

**DHHS Division of Disability and Aging, State Unit on Aging  
Alzheimer's Disease and Other Dementia Advisory Council Meeting  
Friday, February 20, 2026  
10AM – 12PM**

**Meeting Link for Council Members and Members of the Public to Attend:**  
<https://sonvideo.webex.com/sonvideo/j.php?MTID=mfaee3499a1d877c819cec886081b9c70>

**In-Person Meeting Location\*:**  
301 Centennial Mall South, Conference Room 4M, Lincoln, NE 68509  
\*All Guests Must Check in at the 3<sup>rd</sup> Floor Reception Desk

## **AGENDA**

### **Welcome – Tracy Lichti, Chair**

### **Roll Call and Introductions**

Roll will be called; Council members and staff will introduce themselves.

### **Notice of Public Meeting**

This meeting is being held in compliance with the Nebraska Open Meetings Act.

### **Approval of Minutes**

Council members will vote to approve the minutes of the January 16, 2026, meeting.

### **Public Comment**

Members of the public are provided time speak.

### **Legislative Update**

Tracy Lichti provided testimony in support of LB845 at the public hearing held on January 23. LB845 proposes to combine the Alzheimer's Disease and Other Dementia Advisory Council with the State Unit on Aging Advisory Committee.

### **Subcommittee Reports**

Subcommittee leads will report on the work that continues with their subcommittees.

Discuss additional State Plan recommendations for the 2026 Annual Update Report.

### **Meeting Schedule for 2026**

The June 19, 2026, meeting date will need to be changed as that is Juneteenth, a federal holiday.

### **Announcements**

The next meeting will be in person at the Jack J. Huck Continuing Education Center on Friday, March 20, 2026.

### **Adjourn**

**DHHS Division of Developmental Disabilities and Aging  
State Unit on Aging  
Alzheimer's Disease and Other Dementia Advisory Council Meeting  
Friday, January 16, 2026**

Voting Members Present: Christopher Kelly, Tracy Lichti, Lisa Marks, Julie Masters, Kierstin Reed, Mary Ann Stallings, David Thompson

Voting Members Absent: John Croghan, Julie Kaminski, Corie Sass

Non-Voting Members Present: Josie Rodriguez, Odessa Schoneberg

Non-Voting Members Absent: Timothy Tesmer

Council Staff Present: Joni Dulaney

Division of Developmental Disabilities and Aging Staff Present: Tony Green, Director; Ben Stromberg, State Unit on Aging

This meeting was held virtually. A link was provided for Council members and members of the public to attend virtually. The meeting was called to order at 10:03 a.m. by Tracy Lichti, Council Chair. Roll was taken and Council members introduced themselves.

**Nebraska Open Meetings Act Announcement**

Tracy announced that Council meetings fall under the Nebraska Open Meetings Act. A copy of the Act is available on the Council webpage.

**Approval of Minutes**

A motion to approve the November 21, 2025, meeting minutes was made by Julie Masters and seconded by Mary Ann Stallings. No corrections were requested to the minutes.

A roll call vote was taken: Yes – 7; No – 0; Abstain – 0.

**Member Discussion on Proposed Legislation**

Legislative Bill (LB) 845 proposes to combine the Alzheimer's Disease and Other Dementia Advisory Council with the State Unit on Aging Advisory Committee. The name would change to the Aging, Alzheimer's, and Dementia Advisory Council. Member representation would change from 12 members each to a total of 15 with eight of those members representing the eight Area Agencies on Aging and the remaining seven representing individuals, families, and dementia-care professionals.

Tracy opened discussion on LB845. There was a question on why the two groups are being combined. Tony Green addressed this, stating that over the last couple of years, Governor Pillen has been looking at boards, commissions, and councils created in statute that are either duplicative or obsolete. There have been bills to consolidate or eliminate some of these groups in previous legislative sessions. The Alzheimer's Council and Aging Advisory Committee address

separate issues, but there is also overlap in the work. This proposed bill brings the groups together while allowing both to still maintain their voice and allow the state to better use resources, staff time, and funds most efficiently. He noted that the bill has been introduced but amendments can be made, including member representation. If there are changes that the Council would like to see, these can be addressed in an amendment.

There was a question about the Alzheimer's Council and Aging Advisory Committee reports. It was clarified that the Aging Advisory Committee does not write a report or plan; they advise the State Unit on Aging. Responsibilities for each group remain the same: the State Alzheimer's Plan will be written and submitted every four years with the next plan due to the legislature and governor by December 31, 2028, and Annual Update Reports will continue to be due by October 1; Aging Advisory will continue to advise the State Unit on Aging on the 4-Year State Plan development, the needs of the state's older population, and policies, rules, regulations, and standards developed by the department. Josie added that State Alzheimer's Plan findings and recommendations should be included in the State Unit on Aging State Plan.

Comments about combining the groups:

- It is a positive that more of the state would be represented with all the Area Agencies on Aging being at the table.
- This can work. It is time consuming for state staff to attend all the meetings. Simplifying the process would be helpful and well-intentioned.
- Questioning the small number of members.
- Having all the AAAs around the table would be helpful.
- Where in the mix are the caregivers and others who benefit from the work of the Council?
- Caregiving is part of the Older Americans Act and is a priority in the 2028-2031 State Plan. Bringing the groups together will bring a broader voice around Alzheimer's and dementia and the needs of caregivers.

Questions were asked about how an amendment to the bill would be made. Tony stated he heard from a senator's office who was asked by constituents about expanding the representation by two additional people. DHHS would not object to that. The process is that someone would contact a senator on the DHHS Committee to request an amendment. The senator would draft the amendment to be attached to the bill. There would then be a vote on whether to adopt the amendment during floor debate.

A chart was shared on screen that compared the current and proposed member representation. The Council discussed each role and commented on any changes. There were concerns that some roles were combined and others eliminated. Suggestions were made regarding which roles should not be eliminated, which should be re-worded for specificity and/or to be more inclusive of the aging population, which roles should remain as-is, and which

could be combined. It was noted that current representatives in roles proposed for elimination could continue to contribute through subcommittees so that expertise is not lost.

After lengthy discussion, a suggestion for member representation was submitted, prompting further discussion and suggestions. The following member representation was agreed upon:

- an individual living with Alzheimer's disease or another dementia or a family member or care partner of such individual with current or past experience
- an individual who represents nursing homes
- an individual who represents assisted living communities
- an individual who represents providers of non-medical home and community-based services, to include home care, respite, adult day
- a medical professional with experience diagnosing or treating Alzheimer's disease or other dementia
- an individual who conducts research regarding aging and dementia-related issues
- an individual who is a state representative of a nationwide organization that advocates on behalf of older adults and/or those individuals living with Alzheimer's disease or other dementia
- one representative from each of the eight planning-and-service areas as designated in the Nebraska Community Aging Services Act (8 total members)
- an individual at large representing those who are aging in Nebraska
- an individual or an advocate with experience or expertise with aging and special populations

This would bring the total number of members to 17.

Tony said he would take these member recommendations to Senator Hardin, Chair of the DHHS Committee, before the public hearing so senators will know this is coming as an amendment.

Tracy also noted that LB913 would create a Dementia Services Coordinator, much like the State Alzheimer's Plan recommendation for a Care Navigator pilot project; LB898 changes the number of in-person meetings required for public meetings to at least one in-person meeting per year; and LB1055 requires Adult Protective Services staff to be trained on working with individuals with Alzheimer's and dementia.

A motion was made by Kierstin Reed to submit the member representative recommendations as an amendment to LB845. Mary Ann seconded.

A roll call vote was taken: Yes – 7; No – 0; Abstain – 0.

A motion was made by Kierstin to have Tracy testify on behalf of the Council in support of LB845 with the amended language for 17 members. Mary Ann seconded.

A roll call vote was taken: Yes – 7; No – 0; Abstain – 0.

### **Subcommittee Reports**

Due to the time taken for discussion on the legislative bills introduced, this agenda item will be moved to the February 20, 2026, agenda.

### **Meeting Schedule for 2026**

The June 19, 2026, meeting date falls on Juneteenth and will need to be rescheduled as this is a federal holiday. Due to the time taken for discussion on legislative bills introduced, this agenda item will be moved to the February 20, 2026, agenda.

### **Announcements**

The next meeting is February 20, 2026, and will be held virtually. The meeting link will be sent.

### **Adjourn**

The meeting adjourned at 12:02 p.m.

DRAFT

Priority	Recommendations	Category					
		Increase Support for Caregivers	Provide Care Navigation Through Area Agencies on Aging	Increase Availability and Quality of Facility-Based Care	Increase Access for Rural and Underserved Communities	Increase Public Awareness and Education	Build the Dementia Care Workforce
2025	Explore feasibility of implementing Trualta or other on-line caregiver support platform and make access free for all Nebraska residents. The fiscal cost for this recommendation is \$132,000 to \$180,000 annually.	X			X	X	
	Seek one time grant funding for long-term care and assisted living communities to establish adult day care programs. In rural areas consider including senior centers.	X		X	X		
	Develop a respite admission program for long-term care communities to enable quick admissions for emergent respite stays.	X		X	X	X	
2025	Create a two-year dementia care navigator pilot project within the Eastern Nebraska Office on Aging that serves both urban and rural caregivers/care partners. The projected fiscal expenditure for this recommendation is \$100,000 per year.	X	X		X		
2025	Engage with local hospitals, nonprofits, and support groups to create a comprehensive directory of services available for individuals with dementia.	X	X		X	X	
	Educate the aging network on available programs and benefits such as the Caregiver Tax Credit. Have speakers such as AARP present to the AAAs & ADRCs	X	X			X	
2025	The state should strongly consider increasing the reimbursement rate for memory care, which would increase availability for AD/DRD individuals as identified in the "Rate Study for AD Waiver, TBI Waiver and PAS Services (updated September 2023).			X	X		
	Analyze previous efforts to develop centralized system for locating available beds in facilities across the state to simplify referral system.			X			
	Investigate how Medicaid waiver home and community-based services can include all areas of need. This could include adult day service level of engagement within the home.	X		X	X		

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	Analyze previous efforts to have long term care facilities and hospitals develop centralized system for locating available beds in facilities across the state to simplify referral system.			X	X		
	Explore incentives to increase the workforce in home care and home health workers in rural areas.				X		X
2025	Implement targeted outreach by churches, doctor's offices, etc. to raise awareness about dementia within rural and ethnic communities.				X	X	X
	Create one-time grant opportunities for healthcare staff members to learn a new language or pursue cultural studies focused on the populations they serve.			X	X	X	X
	Develop program for building partnerships between individual facilities and the communities where they are located.	X			X		
2025	Establish partnerships with public health departments and the AAAs to develop awareness and education campaigns focused on brain health for individuals of all ages, with a specific focus on individuals in Nebraska's underserved communities.		X		X	X	
	Create brain health curriculum that can be distributed to public school districts and taught to K-12 students.					X	X
	Explore establishing a state-wide voluntary tracking system for dementia overseen by DHHS or a contracted entity such as UNL's Bureau of Sociological Research.	X			X	X	
	Seek to increase research and federal funding to improve the life's of Nebraskans living with dementia.	X			X	X	
	Consider reintroducing the dementia registry legislation introduced in 106th Congress, Second Session 2020 9 (LB 1138).	X			X	X	
	Investigate and seek to improve how Nebraska policy makers and state medical director evaluate and adopt policies to assist individuals diagnosed with Alzheimer's disease or other dementia and their families.	X			X	X	

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	Work with Nebraska Vocational Rehab to increase the workforce in long term care facilities by using current and future national grant programs.						X
	Fund internship and apprenticeship programs that offer students hands-on experience in dementia care settings.					X	X
	Ensure that the Health Sciences Career Cluster of the Nebraska State Board of Education and other curricula have current content devoted to dementia.					X	X
	Work with the Nebraska Association of Teachers of Science to develop dementia-specific conference sessions for teachers.					X	X
	Leverage current programs with Nebraska Hospital Association and Nebraska Health Care Association to provide education and experiences to students starting as young as third grade.			X			X
	Work with Nebraska Vocational Rehab to increase the workforce in long term care facilities by using current and future national grant programs, such as CPAP.					X	X