Public Health Funding and Policy Committee Meeting

October 13, 2021

Minutes

Committee Members Attending

Stephen Williams, MEd, MPA - Houston Health Department – Chair

Philip Huang, MD, MPH – Dallas County Health and Human Services – Vice Chair

Emilie Prot, DO, MPH – DSHS, Public Health Region 11

Jennifer Griffith, DrPH, MPH – Texas A&M University

Julie St. John, DrPH – Texas Tech University

Lisa Dick, Brownwood-Brown County Health Department

Lou Kreidler, RN, BSN - Wichita Falls – Wichita County Public Health District

Attendees:

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| Rafael Alberti | David Gruber | Saroj Rai |
| Angel Angco-Barrera | Seth Henderson | Shannon Richter |
| Michele Austin | Jordan Hill | Lillian Ringsdorf |
| Dana Birnberg | Karin Hopkins | Jessica Romano |
| April Brantley | Erika Hurst | Jennifer Romaszewski |
| Shannon Brown | Sharon Jacob | Sebastien Rouzier |
| Albert Cheng | Barbara Klein | Sammy Sikes |
| Brittany Cowley | Sebastien Laroche | Jennifer Shuford |
| Colin Crocker | Glenna Laughlin | Antonio Smith |
| Alma De’Alejandro | Joseph Leahy | Jennifer Smith |
| Courtney Dezendorf | Scott Merchant | Rachel Sonne |
| Becky Earlie-Royer | Angela Mora | Shelle Tarbox |
| Josh Ediger | Susan Murphree | Holly Jacques Turner |
| Steve Eichner | Elewechi Ndukwe | Tom Valentine |
| Nancy Ejuma | Amanda Ortez | John Villarreal |
| Tammy Foskey | Lucille Palenapa | Julia VonAlexander |
| Cristina Garcia | Sejal Patel | Jacob Welch |
| Ricky Garcia | Timothy Patterson | Rachel Whitaker |
| Mike Gilliam | Carlos Plasencia |  |

Chair, Stephen Williams, called the meeting to order at 9:03 am and the committee members introduced themselves.

**August 11th Meeting Minutes**

Ms. Lou Kriedler made a motion to approve the minutes. Dr. Jennifer Griffith seconded. The motion was carried and the minutes were approved.

**Update on COVID-19 Vaccine Administration:**

Dr. Saroj Rai updated the committee on vaccine administration with a slide presentation. The Food & Drug Administration’s (FDA’s) advisory committee will be meeting on Thursday and Friday this week to discuss the Moderna booster. Furthermore, on Friday they will also meet to discuss the Janssens booster dose. On the 26th of October, the committee will meet again to discuss the authorization for the COVID-19 vaccine for the age group of 5 to 11 years of age. The Pfizer vaccine is the same for both adults and children as it is currently being used for the primary series, both in the booster and the additional dose. The pediatric dose differs in that it will be 30 micrograms or one-third of the adult dose. The pediatric dose will also be administered 21 days apart. Pfizer, at the recommendation of the FDA, developed new formulation vials and a new way to dilute the vaccine specifically for pediatric doses. These vials will have new National Drug Codes associated with them. Due to the many combinations of the Pfizer vaccine, Dr. Rai and her team are working to develop a sort of “Cheat Sheet” that will help providers keep track of what needs dilution and what does not. The Centers for Disease Control and Prevention’s (CDC) Advisory Committee on Immunization Practices has been scheduled from the dates of October 20th to the 21st and again on November 2nd and the 3rd. Dr. Rai proceeded to share data on the current vaccination rates amongpopulations within Texas.

Mr. Williams acknowledged the amount of misinformation that is circulating about the vaccine, and that this data helps spread awareness.

**Update on COVID-19 Epidemiology Trends:**

Dr. Jennifer Shuford updated the committee on the epidemiological trends being seen in Texas in regards to COVID-19. She presented data on daily cases as well as a rolling seven-day average. Dr. Shuford’s presentation included hospitalization rates, Intensive Care Unit surges, and finally the three surge waves we have seen so far. After the last surge of COVID-19, there have been decreases in confirmed cases per day. Dr. Shuford showed the internal dashboard of the variants that the CDC is seeing across the nation. Due to the rise in demand for monoclonal antibodies, the US government has begun to allocate their use again. Texas is still receiving a large allocation, but due to limited supply, these allocations are decreasing. AstraZeneca just applied for emergency use authorization of their new long-acting monoclonal antibody drug. Dr. Shuford provided the email address for those who are looking for how to order the therapeutics. Through the email address, a prospective client will be able to receive a walk-through of the ordering process and have any of their questions answered.

Dr. Emilie Prot asked how the percentages and proportion totals have changed? Dr. Shuford responded that the CDC was not doing much sequencing at the beginning of the pandemic but over time the proportion of sequencing has changed. The total number of cases that are sequenced can be found on the CDC website. Dr. Philip Huang asked how the delay in lab reporting is affecting the numbers that are incorporated into what we are seeing. Dr. Shuford responded that this has happened multiple times over the last few months and she is unsure if those numbers have been incorporated. She suggested that he email the Associate Commissioner of Laboratory and Infectious Disease Services (LIDS), Imelda Garcia, so they can look into his question and respond.

Dr. Prot asked when Bamlanivimab was authorized and how it has changed. Dr. Shuford responded that it was originally authorized for use by itself, but the authorization was changed, and it now needs to be paired with etesevimab. This combination did not work well against the Brazilian variant but does against the Delta variant.

**Update on DSHS’ COVID-19 Health Disparities Funded Activities:**

Mr. Mike Gilliam shared a presentation with the committee, reviewing the amounts of funding the agency is receiving from the CDC COVID-19 Health Disparities and the Public Limited Company funding. This funding is for the project period of June 2021 to May 2023 and has 6 overarching components. These components are Infrastructure, Community Engagement, COVID Vaccinations, Partnership Directory, Health Disparities Improvement Initiative, and Information Sharing and Learning. Each contract that is funded with these will have to contribute to each of these components. As of this morning, 39 of the 46 contracted Local Health Entities (LHEs) have approved work plans with fully executed contracts to begin activities. The Office of Practice and Learning shared information regarding contracting with four university systems that oversee the four Area Health Education Centers statewide. They are contracting with Texas A&M AgriLife to have a position in each Public Health Region (PHRs) to leverage the Agrilife partnerships with the communities. The contract with the Texas Department of Agriculture and Nurse State Office of Rural Health will implement a community paramedicine pilot program in communities that are disproportionately impacted by COVID-19. The contract with Texas Parks and Wildlife will implement advanced healthy outdoor living interventions. There will be external contracts with communication firms to provide assistance with communications and any technical assistance needed to move forward. Mr. Gilliam shared a list of the 46 LHEs that are contracting with the committee. Dallas, Harris, Houston, San Antonio, Tarrant, Austin, & El Paso LHEs will receive funding directly from the CDC and the Department of State Health Services (DSHS), convening with them about once a month. DSHS is planning to hire 16 new temporary staff and 8 regional community engagement specialists to work with the communities in the PHRs.

Mr. Williams is interested in the work that AgriLife is doing and would like to hear about some of the initiatives in the various communities in future meetings.

**Update on Public Health Workforce Grant Opportunity:**

Ms. Dana Birnberg updated the committee on the Public Health Workforce Grant (PHWG). The performance period for this grant is 2 years, instead of the normal one-year period. The CDC allocated $157 million to the State of Texas. Of that money, 25% will go to schools, 35% will go to LHEs, 40% will be retained by the PHRs, and the remaining will be retained at the state level. Over the course of the two years, the fiscal and programmatic reports will be updated every six months. After meeting with the Texas Education Agency (TEA), they created an interagency agreement for the provision of funding. The TEA proposed they would fund their 20 regional Texas Education Service Centers and those centers would push that money to local health.

Mr. Williams commented that there is a base level of funding needed for public health regardless of what is going on.

**Update on COVID-19 School Testing Grant:**

Mr. David Gruber updated the committee on the COVID-19 School Testing Grant. This is a one-year grant in which the state received $803 million directly, while some LHEs received funding directly. Houston Health Department received $69 Million directly for school testing. Prior to this grant, schools were testing for COVID-19 sporadically, if at all. A new school testing program has been created with 5 vendors in the Group Purchasing Organization (GPO). The organization then finds other organizations that will provide a range of services from testing kits to providing other testing services depending on the requests of each school. The schools will receive the services and the companies will bill DSHS for the services. Each independent school district currently is capped. If they start to get close to the cap, DSHS will reach out to find out the circumstances they are experiencing. DSHS is also working with TEA to purchase things like high-efficiency particulate air filters.

**Update on Public Health Information Systems and Interoperability with Local Health Departments:**

Mr. Steve Eichner introduced Mr. Timothy Patterson who is working with the LIDS to talk about some items going on in that Division. Mr. Patterson updated the committee on projects that have been started and are expected to be completed by July 2023. Some of these projects include improving the performance, integration, and application performance of the National Electronic Disease Surveillance System (NEDSS). Mr. Eichner updated the committee on the work being done with the Texas Health Services and the Situational Awareness for Novel Epidemic Response tool (SANER). They are working to pilot some proof of concepts into a Geographic Information System platform using Environmental Systems Research Institute technology for visualization that will share data mapping capabilities in addition to charts and graphs. They are facing the challenge of getting data out of systems that are not electronic and are trying to come up with a universal way of doing things instead of having to customize work for over 750 hospitals.

Dr. Huang asked about the pilot discussed in North Texas that is different from what they are doing. Mr. Eichner responded that it is for situational awareness for the example of hospital bed counts, not for basic counts. The pilot hospitals are Parkland and King County hospitals.

**Update on Medicaid Local Health Department Managed Care Organization Contract:**

Ms. Elewechi Ndukwe presented a slide deck presentation on three main points on the LHE participation in Medicaid Managed Care Organization (MCOs). The first is the legislative update from this past session. Senate Bill 73 instructs the Human Health Services Commission (HHSC) to create a specific provider type for LHEs. They are working on an implementation plan that is requiring some time to sort out all the details and make the required changes for both enrollment and claims processing systems. The 2nd update is on the policy and contract amendments.Last year they received an open letter with some recommendations for HHSC on various challenges that LHEs are having when trying to contract with MCOs. After reviewing and making sure they are not going against any state or federal laws, they are making policy updates based on the recommendations in the letter. Lastly, we are looking to schedule an open meeting to bring together a few LHEs that may be interested in participating to discuss contracting challenges that are being reported. They have reached out to the Texas Association of Health Plans to get a date on when to hold this meeting.

Mr. Williams asked about providing input on uncompensated care for the 1115 Waiver Transfer. Ms. Ndukwe will take the question back and reach out with the answer provided.

**Discussion of the 2021 PHFPC Annual Report Preparation:**

Mr. Rafael Alberti shared that the feedback the committee provided on the annual report was incorporated into the report and it is currently going through an internal review.

**Public Comment:**

No Public Comment

**Timelines, Next steps, Announcements, and Future Meeting Dates**

The next meeting is on December 8, 2021. The applications to fill the empty committee position have been sent for review and should be approved by the next meeting.

Mr. Williams asked Mr. Alberti to keep the COVID-19 related items and data on the agenda.

**Adjourn**

Dr. Huang made a motion to adjourn the meeting. Ms. Kriedler seconded the motion. Motion carried. Meeting adjourned.

Approved:

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Stephen L. Williams, Committee Chair Date