

Long Term Care and Dementia Care Navigation Programs Annual Report FY2025

Human Services Article, Section 10-1301(c)

Department of Aging

October 1, 2025



Wes Moore | Governor

Aruna Miller | Lt. Governor

Carmel Roques | Secretary

October 1, 2025

The Honorable Wes Moore
Governor
100 State Circle
Annapolis, Maryland 21401
The Honorable Bill Ferguson
President
Senate of Maryland
State House, H-107
Annapolis, MD 21401

The Honorable Adrienne A. Jones
Speaker
Maryland House of Delegates
State House, H-101
Annapolis, Maryland, 21401

The Honorable Pamela Beidle
Chair, Finance Committee
Senate of Maryland
3 East Miller Senate Office Building
11 Bladen Street
Annapolis, MD 21401

The Honorable Joseline A. Pena-Melnyk,
Chair, Health and Government Operations
Committee
Maryland House of Delegates
241 Taylor House Office Building
6 Bladen Street
Annapolis, Maryland, 21401

Re: Human Services Article §10-1301(c), (MSAR #14683); Annual Report on Long-Term Care and Dementia Navigation Program

Dear Governor Moore, President Ferguson, and Speaker Jones:

Pursuant to Human Services Article § 10-1301 we submit the required annual report on the Department of Aging's Long-Term Care and Dementia Care Navigation Program.

Please contact MDOA Legislative Director Andrea Nunez, andrea.nunez@maryland.gov or 410-414-8183 with any questions.

Sincerely,

Carmel Roques
Secretary



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This year, the Maryland Department of Aging (MDOA) has collected its first full year of data in the categories mandated in statute (Human Services Article §10-1301). The Department will publish this report and future annual reports on our website, along with supplemental information available through regular reporting and data collection. The Department submits the information below regarding its work under this legislation's mandates for the Fiscal Year 2025 reporting period (7/1/2024 - 6/30/2025).

Direct Contacts per Long-Term Care and Dementia Care Navigation Program

Information on direct contacts is collected as part of the standard quarterly reporting for Maryland Access Point services. In the FY25 reporting period, the following number of direct contacts were made around the state. Figure 1 shows the number of direct contacts provided to clients diagnosed with Alzheimer's Disease and Related Dementias (ADRD), a 1.4% decrease from FY24. Figure 2 shows the number of direct contacts across all clients who sought information related to Dementia Services. Dementia Services was not included as a category for previous years, so a comparison is unavailable.

(1) Clients with ADRD	FY2025	Previous Period
Q1 (7/1 - 9/30)	991	787
Q2 (10/1 - 12/31)	764	901
Q3 (1/1 - 3/31)	874	828
Q4 (4/1 - 6/30)	686	846
TOTAL	3,315	3,362

(2) Clients seeking information on Dementia Services	FY2025
Q1 (7/1 - 9/30)	640
Q2 (10/1 - 12/31)	1061
Q3 (1/1 - 3/31)	931
Q4 (4/1 - 6/30)	4,539
TOTAL	7,171



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Direct Contact Results

The results of direct contact are measured through completion of the AD8 Cognitive Screening Tool. While the existing Maryland Access Point quarterly reporting provides general information on results of direct contact across all services, the report does not differentiate between services offered for dementia care navigation and other types of counseling. The AD8 Cognitive Screening Tool was established as a general purpose tool to discriminate between typical age-associated cognitive decline and Mild Cognitive Impairment (MCI), which is a precursor to ADRD. MAP counselors statewide have been trained to administer the AD8 screening as part of their regular dementia navigation options counseling. Results of the AD8 screening align with the data elements established for this report, but as this is a new screening tool, data quality may have some limitations, which will be discussed at the start of each section below. As part of reporting for FY26 and beyond, MDOA is committed to providing technical assistance to ensure that data elements are clear, accurate, and representative of the whole state.

Individuals Referred to Service Providers (Percentage)

Contacts from individuals who completed the AD8 Cognitive Screening Tool are considered a referral to a service provider when the results of the screening include recommendation for formal assessment, which provides users information on specialists, what to expect at appointments, and items to bring to a clinical cognitive examination. For the Fiscal Year 2025 reporting period, this included **1,771** individuals, or 49.7% of total respondents. It should be noted that while this measure provides an estimate of the number of referrals, this does not explicitly track the number of contacts made between individuals and primary care providers.

Cognitive Screenings

In the FY25 reporting period, the AD8 cognitive screening tool was accessed **38,158 times**. Of those, there were a total of **3,570** fully completed screenings (9.4% of total). This indicates a significant increase from the previous period, where there were 91 complete responses recorded. The dramatic shift in screening tool usage is likely due to extensive training conducted in FY25 with MAP staff to familiarize counselors with the tool and promote its use.



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(3) Participant Type	Number	Percentage
Self	1,955	58%
Loved one	721	21%
MAP/AAA Staff	631	19%
Provider/Professional	48	1%

(4) Jurisdiction/Area Agency on Aging	Number of Screenings
Baltimore County	502
Montgomery County	418
Prince George's County	255
Anne Arundel County	251
Baltimore City	201

(5) Identified Cognitive Impairment	Number	Percentage
Reported Problems with Judgement (making decisions, problems with thinking)	1,227	37%
Less interested in hobbies or activities	1,234	38%
Repeating the same things over and over	1,061	32%
Having trouble using tools/appliances/gadgets	951	29%
Forgetting month/year	566	17%
Trouble handling financial affairs	861	26%
Trouble remembering appointments	1,071	33%
Daily problems with thinking or memory	1,555	48%



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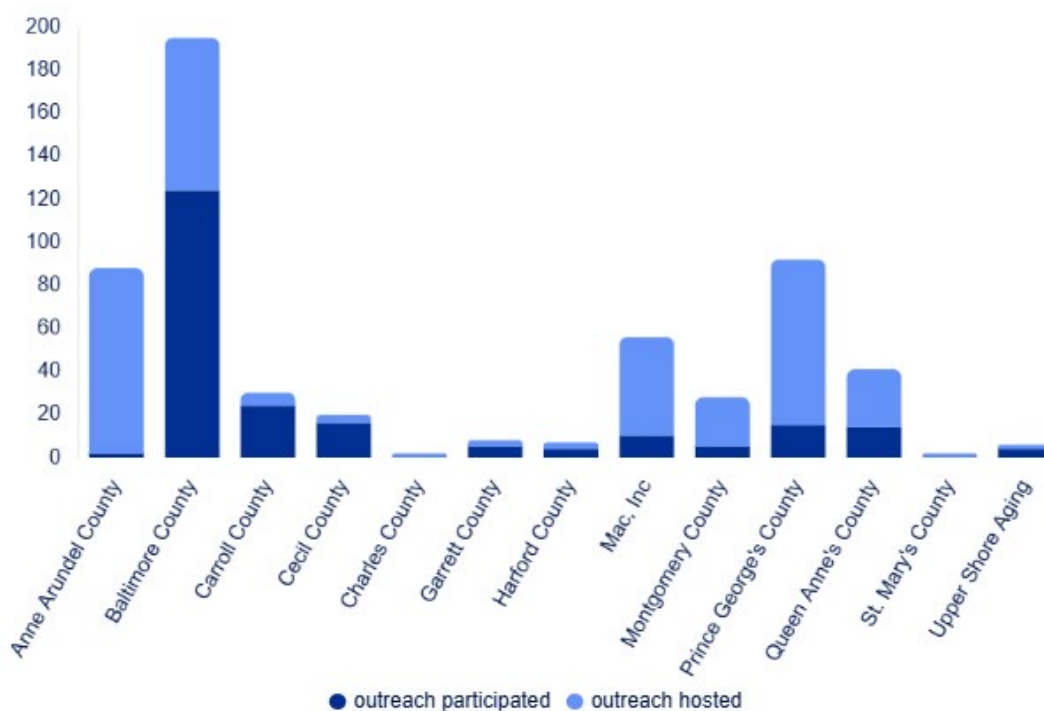
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Outreach Events

For the FY25 reporting period, Area Agencies on Aging (AAAs) conducted a total of 611 outreach events or activities. Of the 19 AAAs in Maryland, six did not host outreach events. Baltimore County hosted and participated in the most outreach events, attending or hosting nearly 200 events on their own. A selection of significant events and programs of note are included in the appendix to this report.

Outreach





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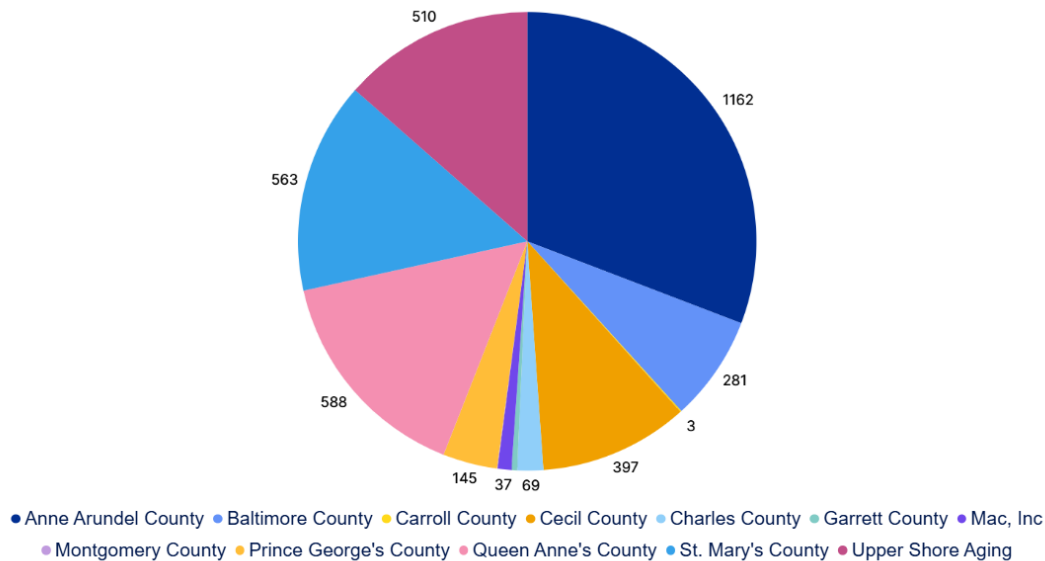
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State Residents Contacted through Outreach Events/Activities

For the FY25 reporting period, AAAs made contact with **3,755** individuals as part of their participation or hosting of outreach events. This data is reported voluntarily and the definition of “resident contacted” may vary between jurisdictions or events. For the FY26 reporting period and beyond, MDOA will continue to refine the reporting requirements for this data. A full accounting of residents contacted per county is included below.

ADRD Contacted





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As a supplement to the required data above, the Department submits the following AAA program activities of note during FY2025:

- Queen Anne's County: Queen Anne's County consistently provides extensive cognitive screenings and makes the AD-8 tool accessible, while also offering robust support through a Sensory Lending Library, daily activities at senior centers, and monthly caregiver support groups with special presentations and an annual conference. They actively train MAP staff in dementia care and are continuously building relationships with local healthcare providers and community partners to enhance resource directories, despite challenges with limited local neurological resources.
- Cecil County: Cecil County conducts AD8 screenings and offers monthly social activities, including games, fitness, and art, for individuals experiencing symptoms of dementia. They provide a monthly Alzheimer's Caregiver Support Group, enhanced by resources like tactile equipment, respite care, and the "Powerful Tools for Caregivers" class. The county also actively engages healthcare providers through informative flyers, direct presentations, and staff education to promote the Dementia Navigation Program and encourage informed referrals.
- Baltimore County: Baltimore County emphasizes widespread education and support for caregivers and individuals through its Dementia Friendly program, offering regular trainings, Memory Cafes, and a comprehensive "Dementia Journey" map and virtual series. MAP staff consistently make referrals to various support programs, while the county actively works to build and expand relationships with healthcare providers and emergency services, including the hiring of a new Dementia Navigator.
- MAC, Inc. (non-profit AAA representing Wicomico, Worcester, Somerset, Dorchester counties): MAC provides comprehensive day programs like Life Bridges and the Butterfly Program, offering stimulating activities and person-centered care for individuals with dementia, alongside regular cognitive screenings. They support caregivers through bi-monthly support groups and the evidence-based "Savvy Caregiver" classes, fostering skills and reducing stress. As a primary referral source, MAC actively engages healthcare providers through monthly Multi-D meetings, collaborative conferences, and direct outreach to enhance resource sharing and support systems.
- Anne Arundel County: Anne Arundel County offers extensive support for individuals with dementia through its Senior Center Plus Program and the "Melody Maker's Workshop," providing stimulating activities and social interaction. They deliver a wide array of caregiver support, including multiple monthly support groups (in-person and virtual), various educational workshops (e.g., Savvy Caregivers, Dementia 101),

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newsletters, and events like a Caregiver Appreciation Dinner. The county's dementia program coordinator actively builds relationships with local healthcare providers and trains diverse community professionals and first responders through impactful workshops like "Dementia Live," aiming to identify service gaps and enhance referrals.

- Carroll County: Carroll County primarily utilizes the AD:8 for cognitive screenings, often recommended by their strong partner, Carroll Hospital's Care Navigation team. Their five Senior & Community Centers offer a wide array of exercise classes and cognitive games promoting brain health and social interaction for individuals with dementia symptoms. The Caregiver Support Program provides monthly support groups and referrals, while the Bureau of Aging & Disabilities actively collaborates with numerous community and healthcare partners, including through the Health Equity Steering Committee, to offer educational programs and identify service gaps for dementia navigation.
- Upper Shore Aging (non-profit AAA representing Caroline, Kent, Talbot counties): Upper Shore Aging leverages its five Senior Centers to offer daily exercise, cognitive games, and craft classes, along with a 16-week "Tandem" program for individuals with dementia, focusing on exercise, music, and art therapy. They provide robust caregiver support through monthly and weekly support groups, augmented by educational sessions, virtual summits, and informative flyers. The agency also promotes professional development via Johns Hopkins webinars and facilitates referrals from primary care professionals and doctors for further cognitive testing.
- St. Mary's County: St. Mary's County conducts memory screenings and equips its MAP staff with AD8 training, providing a resource packet on dementia services to caregivers and individuals. Their primary caregiver support consists of a monthly support group, complemented by staff training in "Building Better Caregiver" techniques. The provided sources indicate a focus on general resource dissemination and caregiver support, with no detailed specific dementia programs for individuals or direct partnerships with healthcare providers.
- Montgomery County: Montgomery County offers extensive support for caregivers through 39 weekly support groups, including specialty and multi-language options, a virtual mental health series, and individual consultations. For individuals with early-onset dementia, they provide a "Bone Builders" exercise program and five weekly memory cafes. The county also actively promotes the AD:8 cognitive screening tool, trains "Dementia Friends" speakers, and connects with various health clinics and community programs to share information and build relationships with medical staff.

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- Garrett County: Garrett County conducts cognitive screenings, with local medical offices also providing and reporting AD8 results, demonstrating inter-agency collaboration. They offer two established monthly caregiver support groups with a third being developed and are actively working to establish a memory cafe to further engage the community. The ADRD program coordinator consistently meets with local doctor offices and partners with the Health Department through bi-monthly "Local ADRD group" meetings to coordinate services and resources.
- Prince George's County: Prince George's County provides memory screenings at Dementia Resource Centers and offers "Stronger Memories Classes" for those with memory challenges or early-stage dementia, alongside memory cafe programming. They offer a monthly ADSD Caregiver Support Group and "Powerful Tools for Caregivers" classes to support caregivers. MAP staff engage in continuous community outreach to educate healthcare professionals and partners, fostering networking opportunities to identify and address the needs of individuals with ADRD and their caregivers.
- Harford County: Harford County actively conducts cognitive screenings through partnerships with the University of Maryland Upper Chesapeake Memory Clinic and co-hosts a monthly Memory Cafe program for individuals with early-stage dementia and their caregivers, focusing on resources and socialization. They also provide broader educational programs on brain health and support existing county caregiver groups and an annual Caregiver's Conference. MAP staff facilitate referrals and strengthen connections with local healthcare providers like the Memory Clinic to ensure clients access appropriate services.

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