Issue: Care coordinators play an increasingly important role in ensuring that people with Alzheimer’s disease or related dementias (ADRD) receive appropriate, well-coordinated, and cost-effective care. Care coordinators are often unprepared to meet the needs of this challenging population.

Methods: We analyzed care coordinator policies and practices in states participating in the US Centers for Medicare & Medicaid Services’ demonstration programs for dually eligible Medicare and Medicaid beneficiaries. Seven states were selected based on 4 criteria: capitated financing model; enrollment begun by January 2015; inclusion of older adults; and demonstrations expected to continue beyond January 2016. We interviewed 24 key informants (KIs) including state health policy and managed care plan experts.

Findings: Most state contracts had some specifications regarding care coordination practice requirements in the duals demonstrations. Several KIs noted that there were insufficient numbers of qualified personnel to meet the needs of duals demonstration members. Accordingly, states tended to opt for more flexibility rather than being too prescriptive in care coordination workforce requirements.

Discussion: There are promising practices within existing workforce resources and dementia-capable training for care coordinators. Demonstrations will benefit from efforts to evaluate outcomes of policies impacting people with ADRD and their caregivers.

Key Words: dementia-capable workforce