



**HEARTLAND**

COGNITIVE CARE COLLECTIVE

# Welcome to the Inaugural Heartland Cognitive Care Collective!

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**HEARTLAND**  
COGNITIVE CARE COLLECTIVE



The Inaugural HCCC Summit  
was supported with generous contributions by:





# Housekeeping

- 1.WiFi information
- 2.Beverages and snacks
- 3.Restrooms
- 4.Run of show

Heartland Cognitive Care Collective

Friday, October 3rd  
THE STATE HISTORICAL BUILDING OF IOWA

8:30 – 9:00

RECEPTION

9:00 - 9:05

CALL TO ORDER  
Liz Matney, Heartland Cognitive Care Collective  
Jessica Duncan, CDP, Alzheimer’s Association Iowa Chapter Program Dir.

9:05 - 9:10

WELCOME  
Dr. Yogi Shah, Broadlawns Medical Center and Alz. Assoc. IA Board Member

9:10 - 9:55

KEYNOTE: STATE OF THE SCIENCE, *DISEASE DETECTION*  
Dr. Jonathan Graff Radford, Mayo Institute, Alzheimer’s Disease Treatment Clinic

10:10 - 11:00

IDENTIFICATION & DIAGNOSIS  
Brian Kaskie, Professor, University of Iowa  
Dr. Fran Jackson, Physician and Informal Care Provider, Burlington  
Coletta Weeda, Informal Care Provider, Denison  
Eric Kallem, Assistant Fire Chief – Training, Clive Fire Department

11:00 – 11:50

EVIDENCE BASED PROGRAMS & SERVICES  
Jessica Duncan, CDP, Alzheimer’s Association Iowa Chapter Program Dir.  
Betsy Bellamy, Update on Pharmaceutical Trials for Alzheimer’s Disease  
Anne O’Rear, Dementia Community Care Specialist, GUIDE, Broadlawns  
Dr. Jimmy Reyes, PhD, DNP MiSalud IA, Cultural Perspectives of Referral

KEYNOTE

Dr. Jon Graff-Radford, Alzheimer’s Disease Treatment Clinic,  
Mayo Institute



Jonathan Graff Radford, M.D., is a neurologist at Mayo Clinic in Rochester MN, where he evaluates and treats patients with cognitive disorders, including dementia. As a professor of neurology, he studies normal aging, mild cognitive impairment, Alzheimer’s disease, and other neurodegenerative disorders. Dr. Graff Radford’s research has identified bio-markers that may be used to diagnose specific causes of dementia and improve clinical identification and referral . Dr. Graff-Radford has published more than 200 articles and chapters on Alzheimer’s disease and related dementias.

Heartland Cognitive Care Collective

Friday, October 3rd  
THE STATE HISTORICAL BUILDING OF IOWA

12:00

LUNCH (provided)

12:30 - 1:15

INAUGURAL HCCC ACHIEVEMENT AWARD  
Senator Charles E. Grassley

12:30 - 1:15

KEYNOTE: A BRIDGE BETWEEN PUBLIC AND POPULATION HEALTH  
Sarah Khasawinah, Ph.D., Washington, D.C.

1:15 - 2:00

POPULATION HEALTH & VALUE BASED CARE  
Terianne Reynolds, MPH Health Systems Director, Alzheimer’s Association  
Dr. Alison Lynch, President of the Iowa Medical Society  
Jill Villalobos, Vice President of Healthcare Services

2:15 – 3:00

POLICY ALTERNATVES  
Paige Yontz, State Advocacy Manager at AARP  
Jennifer Pollack, Director, Access Policy at Alzheimer’s Association  
Zachary Rhein, Iowa Department of Health and Human Services  
Robert Brownell, Alz. Assoc. IA Chapter Board Member, Informal Care Provider

3:00

ADJOURN  
Liz Matney, Iowa Heartland Cognitive Care Collective

KEYNOTE

Sarah Khasawinah, PhD Building Our Largest Dementia (BOLD)  
Infrastructure for Alzheimer’s Act of 2024



As a staff member for the U.S. Senate Special Committee on Aging, Sarah crafted legislative solutions to support and protect America’s aging population. Most notably, Sarah played a leading role in creating, negotiating, and working to pass the BOLD Infrastructure for Alzheimer’s Act of 20180— a landmark law establishing a transformative public health framework for Alzheimer’s disease and related dementias. Sarah led efforts to support its reauthorization in 2024, and most recently served as a senior advisor for the U.S. Senate Special Committee on Aging for Chairman Rick Scott.

A recent publication projected that the number of Americans living with Alzheimer's and Related Dementias will increase from 6.9 million in 2024 to...

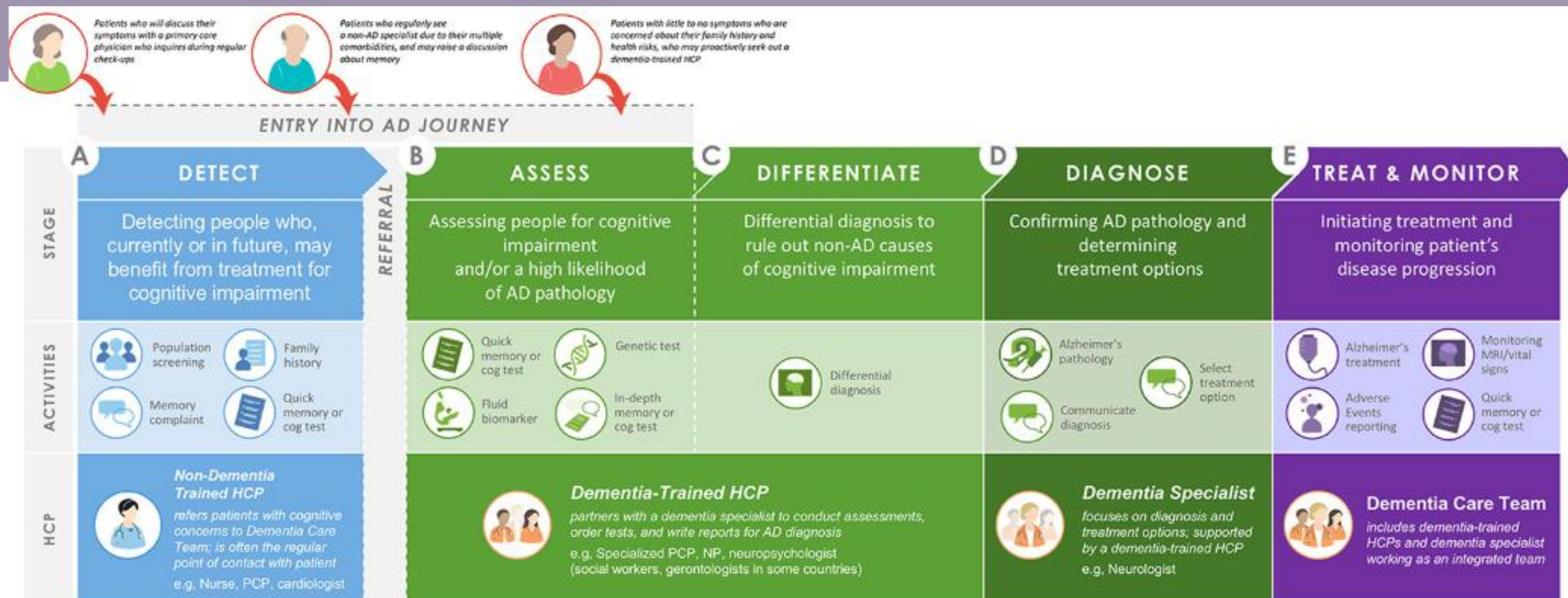
A. 8 million in 2050

B. 10 million in 2050

C. 14 million in 2050



# Progression and Treatment Continuum





**Dr. Yogi Shah**

**Broadlawns Medical Center**







**Dr. Jonathan Graff Radford**  
**Mayo Institute**



Which of the following is most potent modifiable risk factor (behavior change will reduce risk) for ADRD...

A. Depression

B. Untreated hearing loss

C. Obesity

D. Unregulated high blood pressure and cholesterol



# Identification & Diagnosis

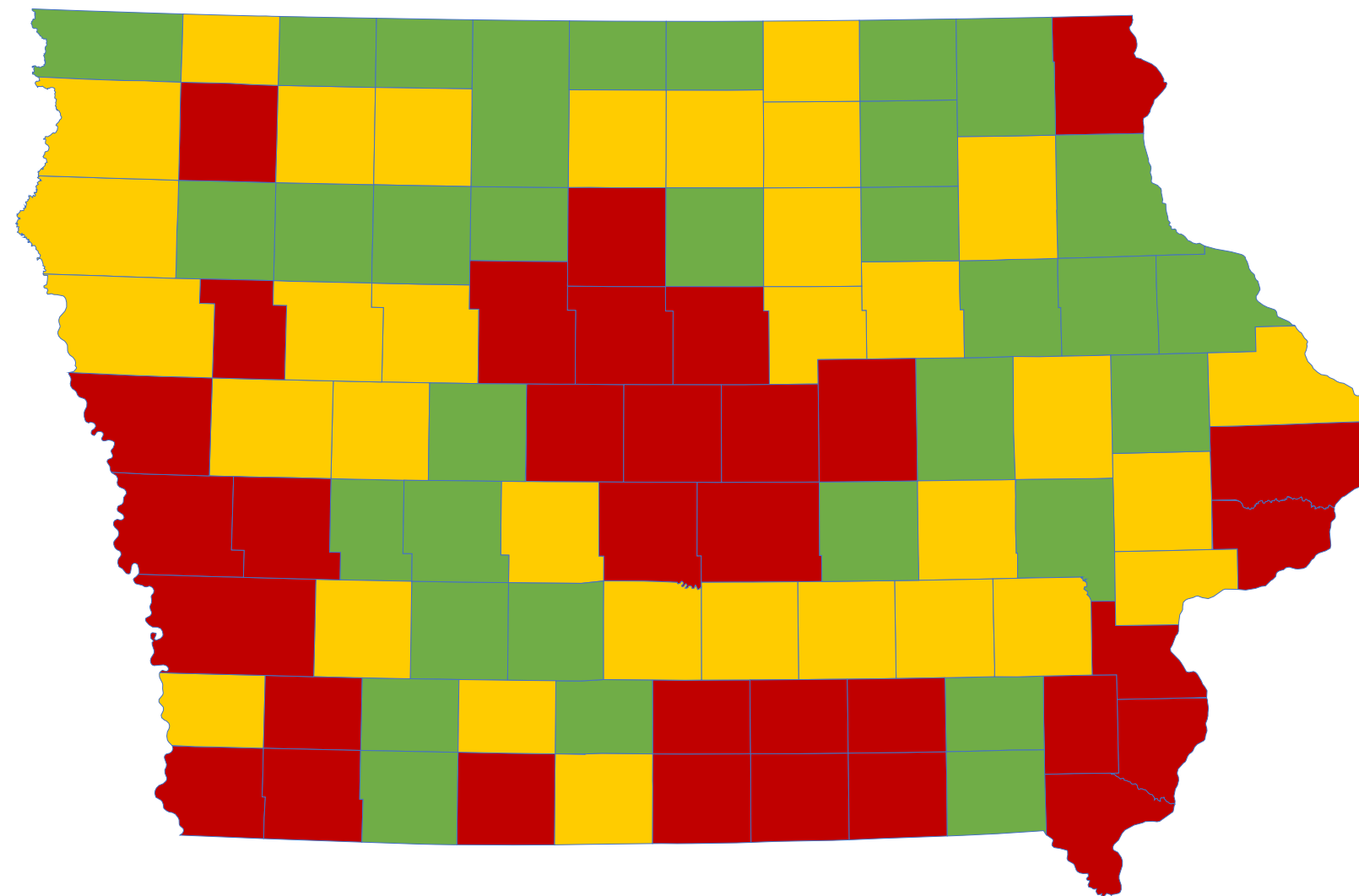


*Dr. Brian  
Kaskie  
University of  
Iowa*



# ADRD Prevalence vs ADRD Mortality Rate from Autopsy studies

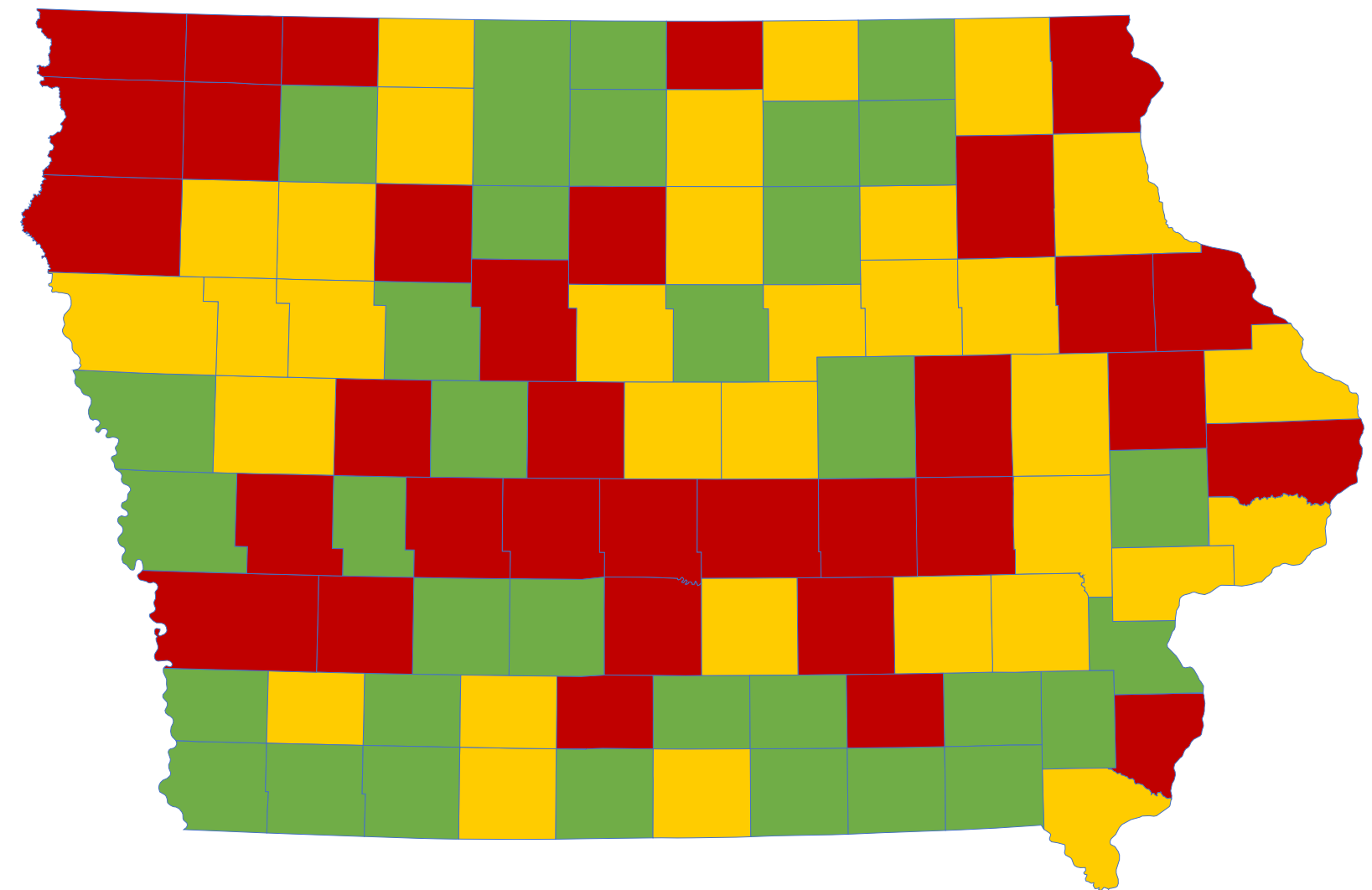
ADRD Prevalence 65+



- Low: 9.16 – 11.48
- Medium: 11.49 – 12.58
- High: 12.59 – 37.89


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ADRD Mortality Rate 65+



- Low: 0 – 0.89
- Medium: 0.89 – 1.70
- High: 1.70 – 4.63

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# Why?

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**RQ1:** Do county-level differences in provider availability (geriatricians, neurologists, psychiatrists) help explain the variation in diagnosis rates?

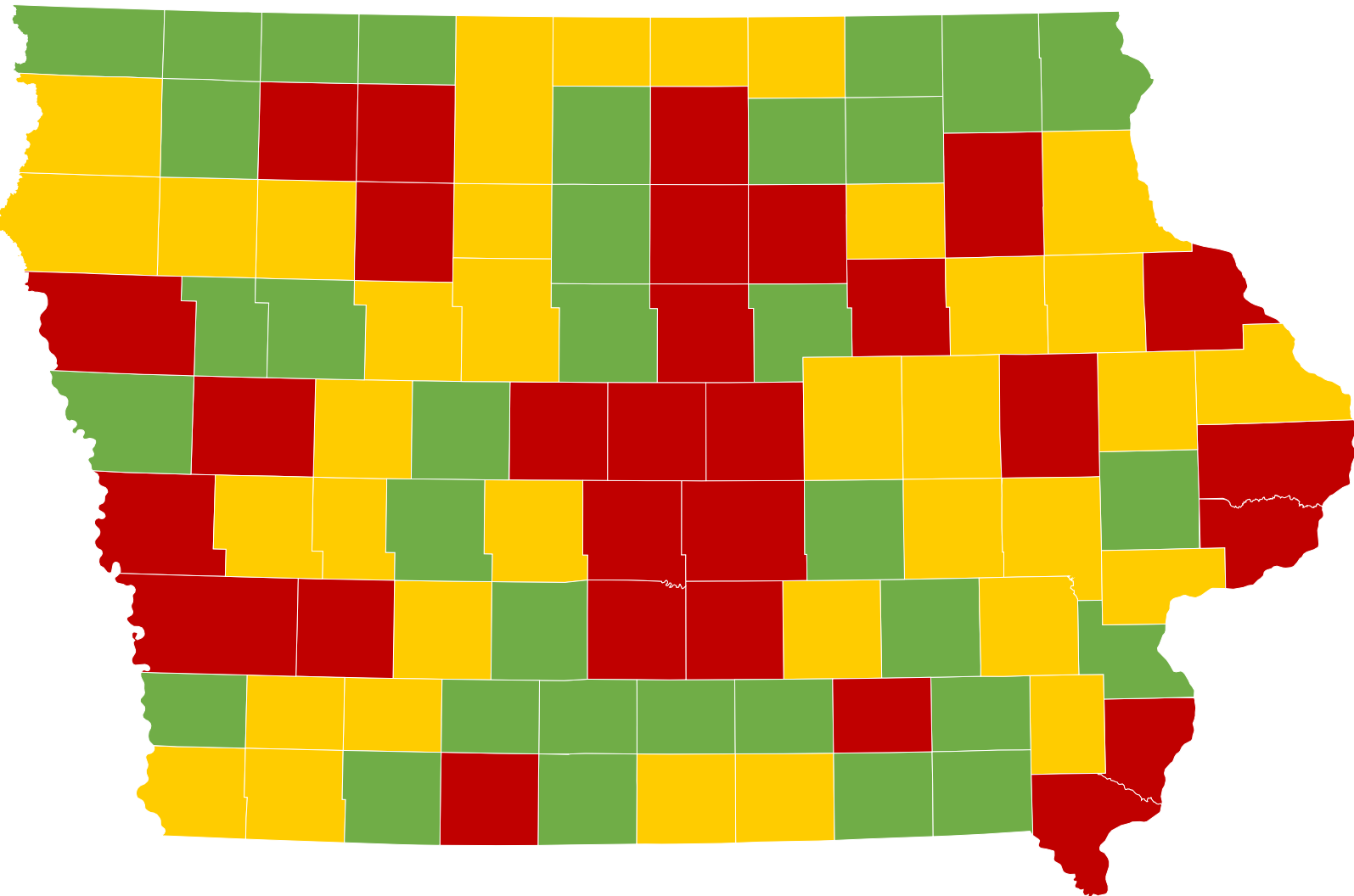
**RQ2:** Are county-level differences in facilities (memory care, adult day care, assisted living) associated with variation in diagnosis rates?

**RQ3:** How does Medicare managed care penetration relate to observed ADRD diagnosis rates?



# Highly likely ADRD vs providers

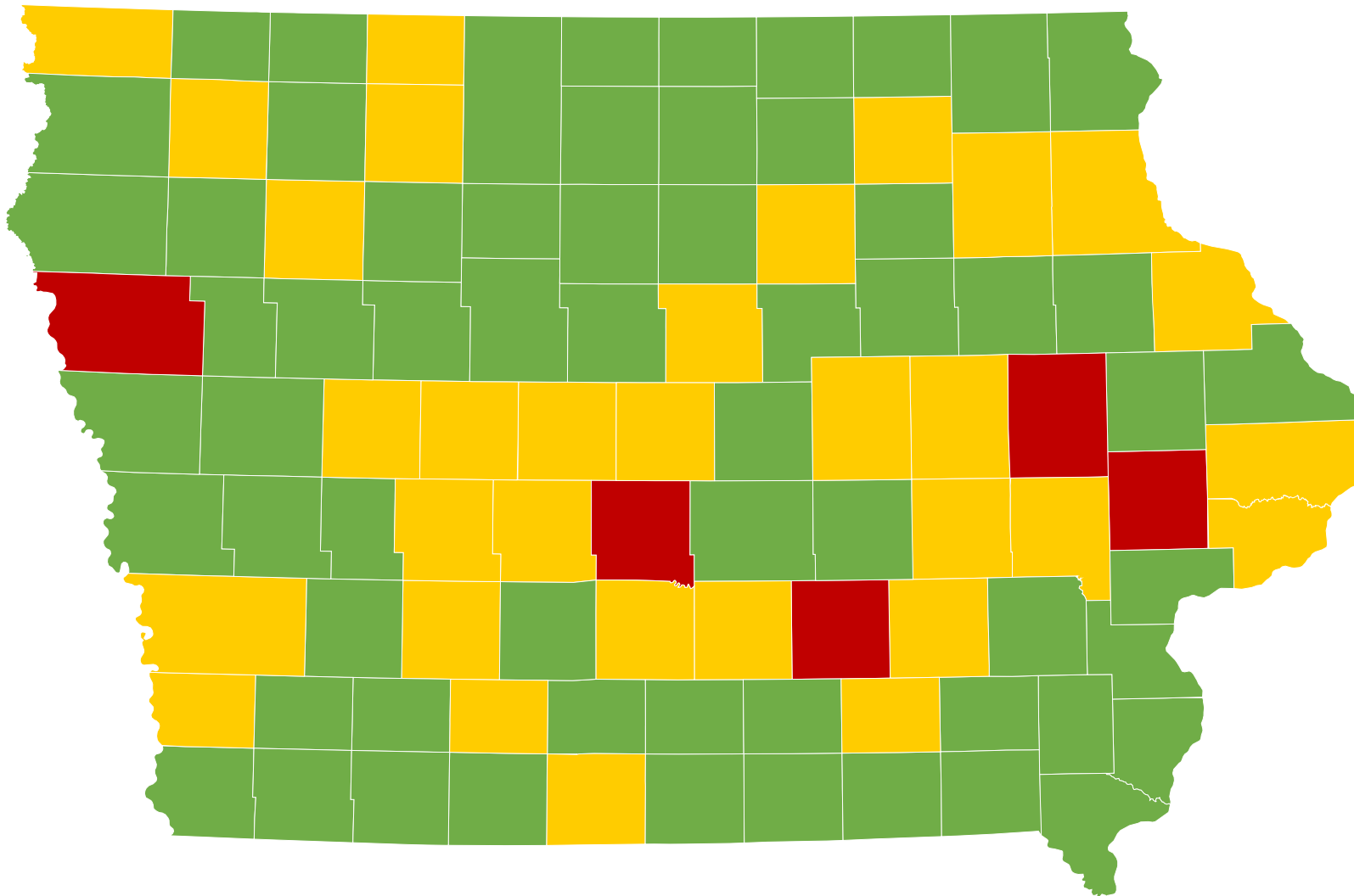
Highly likely ADRD



- Low: 0.0 – 3.6
- Medium: 3.7 – 6.0
- High: 6.1 – 8.3

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ADRD Providers

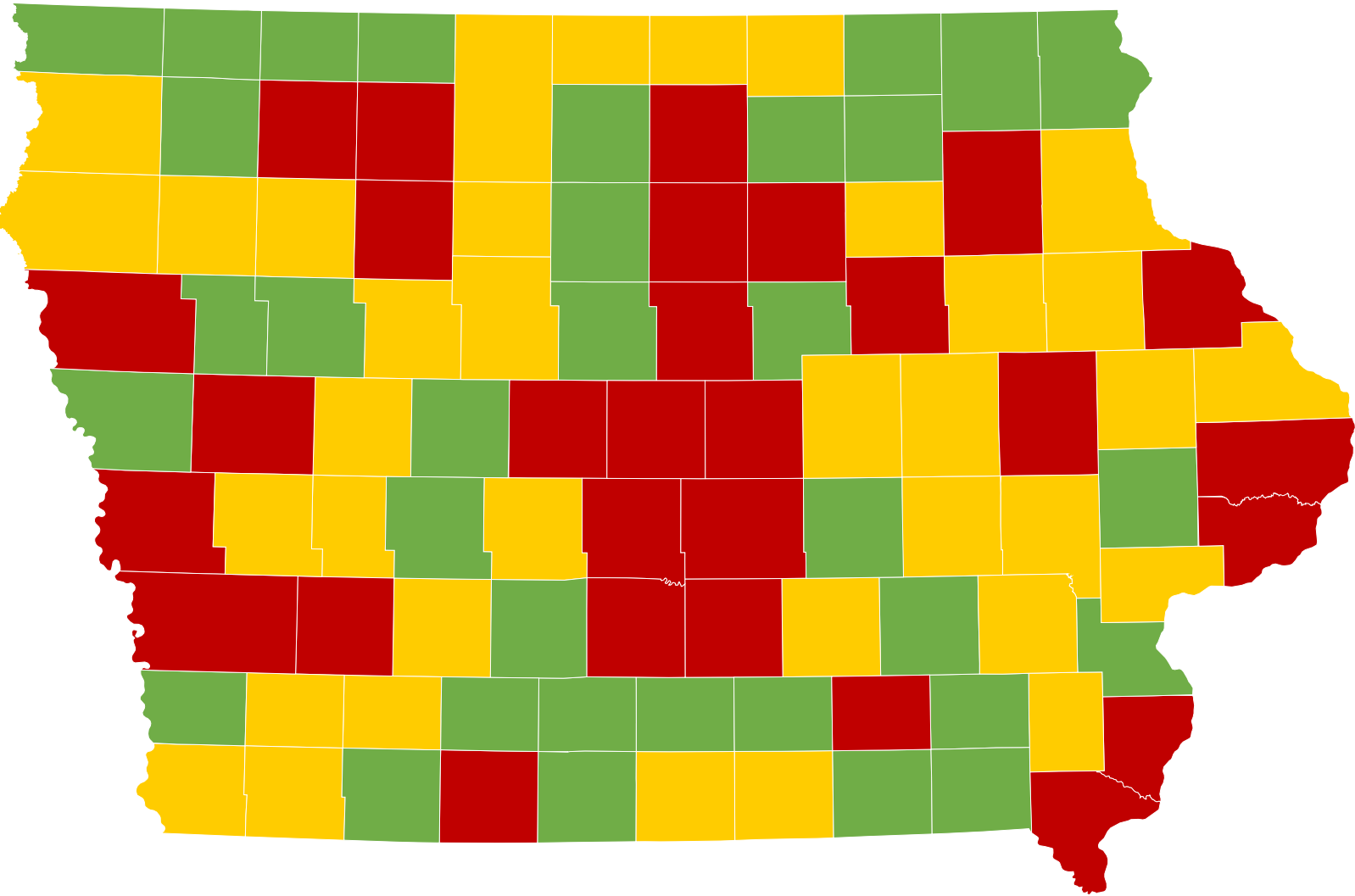


- Low: 0
- Medium: 1 – 2
- High:  $\geq 3$  doctors

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# Highly likely ADRD vs Supply side resources

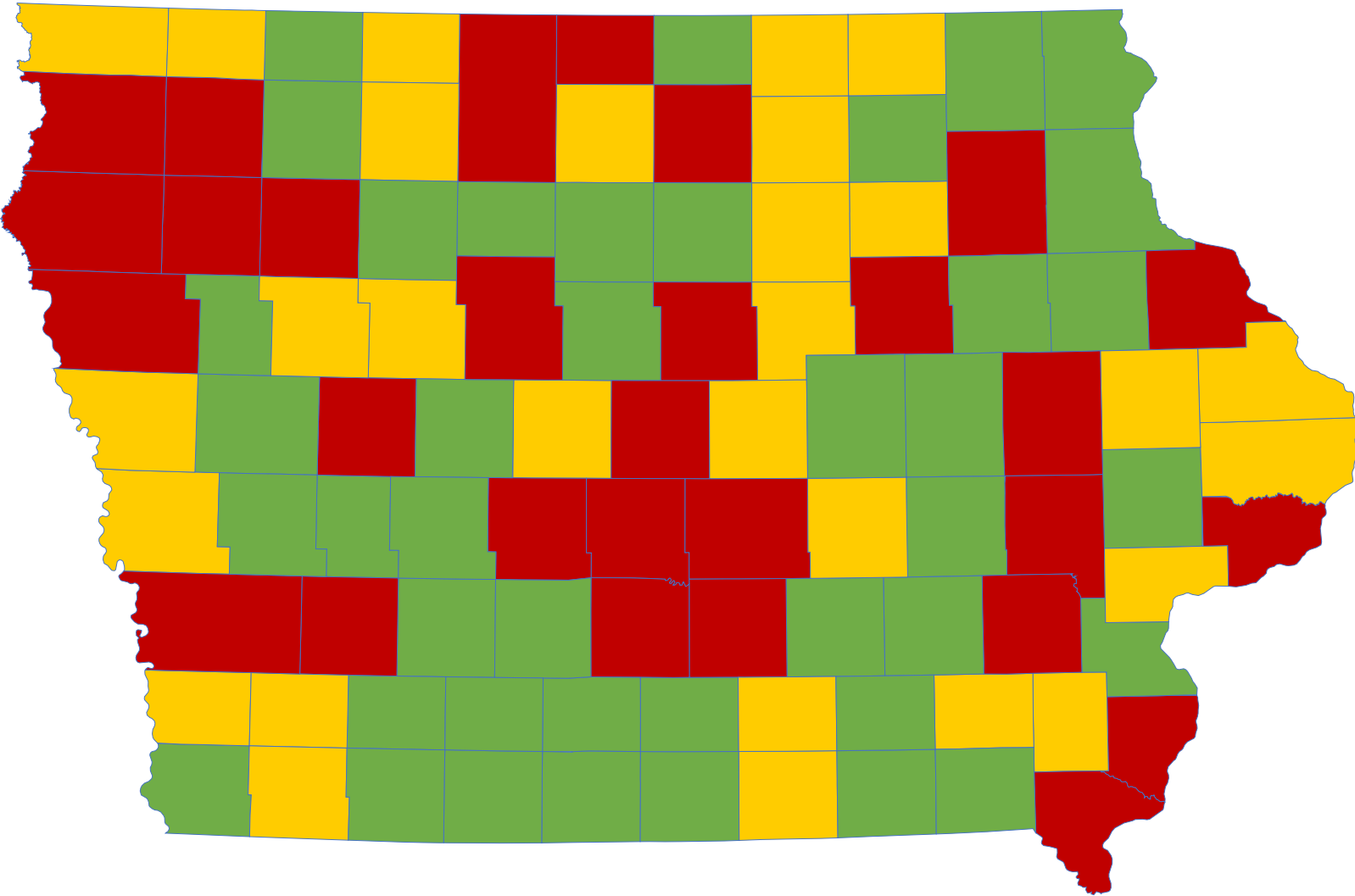
Highly likely ADRD



- Low: 0.0 – 3.6
- Medium: 3.7 – 6.0
- High: 6.1 – 8.3

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ADRD Supply side resources

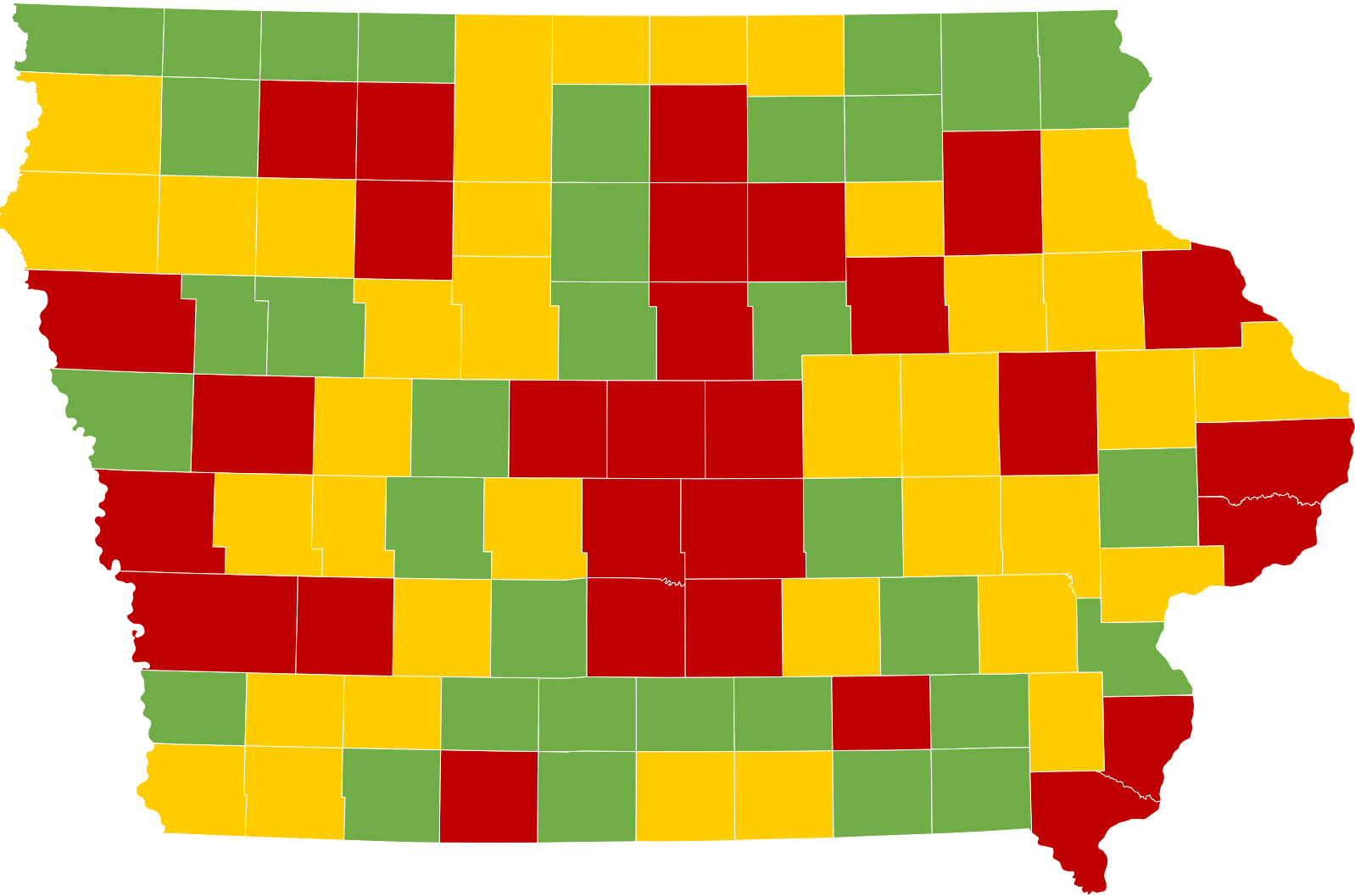


- Low: 2 – 6
- Medium: 6 – 10
- High: 10 – 73

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# Highly likely ADRD vs MA Penetration Rate

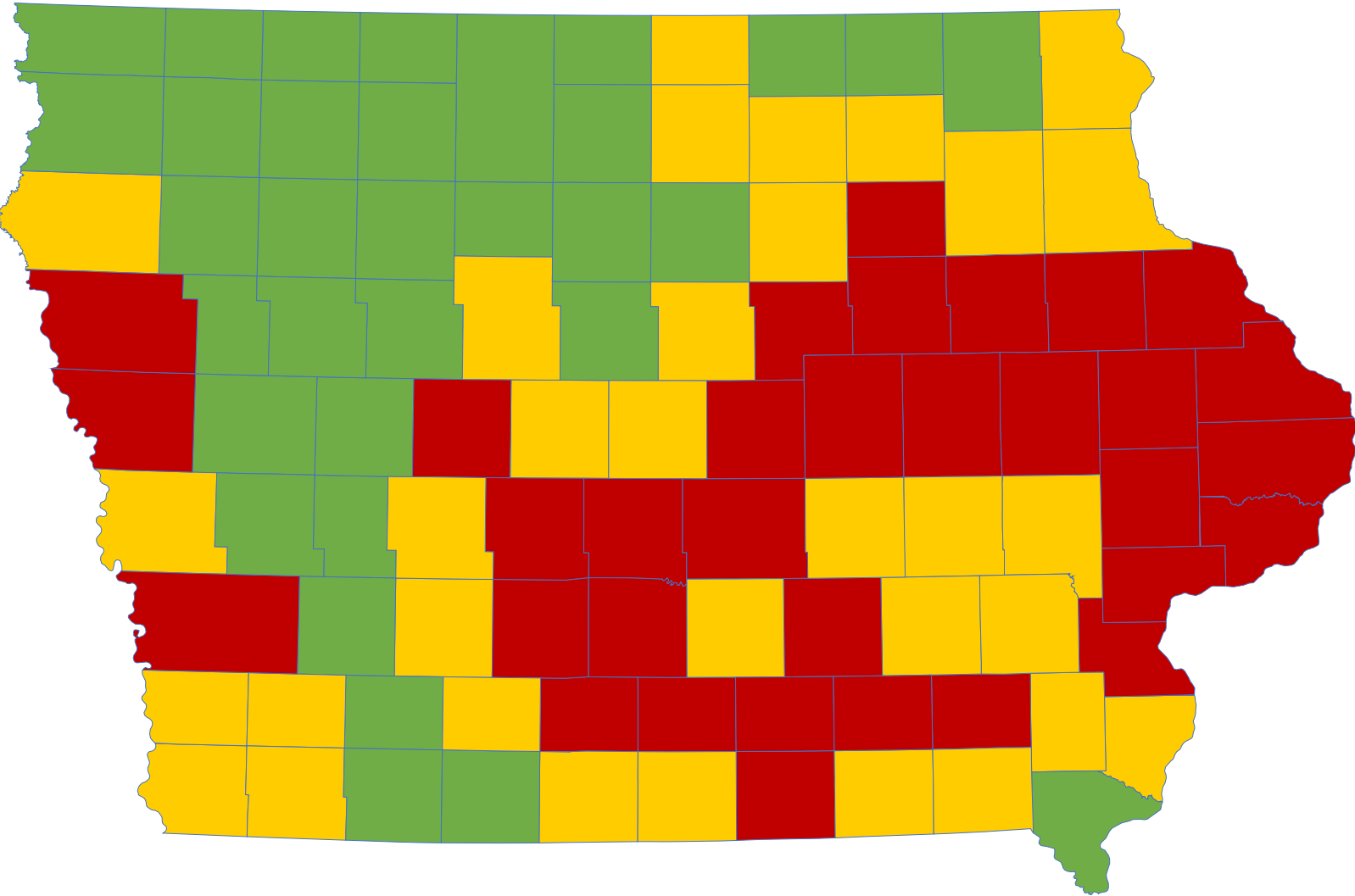
Highly likely ADRD



- Low: 0.0 – 3.6
- Medium: 3.7 – 6.0
- High: 6.1 – 8.3

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MA Penetration Rate



- Low: 15.27 – 25.04
- Medium: 25.05 – 34.93
- High: 34.94 – 59.36

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# Identification & Diagnosis



NARRATIVE MATTERS

## What Are We Going To Do With Dad?

*A geriatrician stands by during his father's downward spiral into old age, disability, and dementia.*

BY JERALD WINAKUR

PREFACE: America is getting older, and older Americans are living longer. What has not changed is the dysfunction and illness that usually accompany aging. Geriatrician Jerald Winakur looks at the "vast inland sea of elders" that is building and wonders where the doctors will come from to

MY FATHER IS EIGHTY-SIX years old. He was never a big man, except perhaps to me when I was his little boy. At most he was five feet, eight inches tall and weighed 160 pounds. Today he weighs barely 120. Maybe he is five feet two. He teeters on spindly legs, a parched blade of grass in the wind, refusing the walker his doctor recommends or the arm

*Dr. Fran Jackson*  
*West Burlington*

# Identification & Diagnosis



*Coletta Weeda  
Dennison*

## The Mother Who Changed: A Story of Dementia

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By Katie Engelhart  
May 9, 2023

**Listen to This Article**  
Audio Recording by Audm

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In October 2017, Diane Norelius stopped answering the phone. Her two daughters called and called. They called Diane's boyfriend, Denzil Nelson, too. Whenever Denzil picked up, he would only say, "She doesn't want to talk to you." But usually, he didn't pick up. The



# Identification & Diagnosis



## The Elder Abuse Guide for Law Enforcement

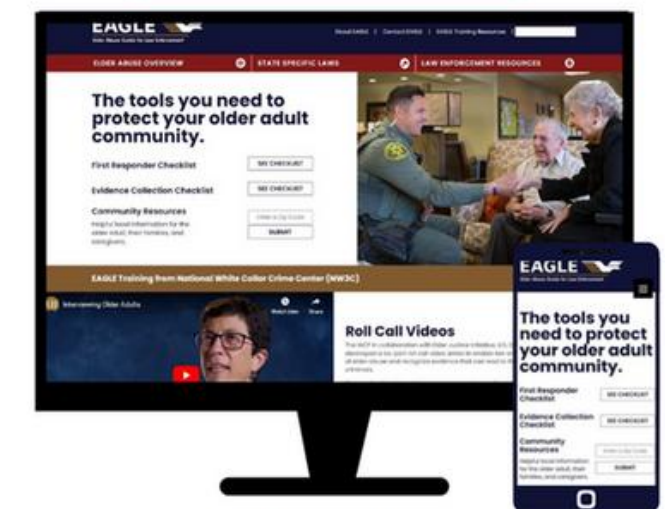


EAGLE is a FREE tool that includes resources like:

- **State Specific Laws** – Your state's penal codes & statutes on elder abuse.
- **First Responder's Checklist** – Document the signs of abuse, fillable online and as a pdf. No data is saved.
- **Evidence Collection Checklist** – Keep evidence organized. Created with prosecutor insight. Great for MDTs.
- **Community Resource Referral Tool** – Enter a zip code for local information on resources.
- **Training Opportunities** – IADLEST certified & POST available.
- **Roll Call Videos** – Based off real-life cases of elder abuse.
- **Elder Abuse Overview** – Covers seven types of abuse, questions to consider & actions to take.

Contact: [eaglehelp@usc.edu](mailto:eaglehelp@usc.edu)

Visit: [eagle.usc.edu](http://eagle.usc.edu)



Funded by the Department of Justice.  
Developed by Elder Abuse Experts at the University of Southern California.  
Cross-tested by Law Enforcement Departments Across the U.S.

*Eric Kallem  
Clive*



Between 2000 and 2022, deaths from Alzheimers increased by \_\_%.

A. 50

B. 142

C. 30

D. 80

# Evidence Based Programs & Services



 **ALZHEIMER'S<sup>®</sup>  
ASSOCIATION**

*Jessica Duncan*

*Alzheimer's Association*

# Evidence Based Programs & Services



## Memory Center

The GUIDE Model

Iowa Geriatric Workforce  
Enhancement Program  
(Iowa-GWEP)

## KEYS Program



## KEYS Program: Unlocking Brain Fitness

As part of our ongoing efforts, Broadlawns is also proud to promote the KEYS to Dementia Prevention program. This 10-week course is designed to empower participants to reduce their risk of cognitive impairment.

### What the KEYS Program Offers:

- Weekly sessions covering important topics related to modifiable risk factors for dementia.
- Individual confidential consultations with dietitians, pharmacists, wellness coaches, and fitness professionals.
- Goal-setting sessions in a supportive environment with group sharing.

Interested in the Keys Program or looking for a location near you? Learn more about KEYS [here](#).

## Contact Us

📍 Memory Center, Main Campus  
Medical Plaza, First Floor  
1761 Hickman Road  
Des Moines IA, 50314  
📞 (515) 282-5700  
🕒 Monday-Friday: 8 a.m. - 4:30 p.m.

*Elizabeth Bellamy*  
*Des Moines*



# Evidence Based Programs & Services



## Benefits of GUIDE – Comprehensive Services

- ✓ Comprehensive Assessment & Home Visit
- ✓ Care Planning
- ✓ Caregiver Skills Training
- ✓ Respite Funding
- ✓ Access to 24/7 Support
- ✓ Screening for Health-Related Social Needs

*Anne O'Rear*

*Broadlawns Medical Center*

# Evidence Based Programs & Services



IPR News

## UNI 'dementia house' helps visitors deepen understanding

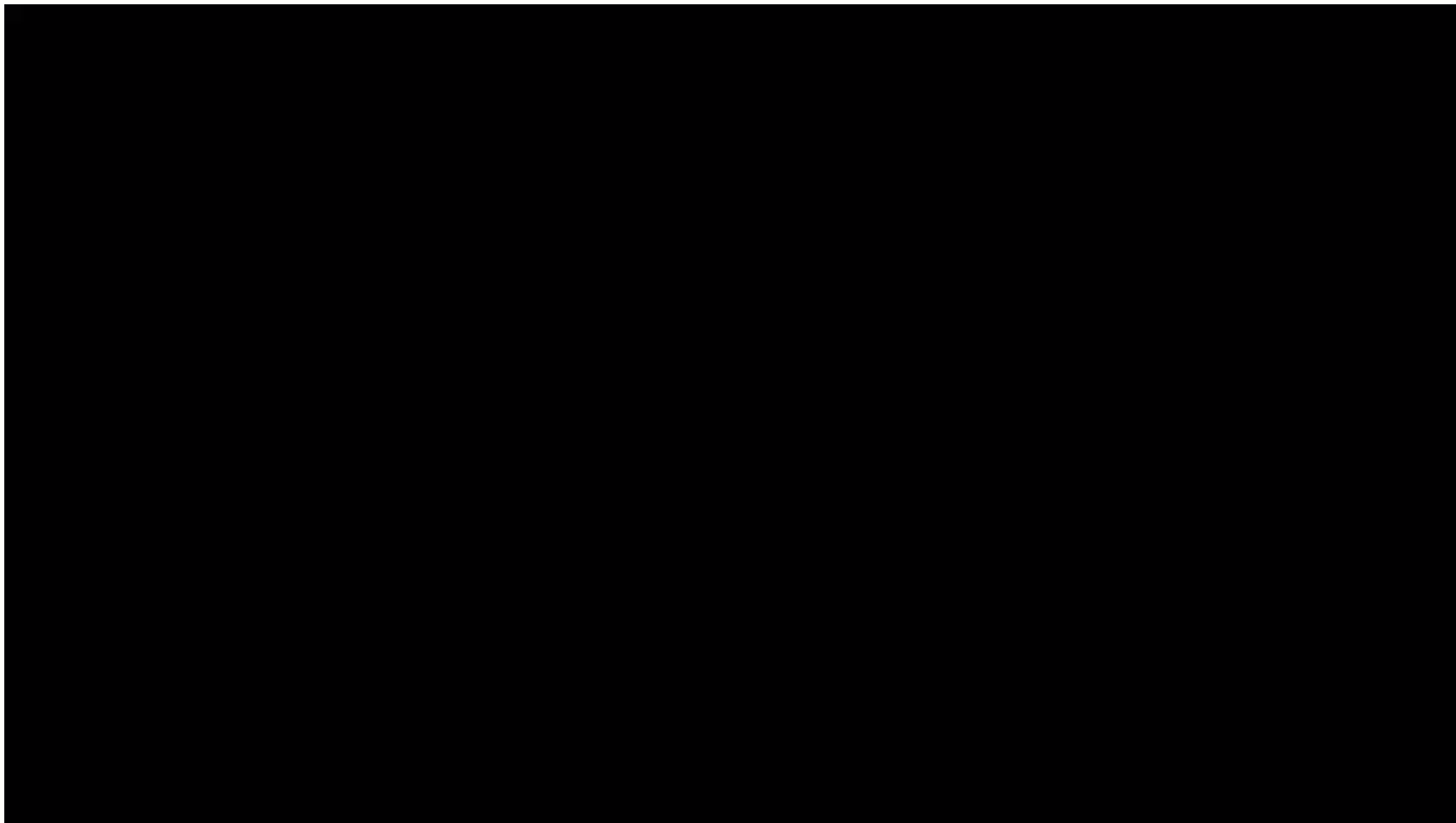
Iowa Public Radio | By [Josie Fischels](#), [Dani Gehr](#), [Charity Nebbe](#)  
Published April 17, 2023 at 3:15 PM CDT



*Dr. Jimmy Reyes*

*University of Northern Iowa*

# Inaugural Heartland Cognitive Care Collective Achievement Award







**Sarah Khasawinah, P.h.D**

**Policy Expert**



Microsoft Edge  
PDF Document



# Population Health & Value Based Care



*Terrianne Reynolds*  
*Alzheimer's Association*

## 10 HEALTHY HABITS FOR YOUR BRAIN

TAKE CHARGE OF YOUR BRAIN HEALTH. THESE HEALTHY HABITS CAN LOWER THE RISK OF DEVELOPING COGNITIVE DECLINE AND POSSIBLY DEMENTIA. THIS IS TRUE EVEN FOR PEOPLE WITH A HISTORY OF DEMENTIA IN THEIR FAMILIES.

Follow as many of these tips as possible to achieve the most benefits for your brain and body. It's never too late or too early. Start now!

### Challenge your mind

Be curious. Put your brain to work and do something that is new or hard for you. Learn a new skill. Try something artistic. Challenging your mind may have short- and long-term benefits for your brain.

### Stay in school

Education reduces your risk of cognitive decline and dementia. Encourage youth to stay in school and pursue the highest level of training possible. Continue your own education by taking a class at a local library, college or online.

### Control your blood pressure

Medications can help lower high blood pressure. And healthy habits like eating right and physical activity can help too. Work with a health care provider to control your blood pressure.

### Eat right

Eating healthier foods can help reduce your risk of cognitive decline. This includes more vegetables and leaner meats/proteins, along with foods that are less processed and lower in fat. Choose healthier meals and snacks that you enjoy and are available to you.

### Maintain a healthy weight

Talk to your health care provider about the weight that is healthy for you. Other healthy habits on this list — eating right, physical activity and sleep — can help with maintaining a healthy weight.

### Sleep well

Good quality sleep is important for brain health. Stay off screens before bed and make your sleep space as comfortable as possible. Do all you can to minimize disruptions. If you have any sleep-related problems, such as sleep apnea, talk to a health care provider.

### Get moving

Engage in regular exercise. This includes activities that raise your heart rate and increase blood flow to the brain and body. Find ways to build more movement into your day — walking, dancing, gardening — whatever works for you!

### Be smoke-free

Quitting smoking can lower the risk of cognitive decline back to levels similar to those who have not smoked. It's never too late to stop.

### Protect your head

Help prevent an injury to your head. Wear a helmet for activities like biking, and wear a seatbelt. Protect yourself while playing sports. Do what you can to prevent falls, especially for older adults.

### Manage diabetes

Type 2 diabetes can be prevented or controlled by healthier eating, increasing physical activity and medication, if necessary.

Learn more at [alz.org/healthyhabits](https://alz.org/healthyhabits).

# Population Health & Value Based Care



*Medicine Iowa* caught up with Lynch to discuss her new advocacy role.

You are the president-elect of the Iowa Medical Society and will become president in 2025. What are the IMS priorities for the year ahead?

A big priority that we have right now is the physician workforce because there are not enough physicians in Iowa. So, we're working with many different entities to try to address that. Our vision is to make Iowa the premier destination for physicians to live, work, and serve their communities.

We also want people to stay in Iowa and continue practicing. During COVID, a lot of people retired early, so we want to make it easier for a physician who's retired to come back and work part-time, if they want to. If we have retired providers who would be willing to work one day a week, we should make it easy for them to do that. We need their help.

Also, I think we can find more ways to demonstrate our value to the whole state of Iowa. It would be really good for us to continue being involved in efforts to serve other counties really well.

*Dr. Allison Lynch*

*University of Iowa Hospitals & Clinics*



# Population Health & Value Based Care



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Cognitive Impairment: Dementia and Alzheimer's

### Cognitive Impairment: Assessment and Intervention of Dementia and Alzheimer's

Dementia is a term for a collection of symptoms including decreased intellectual functioning that interferes with normal life functions and is usually used to describe people who have two or more major life functions impaired or lost such as memory, language, perception, judgment, or reasoning. Members diagnosed with Dementia may lose emotional and behavioral control, develop personality changes, and have problem-solving abilities reduced or lost. Dementia may lead to depression, aggression, confusion, frustration, anxiety, a lack of inhibition and disorientation.

**Symptoms of Dementia**

*Symptoms vary depending on the cause, but common signs and symptoms include:*

- Cognitive Symptoms: Memory loss
- Difficulty communicating or finding words
- Difficulty with complex tasks
- Difficulty with planning and organizing
- Difficulty with coordination and motor functions
- Problems with disorientation, such as getting lost

*Jill Villalobos*  
*Molina of Iowa*



Almost \_\_\_\_ individuals diagnosed with ADRD are women.

A. Two thirds

B. One quarter


C. Half

D. One third

# Policy Alternatives



*Paige Yontz*  
*AARP Iowa*



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BRAIN HEALTH RESOURCE CENTER

## Dementia Resource Guide

For individuals and families

By AARP  
Published October 25, 2023 • [EN ESPAÑOL](#)



**From Policy to Practice:  
Supporting Brain Health and  
Caregiving at the State Level**

July 2025



# Policy Alternatives

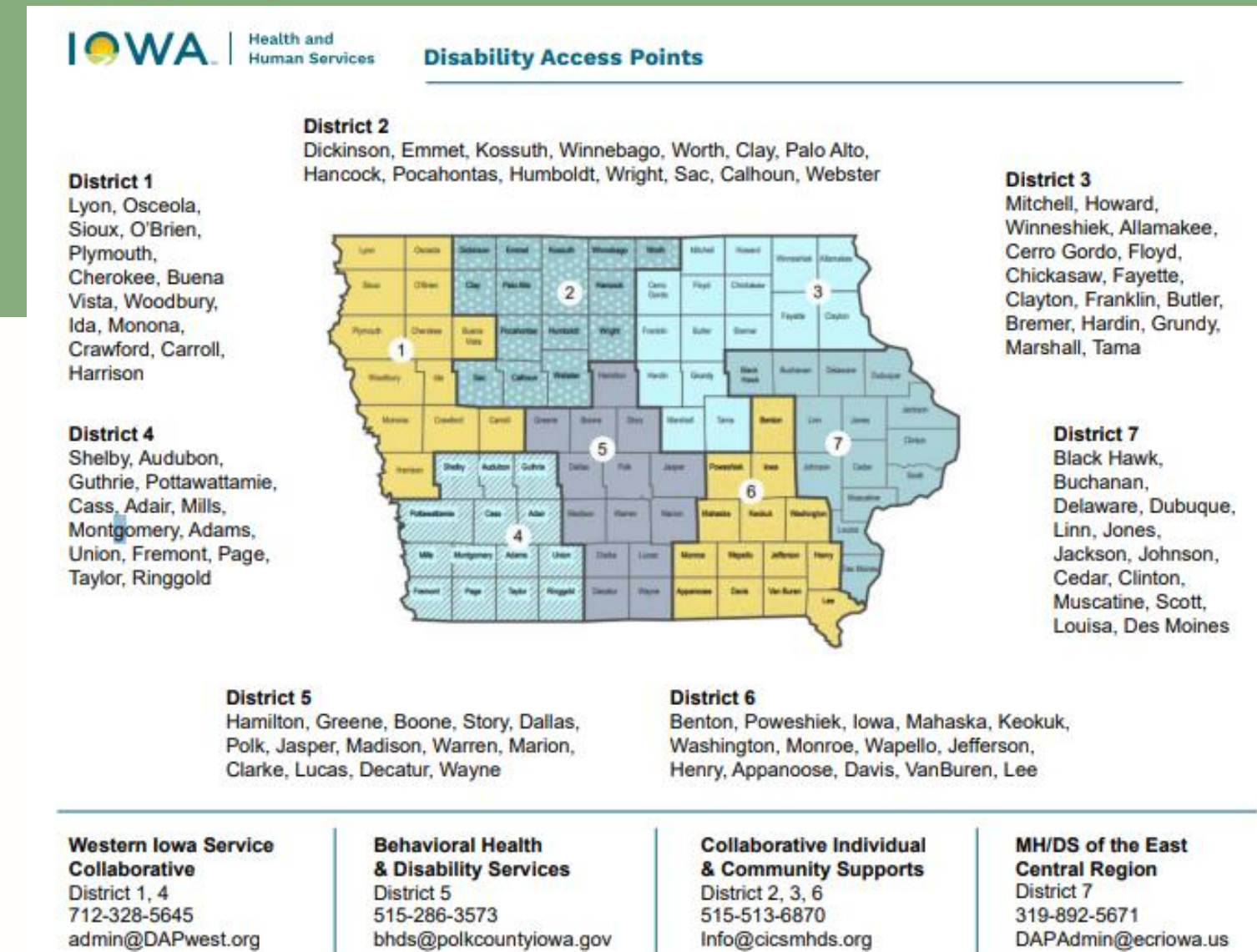


*Terrianne Reynolds*  
*Alzheimer's Association*





# Policy Alternatives



*Director Zach Rhein*

*Iowa Health and Human Services*

# Policy Alternatives



**Longtime Polk County supervisor Robert Brownell to retire after wife's Alzheimer's diagnosis**



**Chris Higgins**  
Des Moines Register

March 27, 2023, 8:23 p.m. CT



*Robert Brownell*  
*Des Moines*



# Next Steps

- Commit to 1-3 actions that will improve early identification rates
- Gather quarterly for technical assistance and progress checks
- Deploy training resources across Iowa
- 2026 and 2027 Summits!
  - October 2, 2026 – Prevention and Treatment
  - October 1, 2027 – Intervention and Caregiver Support

Post Summit Survey





This event was not possible without support from our sponsors!

