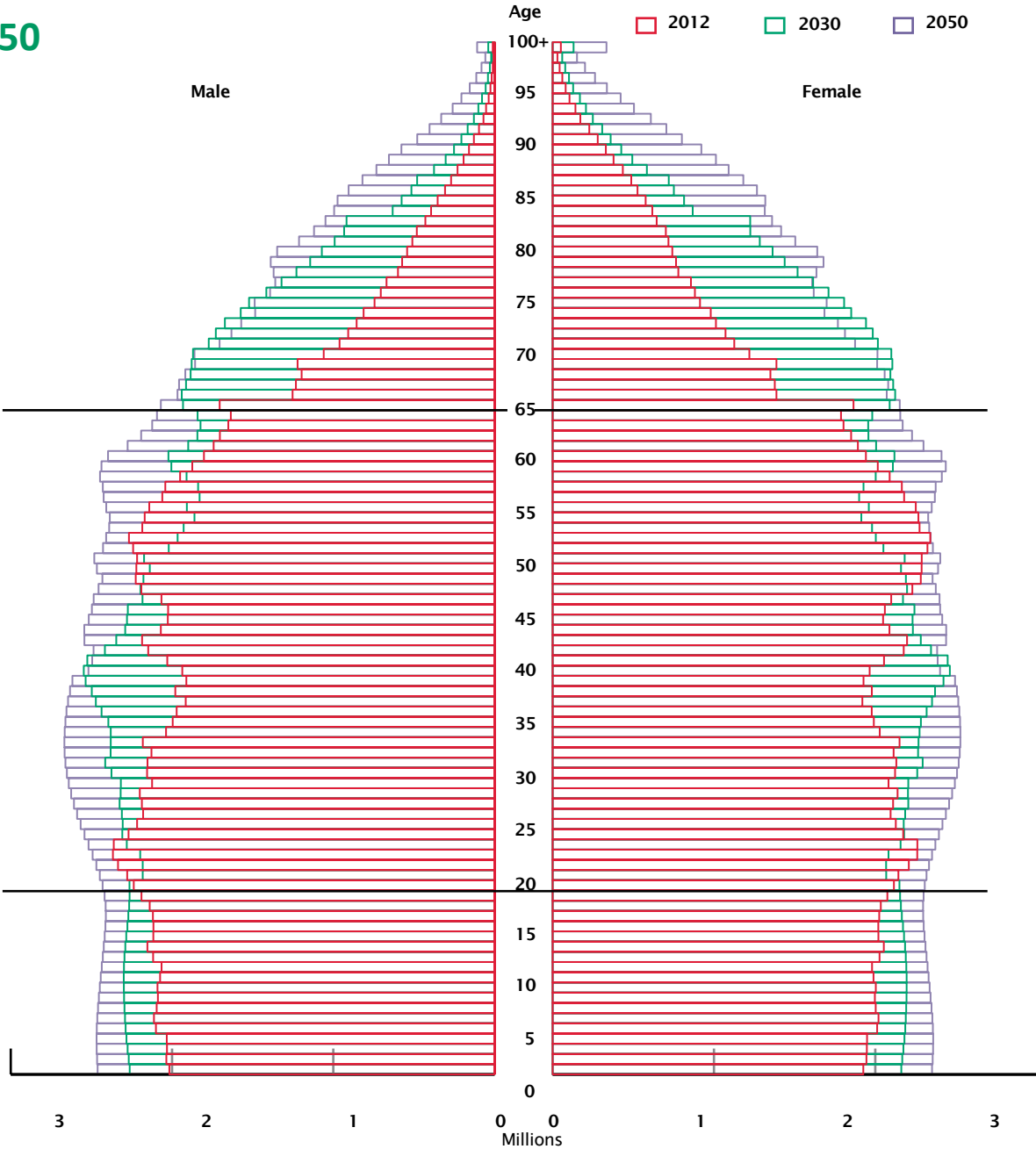
# DEMOGRAPHICS

**FIGURE. Population age distribution for developing and developed countries, by age group and sex — worldwide, 1950, 1990, and 2030**



Source: United Nations, 1999, and U.S. Bureau of the Census, 2000.

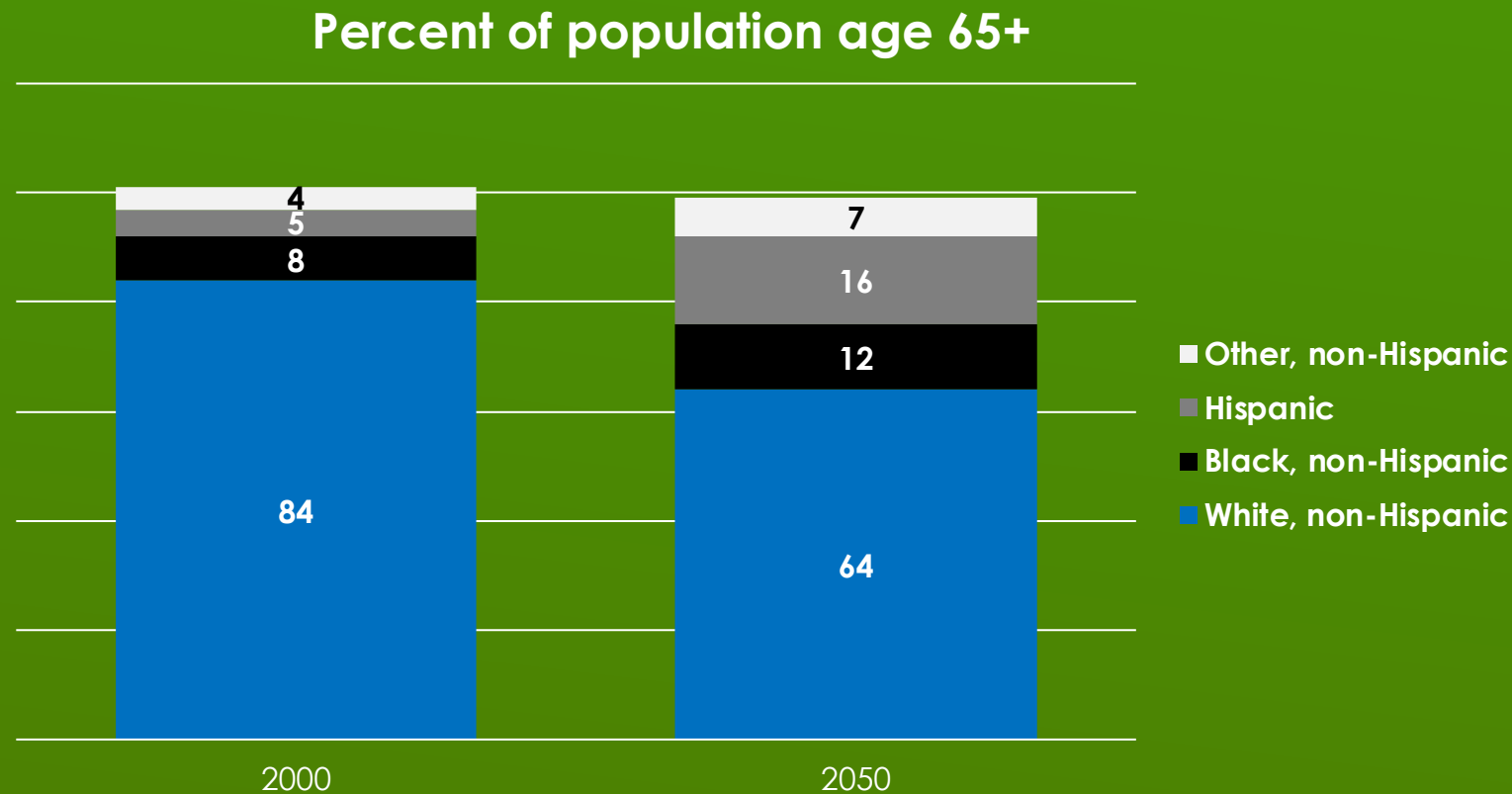
# Age and Sex Structure of the Population for the United States: 2012, 2030, and 2050



Source: U.S. Census Bureau, 2012 Population Estimates and 2012 National Projections.



# Elderly Americans by Race and Ethnicity, 2000 and 2050



Sources: U.S. Census Bureau, Census 2000 Demographic Profile (2001); and U.S. Census Bureau, Projections of the Resident Population by Age, Sex, Race and Hispanic Origin, 1999 to 2100



# CHRONIC DISEASES IN OLDER ADULTS - STATISTICS

## ► **Leading causes of death:**

- In 1900 – infections and acute illness
- In the 21<sup>st</sup> century – chronic diseases and degenerative illness

## ► **Among individuals over 65 years:**

- 80 percent have at least one chronic disease
- 50 percent have at least two chronic diseases
- Medicare-Medicaid Enrollees (MMEs)
- 59 percent have arthritis
- 20 percent have diabetes (largest incidence occurs in individuals over 75 years)
- 13 percent have a mental illness; 65 million have depression
- The risk of Alzheimer's doubles every 5 years
- The highest incidence of Alzheimer's is in those over 80 years



# CHRONIC DISEASES IN OLDER ADULTS – STATISTICS

## ► **Among Medicare-Medicaid Enrollees (MMEs)**

- On average have 25 percent more chronic conditions than non-MMEs
- More likely than non-MMEs to have depression, Alzheimer's disease, diabetes, heart failure, chronic kidney disease, COPD, asthma, or stroke



# Aging...by the Numbers

**47.3: Average life expectancy at birth, 1900**

**78.7: Average life expectancy at birth, 2011**

**43 million: Number of Americans ages 65 and over, 2012**

**72 million: Estimated number of Americans ages 65 and over, 2030**

**89 million: Estimated number of Americans ages 65 and over, 2050**

**6 million: Number of Americans ages 85 and older, 2012**

**19 million: Estimated number of Americans ages 85 and older, 2050**

**3 thousand: Number of Americans ages 100 and older, 1950**

**62 thousand: Number of Americans ages 100 and older, 2012**

**Approximately 1 million: Estimated number of Americans ages 100 and older, 2050**

**23 million: Americans ages 65 and older reporting difficulty performing at least one basic or complex activity, 2010**

**45.4 percent: Americans ages 65 or older reporting two or three chronic health conditions, 2012**

**14.1 percent: Americans ages 65 and older reporting four or more chronic health conditions, 2012**

*(Adults were categorized as having 0 to 1, 2 to 3, or 4 or more of these conditions: hypertension, coronary heart disease, stroke, diabetes, cancer, arthritis, hepatitis, weak or failing kidneys, chronic obstructive pulmonary disease, or current asthma)*

*Sources: Older Americans 2012: Key Indicators of Well-Being; CDC and ACL data*

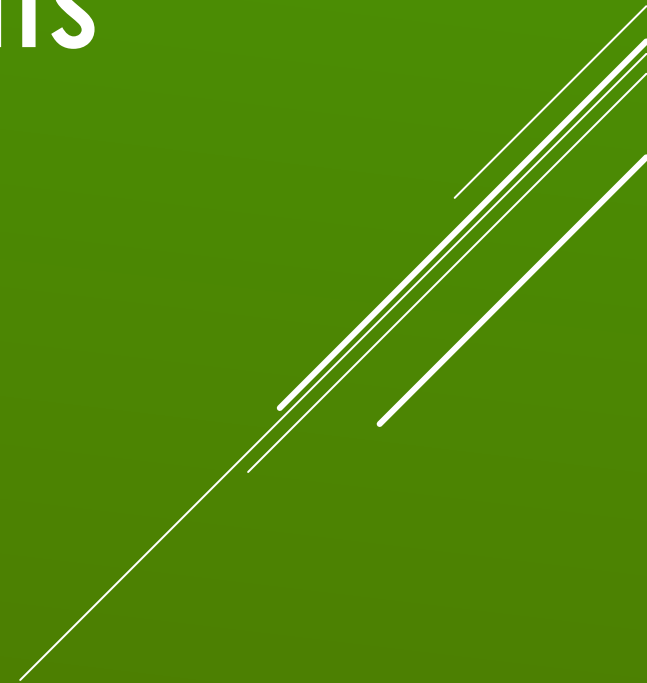


## Leading Causes of Death for Americans Age 65 or Older

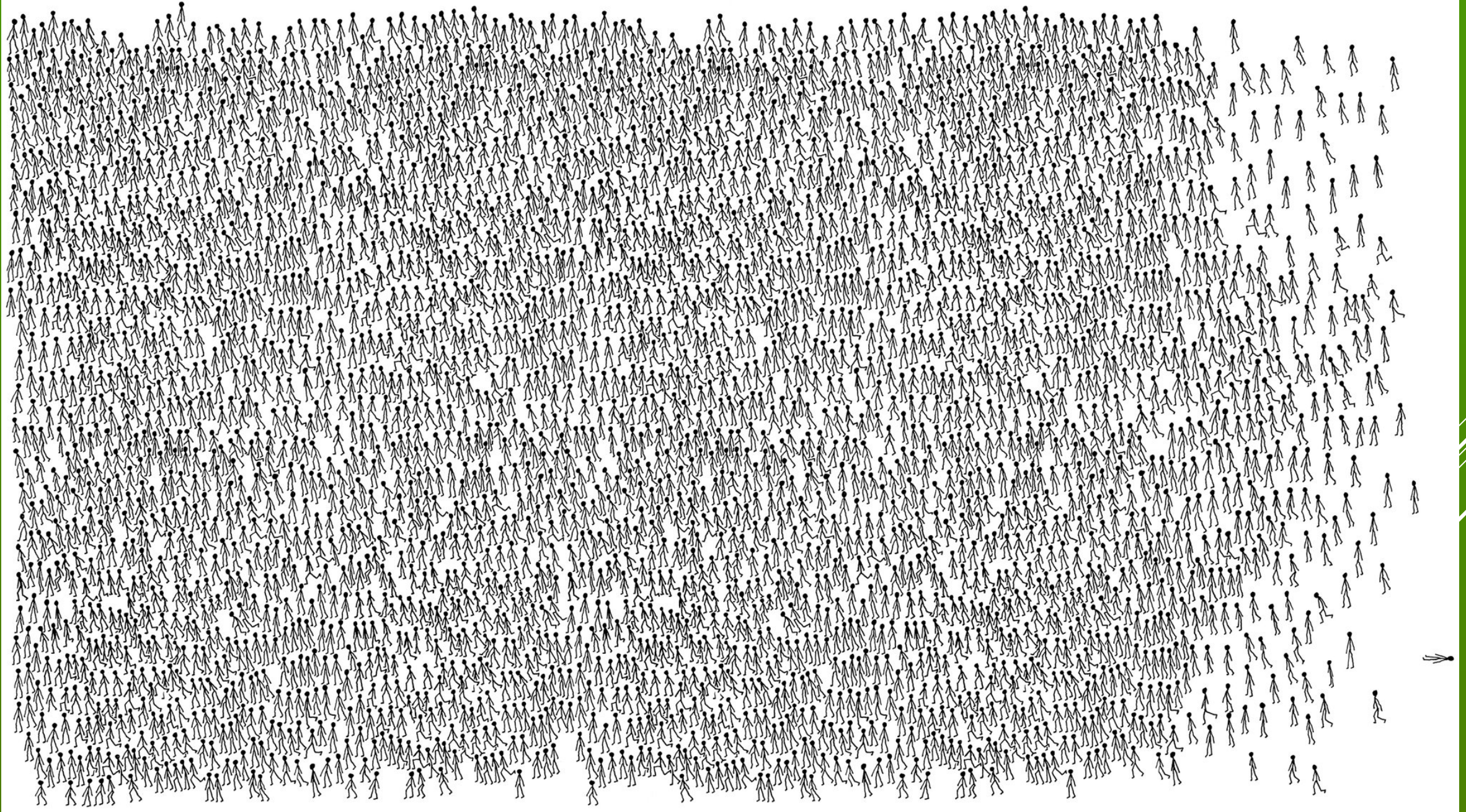
All Causes	100%
Heart diseases	33%
Cancer	22
Stroke	8%
COPD	6%
Pneumonia, influenza	3%
Diabetes	3%
Alzheimer's disease	3%
Kidney diseases	2%
Accidents	2%
Septicemia	1%
Other causes	17%



# THE HIGH PRICE OF FAILING AMERICA'S COSTLIEST PATIENTS







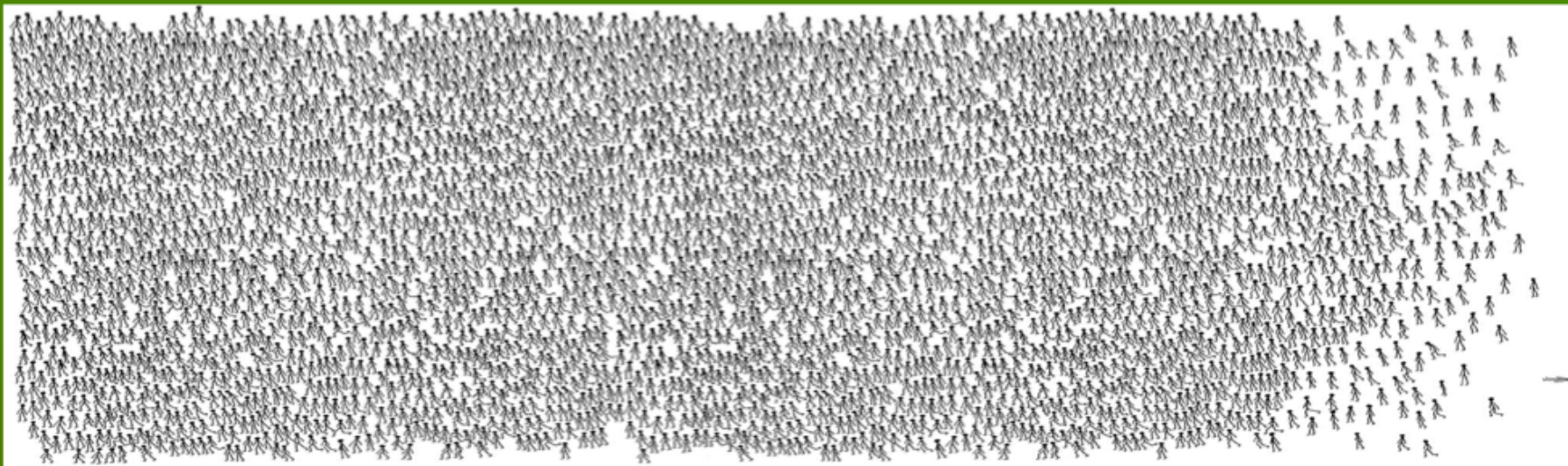




## REMEMBERING WHAT BENEFICIARIES WANT FROM THEIR HEALTH PLAN

*“People want health not healthcare. And those who require the most healthcare and get the least health- high need, high-cost patients with multiple or severe medical conditions - feel this most acutely.”*

—Dr. Dhruv Khullar, September 2017

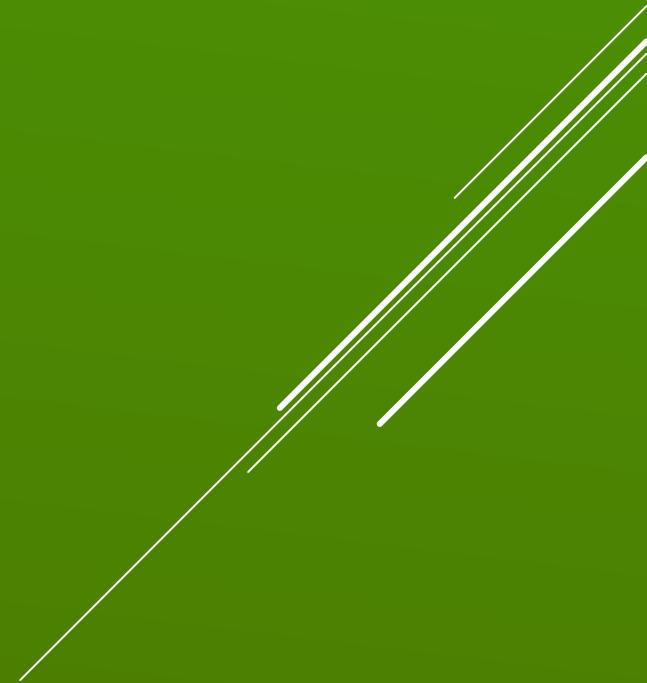




# WHAT IS HEALTH?

- ▶ The state of being free from illness or injury
- ▶ WHO: Health is a state of complete physical , mental and social well-being and not merely the absence of disease or infirmity
- ▶ Merriam-Webster (dictionary):  
The condition of being well or free from disease or the overall condition of someone's body or mind

# BARRIERS TO HEALTHY AGING





# AGEISM

Actions and attitudes that place different values on, or create unequal opportunities for, people or groups because of their age.

- ▶ **Age Discrimination**

- ▶ Geriatrics A bias or belief that may be held by a health care provider that depression, forgetfulness, and other disorders are a normal part of ageing and that older individuals won't benefit from treatment of mental disorders.
- ▶ an attitude that discriminates, separates, stigmatizes, or otherwise disadvantages older adults on the basis of chronological age.

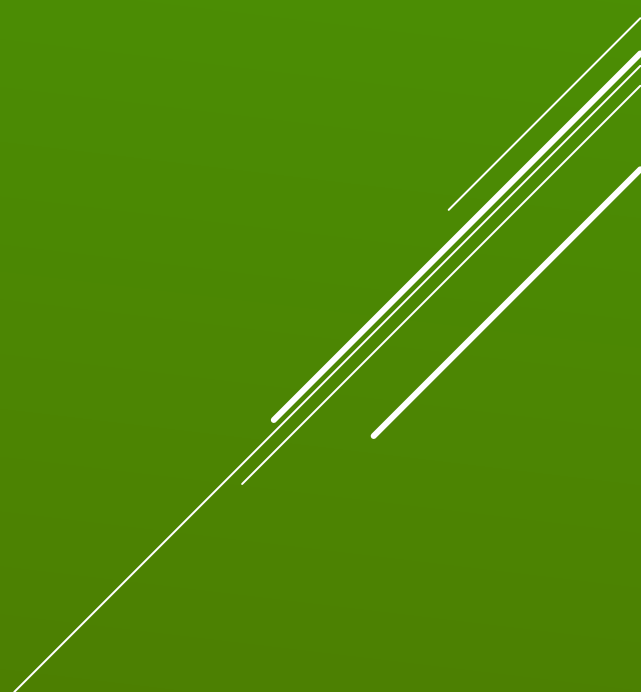


# AGING = BAD



Aging seems to be  
the only available  
way to live a long  
life.

*Daniel Francois Esprit Auber*





# REFRAMING AGING...

## WHAT WE'VE SAID (IN THE PAST)

- Older adults have **special healthcare needs** that can make their **medical care more complicated**.
- Approximately 20,000 geriatricians are needed now to care for over 14 million older Americans. As of 2016, there were **7,293 certified geriatricians nationwide**.

# SOCIAL DETERMINANTS OF HEALTH

- ▶ Place Matters

- ▶ Where we ...

- ▶ Live
    - ▶ Work
    - ▶ Play
    - ▶ Learn
    - ▶ Shop
    - ▶ Worship

- ▶ Race Matters

- ▶ Income Matters

- ▶ Language Matters

- ▶ Etc.





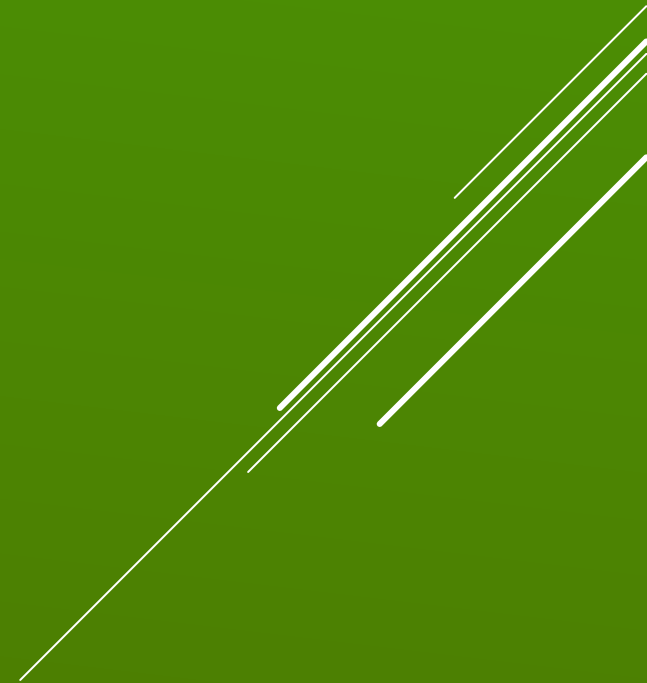


# AGING IS AN INDIVIDUAL PROBLEM, DETERMINED BY INDIVIDUAL CHOICES





# SOLUTIONS TO HEALTHY LIVING



# HEALTHY AGING DATA

The Healthy Aging Data Portal provides easy access to CDC data on a range of key indicators of health and well-being, screenings and vaccinations, and mental health among older adults at the national and state levels. These indicators provide a snapshot of currently available surveillance information, and can be useful for prioritization and evaluation of public health interventions.



Healthy People 2020 Older Adult Topic Area

To better understand the determinants of healthy aging in various populations and settings, specific Healthy People 2020 measures related to older adults were defined with the overall goal to improve their health, function and quality of life.

Objective Number	Objective
OA-1	Increase the proportion of older adults who use the Welcome to Medicare benefit.
OA-2	Increase the proportion of older adults who are up to date on a core set of clinical preventive services.
OA-3	Increase the proportion of older adults with one or more chronic health condition report confidence in managing their conditions.
OA-4	Increase the proportion of older adults who receive Diabetes Self-Management Benefits.
OA-5	Reduce the proportion of older adults who have moderate to severe functional limitations.
OA-6	Increase the proportion of older adults with reduced physical or cognitive function who engage in moderate or vigorous leisure-time physical activities.
OA-7	Increase the proportion of the health care workforce with geriatric certification.
OA-8	Reduce the proportion of noninstitutionalized older adults with disabilities with unmet need for long-term services and supports.
OA-9	Reduce the proportion of unpaid caregivers of older adults who report an unmet need for caregiver support services.
OA-10	Reduce the rate of pressure ulcer-related hospitalizations among older adults.
OA-11	Reduce the rate of emergency department visits due to falls among older adults.
OA-12	Increase the number of states, the District of Columbia, and tribes that collect and make publicly available information on the characteristics of victims, perpetrators, and cases of elder abuse, neglect and exploitation.



## Healthy People 2020 Dementias, Including Alzheimer's Disease, Topic Area

Objective Number	Objective
DIA-1	Increase the proportion of people with diagnosed Alzheimer's disease and other dementias, or their caregiver, who are aware of the diagnosis.
DIA-2	Reduce the proportion of preventable hospitalizations for people with diagnosed Alzheimer's disease and other dementias.

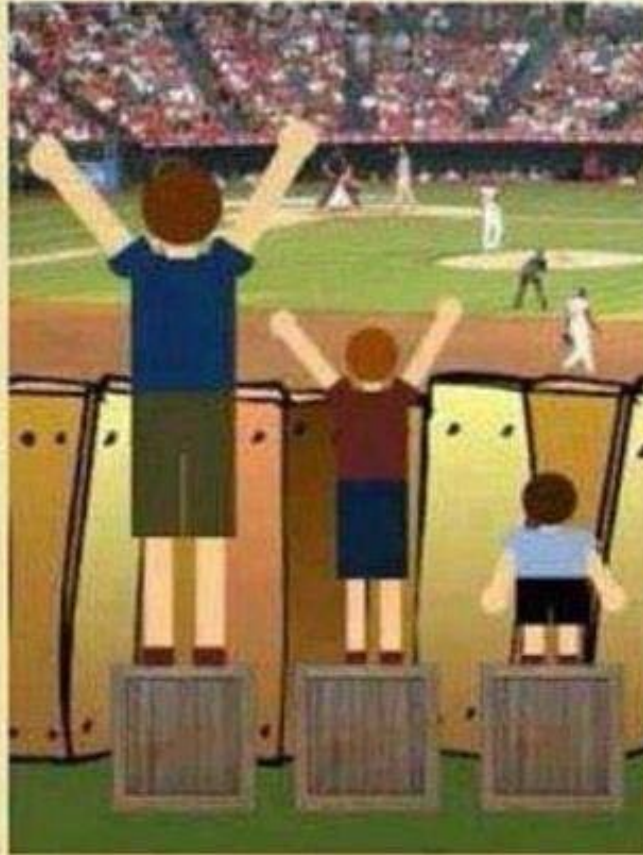
For the first time in Healthy People 2020, this topic was added with the goal to reduce the morbidity and costs associated with, and maintain or enhance the quality of life for, people with dementia, including Alzheimer's disease.



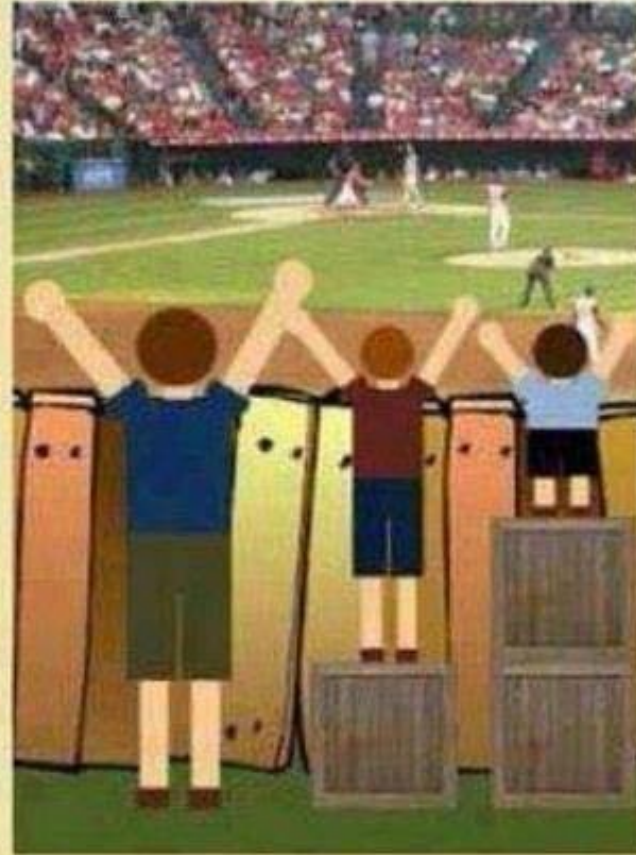
- ▶ Physical activity 30 minutes most days
- ▶ Eating healthy with low fat diet, high fiber, fish, and 5 servings fruits/veggies daily
- ▶ Mentally active , learning new things
- ▶ Socially active
- ▶ Reduce stress
- ▶ Take your medicine and get regular check ups

# KEYS TO AGING AND LIVING WELL

With Equity, inputs may need to be different to achieve equal outcomes



This is Equality



This is Equity



# REFRAMING AGING...

## HOW WE'RE REFRAMING MOVING FORWARD

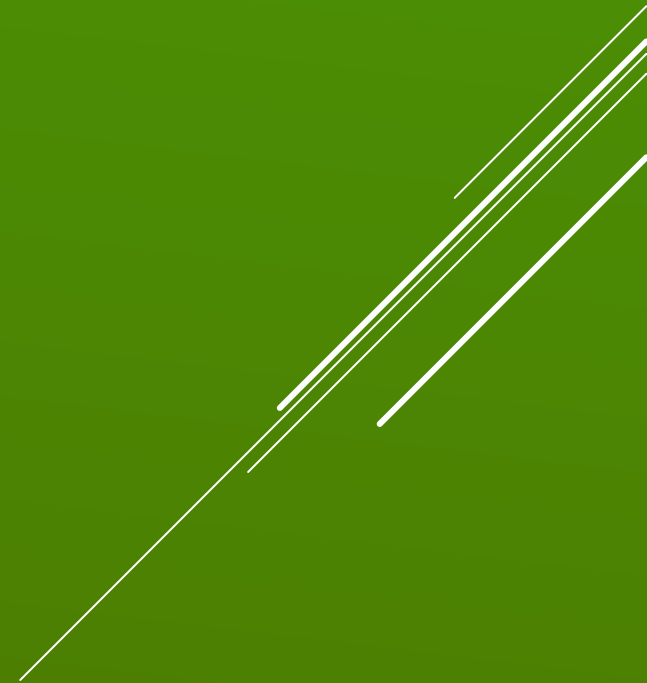
As **more and more of us live longer and healthier lives**, this presents **new opportunities for our communities**. Yet we run the **risk of losing out on this momentum** if we don't think about the kind of health care we need as we age.

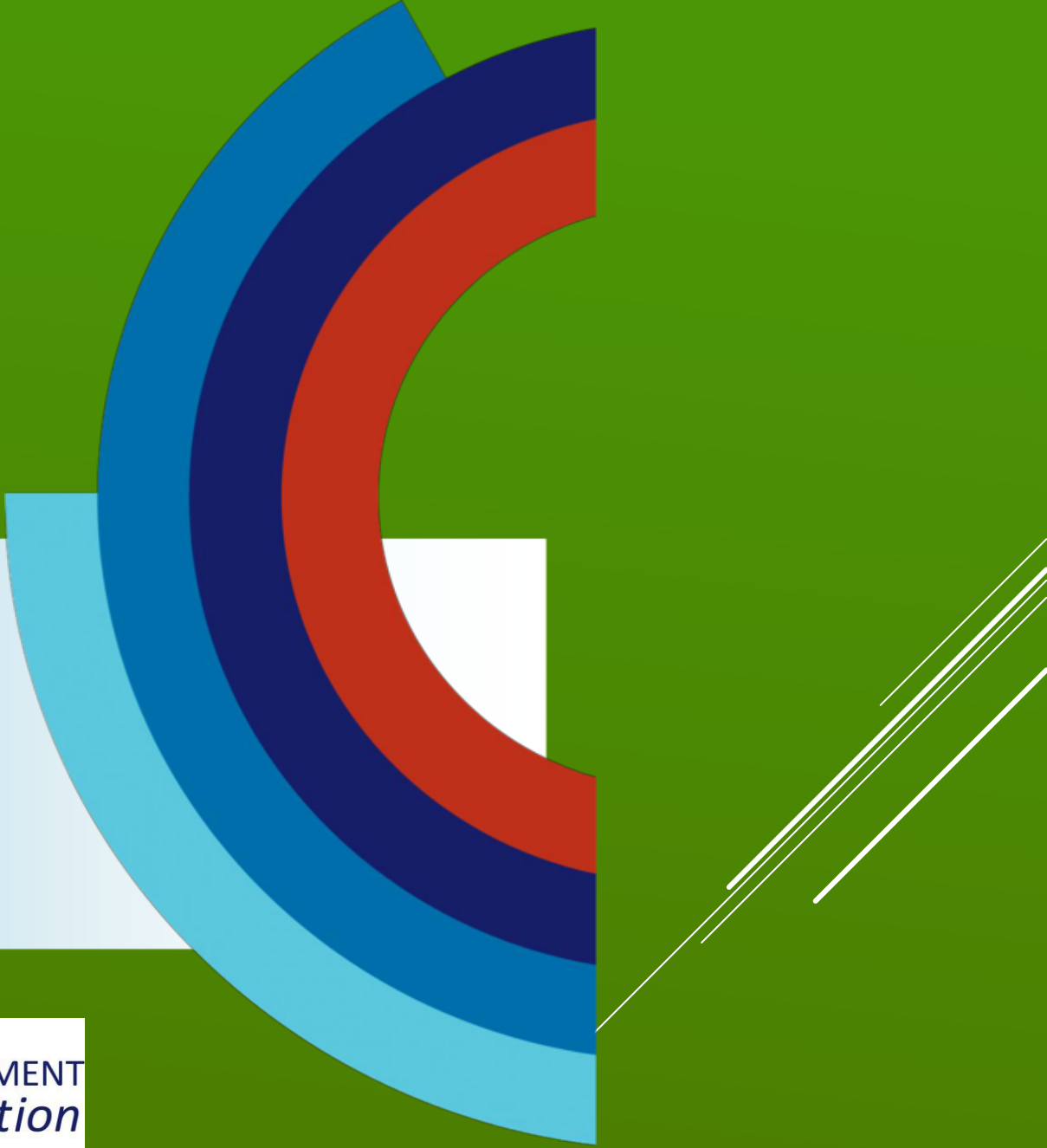
That's the expertise at the core of geriatrics, the health care specialty **dedicated to new and smarter ways to approach our care as we age**.





# BEST PRACTICE MODELS OF CARE





# Care That Works: Program of All-Inclusive Care for the Elderly (PACE)

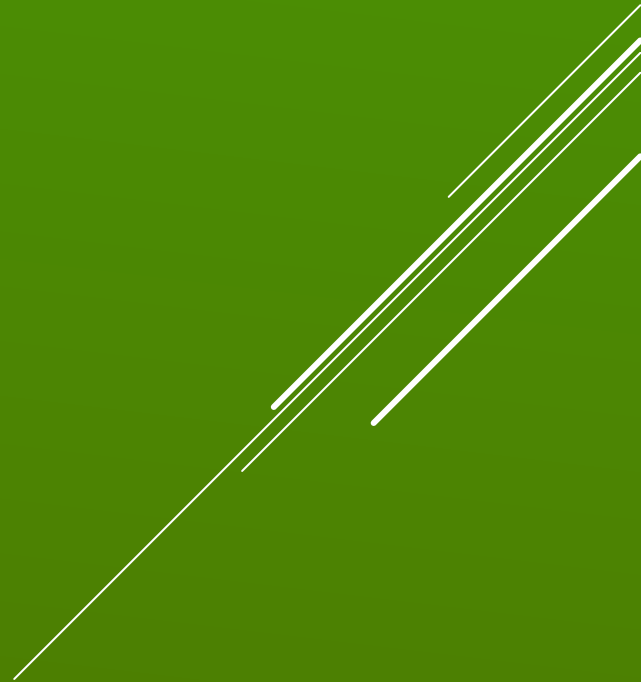
February 2018



# QUICK FACTS ABOUT PACE

- ▶ PACE national model of care for aging adults
- ▶ Goal keep an aging adult population in the community and out of nursing homes.
- ▶ PACE members receive comprehensive medical and social services according to an individualized plan.
- ▶ PACE serves over 40,000 older Americans with chronic care needs.
- ▶ The locus of PACE activity is the PACE Center: attendance is meant to promote socialization, alleviate caregiver burden, and help the team monitor enrollee's health and functioning.
- ▶ Over 90 percent of participants are dually eligible for Medicare and Medicaid.
- ▶ Average age of participants was 83 in 2015, now 74 years old

# ▶ AGING WELL IN THE 21<sup>ST</sup>





# Summary:

- ▶ Understanding what the risk factors that threaten to take away health:
- ▶ #1 cause of death in the US irrespective of age, gender, socioeconomic status is CV disease: Control those risk factors that you can control
- ▶ As a society we will continue to age- major risk factor for dementia is AGE: control those risk factors that we can control
- ▶ Look for models of care that provide more than healthcare but rather health = PACE

- ▶ Look at aging from a different perspective: not a disease but an opportunity to impact the next generation
- ▶ Know the impact that social determinants have on health : your zip code
- ▶ Aging well does not start with an aging adult population it starts with each of us.
- ▶ Advocate for more physicians/health care providers in primary care
- ▶ Reward those that provide care to the aging adult population

# TAKE HOME LESSONS:

**AGE** is a number

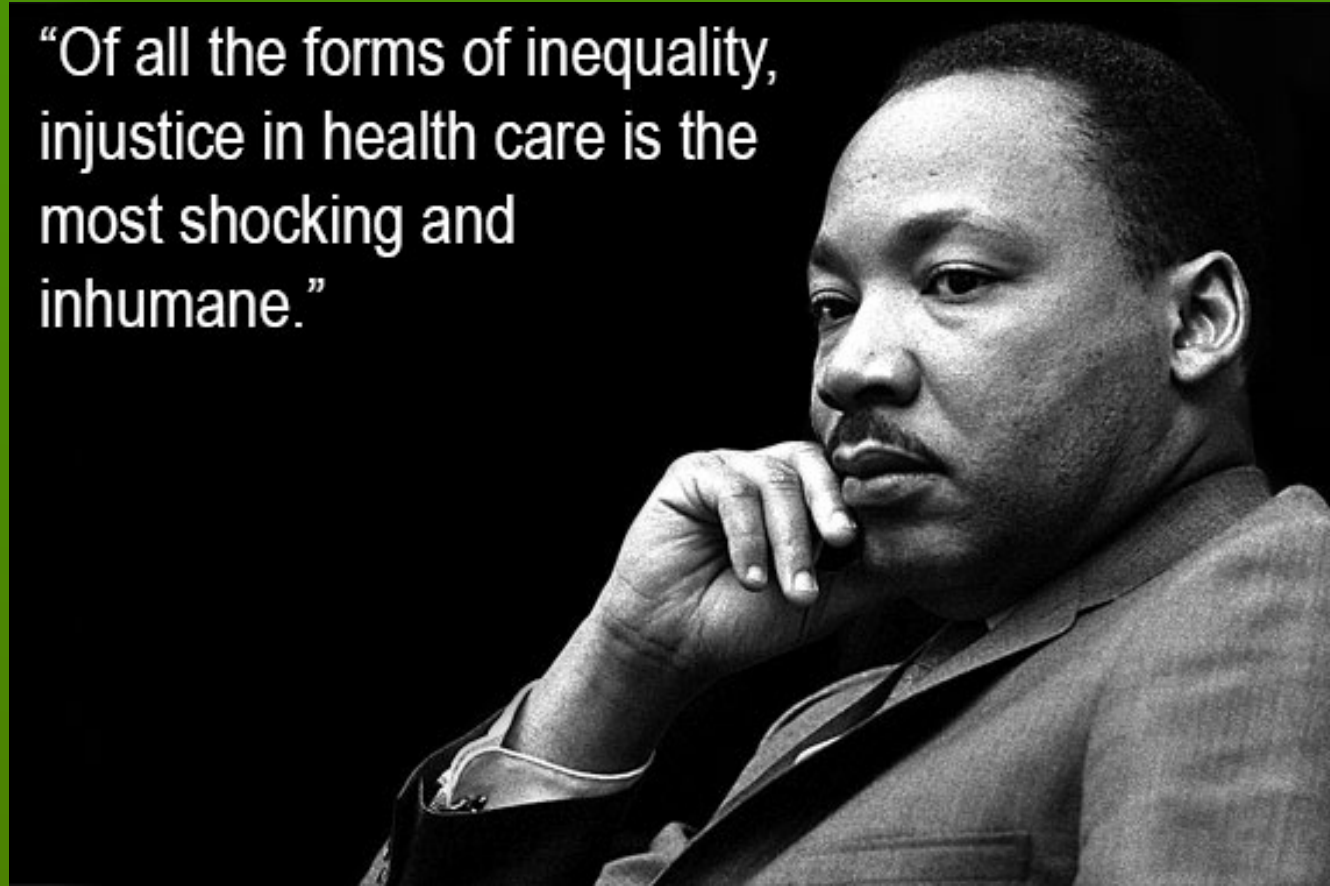
- ▶ Society must learn to look at it differently
- ▶ Demographics are clear: we are AGING
- ▶ Statistics are clear that we not prepared to manage this population
- ▶ Caring for and aging adult population may be thought as “undesirable”
- ▶ Provide health not healthcare
- ▶ Policy changes
- ▶ Additional Reimbursement for those that go into Geriatrics

# REFERENCES

- ▶ Fries J. F., Koop C. E., Beadle C. E., Cooper P. P., England M. J., Greaves R. F., Sokolov J. J., & Wright D. (1993) Reducing health care costs by reducing the need and demand for medical services. The Health Project Consortium. New England Journal of Medicine, 329, 321-325.
- ▶ Center for Consumer Engagement in health innovation – Care that Works: Program of All-Inclusive Care for the Elderly (PACE) February, 2018; pg. 2
- ▶ Healthy Aging Data –<https://www.cdc.gov/aging/agingdata/index.html>
- ▶ An Aging Nation: The Older Population in the United States - Current Population Reports by Jenifer M. Ortman, Victoria A Velkoff, and Howard Hogan – Issued May 2014; pg5 – Fig. 2



“Of all the forms of inequality,  
injustice in health care is the  
most shocking and  
inhumane.”



THANK YOU