

**Texas Diabetes Council
Meeting Minutes
July 23, 2020
1:00 p.m.**

Location: Microsoft Teams Live Event

Table 1: Texas Diabetes Council member attendance Thursday, July 23, 2020.

NAME	IN ATTENDANCE
Dr. Mitchel Abramsky (Non-Voting)	Yes
Ms. Joan Colgin	Yes
Ms. Felicia Fruia-Edge	Yes
Ms. Lisa Golden (Non-Voting)	Yes
Dr. Kelly Fegan-Bohm (Non-Voting)	Yes
Mr. Dirrell Jones	Yes
Ms. Diane Kongevick (Non-Voting)	Yes
Dr. Kathy LaCivita	Yes
Ms. Aida (Letty) Moreno-Brown	Yes
Ms. Averil Mullins (Non-Voting)	Yes
Dr. Feyi Obamehinti	Yes
Dr. Stephen Ponder	Yes
Ms. Ardis Reed	Yes
Mr. Jason Ryan	Yes
Mr. William (David) Sanders	Yes
Dr. Christine Wicke	Yes

Agenda Item 1: Welcome

Dr. Kathy LaCivita, Chair of the Texas Diabetes Council (TDC), convened the meeting at 1:05 p.m. and welcomed everyone in attendance.

Agenda Item 2: Roll Call

Ms. Sallie Allen, HHSC, Advisory Committee Coordination Office, provided logistics announcement, called roll and determined a quorum was present.

Agenda Item 3: Introduction of New Members

Dr. LaCivita introduced two new members, Mr. Dirrell Jones and Dr. Kelly Fegan-Bohm.

Agenda Item 4: January 23, 2020 Meeting Minutes

Ms. Allen asked if there were any necessary edits. Hearing none, Ms. Allen requested a motion.

MOTION: Mr. Jason Ryan motioned to approve the January 23, 2020 meeting minutes. Ms. Ardis Reed seconded. A roll call vote was conducted, and the motion carried with no objections.

Agenda Item 5: COVID-19 and Pre-existing Comorbidities of Diabetes, Obesity, and Cardiovascular Disease

Dr. LaCivita introduced Mr. Courtney Walker, PharmD, Novo Nordisk, Medical Account Director. Dr. Walker referenced the PowerPoint and handout, *COVID-19 and Pre-existing Comorbidities of Diabetes, Obesity, and Cardiovascular Disease*.

Highlights included:

- COVID-19 (coronavirus disease-2019) is a new disease which has not previously been seen in humans and is caused by a novel (or new) coronavirus called severe acute respiratory syndrome coronavirus 2 (SARS- CoV-2).
- Groups at higher risk to develop severe illness from COVID-19 are people aged 65 years and older, those living in a nursing home or long-term care facility.
- The most common comorbidities across currently available studies include obesity, hypertension/CVD, chronic lung disease and diabetes.
- Diabetes is one of the high-risk groups for developing severe illness from COVID-19.
- COVID-19 can cause more severe symptoms and complications in people living with obesity. Evidence suggests people with obesity with BMI ≥ 40 kg/m² have an increased risk of serious complications.
- Individuals with cardiovascular disease are more likely to show symptoms of infection or have a more severe infection than others. Those at risk of developing severe COVID-19 systems are individual who are immunosuppressed, the elderly frail, and pregnant women
- No current therapies are recommended by CDC or WHO and no proven effective therapies currently exist.

Agenda Item 6: Education and Integrated Care: Improving Care with the Help of Technology (Blue Loop)

Dr. LaCivita introduced Mr. John Henry, MyCareConnect Foundation, Executive Director. Dr. LaCivita read the disclaimer; this presentation is for educational purposed only. Mr. Henry referenced the PowerPoint and handout, *Education and Integrated Care, Improving care with the help of technology*.

Highlights included:

- Family challenges – care at school, safety, data collection/coordination, psycho-social impacts on individual
- Additional challenges – lack of insurance, expenses, education level, split households, and access to care
- Solving a problem – critical data collection/communication can be shared among caregivers, which allows adjustment to regimen
- Family, school, clinic experience –dashboard/easy entry, patient data analytics for clinicians, 2-way communication, insulin calculator, peace of mind for all involved with any aspect of care for the patient
- Use case: Children Hospital of Wisconsin (CHW) Technology – enabled model of care in an at-risk community
- Using technology to share resources, beneficial to families

Agenda Item 7: Texas Medicaid: Diabetes Self-Management Education and Support (DSMES), Medical Nutrition Therapy (MNT), Intensive Behavioral Therapy (IBT) and National Diabetes Prevention Program (DPP) Recommendations, and Texas Medicaid Managed Care Organizations (MCO) Survey Update

Dr. LaCivita introduced Ms. Ardis Reed, MPH, RD, LD, CDCES, TDC Member. Ms. Reed referenced the PowerPoint and handout, *Texas Medicaid: DSMES, MNT, IBT and National DPP Recommendations*.

Highlights included:

a. Diabetes Self-Management Education and Support (DSMES), Medical Nutrition Therapy (MNT), Intensive Behavioral Therapy (IBT) and National Diabetes Prevention Program (DPP) Recommendations

- Diabetes self-management education and support (DSMES) is a critical element of care for all people with diabetes and is the ongoing process of facilitating the knowledge, skills, and ability necessary for prediabetes and diabetes self-care.
- Benefits of participation in DSMES include, lower A1C levels, self-reported weight loss, fewer diabetes-related medical complications, and improved quality of life leading to a reduction in health care costs.
- Texas Medicaid Procedures Manual needs to have a more definitive outline of education and medical nutrition therapy services for pre-diabetes and those diagnosed with diabetes.
- Texas Medicaid Wellness Program replaced the Disease Management program and only states services for children and FFS clients; does not delineate coverage for MCO membership.
- Proposed national DPP language recommendation, that the Texas Medicaid FFS and MCO's shall provide access and coverage to The National Diabetes Prevention.
- Recommend Section, 9.2.56.2, Group Clinical Visits, recommend title be revised to read: "9.2.56.2: Chronic Disease Management Educational Services; Asthma, Pre-Diabetes, Diabetes, Obesity and Behavioral Therapy for Chronic Diseases."
- Recommend Medicaid to review and consider proposed language changes to DSMES Benefit, committee needs to complete the Topic Nomination Form and submit with supporting documentation to www.medicadbenefitrequest@hhsc.state.tx.us

MOTION:

Dr. LaCivita made a motion from TDC to submit the Medicaid request for the proposed revisions to be made to the 2021 Texas Medicaid Procedures Manual. Ms. Joan Colgin second the motion. A roll call vote was conducted, and the motion carried with no objections.

b. Texas Medicaid Managed Care Organizations (MCO) Survey Update
c. Texas Medicaid 2020 Texas Diabetes Council MCO Survey

Dr. LaCivita introduced Dr. Maria Cooper, PhD, DSHS Chronic Disease Epidemiology, Branch Manager. Dr. Cooper referenced the PowerPoint and handout, *Texas Medical Managed Care Organizations (MCO) Survey Update*

Highlights included:

- The Texas MCO Survey questionnaire was developed with input from DSHS Diabetes and Prevention Control Program, DSHS Chronic Disease Epidemiology Branch, Texas Diabetes Council, HHS Office of Medical Director, Medicaid & CHIP Services, and HHS Medicaid Medical Benefits Teams
- Input from Managed Care Organizations (MCOs) will help guide development of TDC priorities.
- Texas MCO Survey was conducted in Spring 2020 to gather input to inform the TDC's state plan.
- 12 Texas MCOs (out of 18) representing 5.6 million enrolled patients, across all SDAs and plan types, responded to the Texas MCO Survey, conducted April – July 2020.
- Analysis of survey is ongoing and full report will be presented at October meeting.
- The 2020 TDC MCO Survey questionnaire which outlined six areas and the document was provided to Council as a reference.

Agenda Item 8: Continuous Glucose Monitoring System Public Comments Review

Dr. LaCivita introduced Dr. Mitchel Abramsky, MD, MPH, TDC Member. Dr. Abramsky referenced the PowerPoint and handout, *Summary of Public Comments and Texas Health and Human Services (HHSC) Responses*.

Highlights included:

- A draft policy to add Therapeutic Continuous Glucose Monitoring (CGM) to the Home Health policy was posted for public comment between October 17, 2019 and November 1, 2019.
- Texas Medicaid received a total of 152 comments from 90 state stakeholders.
- The Council members were provided the summary document of the public comments and response for their review.

Agenda 9: School Board of Texas Essential Knowledge and Skills (TEKS) Curriculum Update

Dr. LaCivita introduced Feyi Obamehinti, EdD, TDC Member. Dr. Obamehinti referenced the PowerPoint and handout, **9a** *TDC TEKS Update*, **9b** *Health Education TEKS Review Work Group Recommendations*, and **9c** *Texas Diabetes Council Health Education TEKS Review Feedback*.

Highlights included:

- April 2019, TDC collaborated with Texas Education Agency (TEA) to review the process of the Health Education TEKS.
- This is the first revision of health education TEKS in over 20 years.

- First time cover diabetes, obesity and all related health topics in depth.
- Workgroup participants were recruited from various backgrounds.
- To date, TDC has provided three levels of support as a stakeholder in the review process.
- The workgroup provided a recommendation plan to revise the Health Education TEKS, Grades K-12 in the following categories:
 - Strand 1: Physical Health and Hygiene
 - Strand 2: Mental Health and Wellness
 - Strand 3: Healthy Eating and Physical Activity
 - Strand 4: Injury and Violence Prevention and Safety
 - Strand 5: Alcohol, Tobacco, and Other Drugs
 - Strand 6: Reproductive and Sexual Health
- TDC TEKS Curriculum Workgroup submitted a letter to Jessica Snyder, Texas Education Agency which outlined the workgroup's feedback to help guide the completion and update of the Health Education TEKS curriculum review.

Agenda Item 10: State Agency Representatives Count 2:59

a. Department of State Health Services

Dr. Kelly Fegan-Bohm, MD, Community Health Improvement Division Medical Director, and Ms. Kelsii Dilley, Branch Manager, DSHS, Diabetes and School Health, provided an update.

Highlights included:

- Staff Updates – welcomed Dr. Kelly Fegan-Bohm, Rachel Wiseman, and Priya Patel.
- The diabetes prevention and control program held state engagement calls with University of Texas Health Science Center at Tyler and University of Texas Health Science Center at Houston, to discuss retention challenges and strategies, and strategies to increase enrollment and participation in DPP.
- Response to the 2019 state plan for diabetes and obesity treatment is being drafted and is due to legislature on November 1, 2020.
- Diabetes registry report is complete and posted on the DSHS legislative report webpage. It is due to legislature no later than December 1, 2020.

Ms. Dilley advised that she was not been assigned to the budget review project.

b. Health and Human Services Commission

Dr. Mitchell Abramsky, HHSC Medicaid and CHIP Services, Associate Medical Director.

Highlights included:

- In response to the 2019 TDC plan, it is due November 1st to address the requirements for transparency in the pricing of insulin and other prescription medications.
- Will meet with vendor drug program to get more information and possibly have them present at the next health professionals meeting.
- Will forward Ardis Reed's presentation on diabetes self-management

education and support (DSMES) to Policy Review program and discuss at their meeting next week.

- Council needs to complete the public form for policy review and submit it on behalf of the TDC.

c. Texas Workforce Commission (TWC)

Ms. Lisa Golden, MA, Vocational Rehabilitation Services Diabetes Specialist.

Highlights included:

- 2020 marks 100th anniversary of the first federally funded program to assist people with disabilities who did not acquire their ability as a result of serving in the military.
- Virtual signing of the Americans with Disabilities Act, set for 10am July 24, 2020. Registration is available via the Governor's website, or ADA 30 Moving Forward.
- 25.8% of Texas 18 or older live with disability.
- The TWC and VR are open and available to assist those with disabilities.
- TWC is expanding their Independent Living Services for older individuals who are blind.
- A directory of the Vocational Rehabilitation offices is available on the TWC website.

d. Teacher Retirement System of Texas (TRS)

Ms. Averi Mullins, Health Benefits Program Analyst Specialist.

Highlights included:

- The new TRS health plans go live September 1, 2020 with Blue Cross Blue Shield (BCBS)
- Effective January 1, 2020, the TRS-Care plan (non-Medicare eligible population) will be administered by BCBS and the Medicare Advantage plan (over 65 population) will be administered by United Healthcare.
- Number of insulin users increase from 2018 to 2020; mainly driven by new enrollment
- The adherence rate of insulin is lower in the TRS-Active high deductible plan, it's at 38.4% versus the TRS-Care standard plan it's at 56.6% and the Medicare advantage plan is it 58.7%.
- There was approximately a \$1 million increased level of spend in the TRS- Care standard plan; with \$661,000 specifically in the diabetes category
- Anti-diabetic medications are ranked first in the top 10 therapeutic classes; and diabetic supplies rank eighth

Dr. LaCivita requested information on the TRS obesity plan be presented at the next meeting. She also suggested a survey of the populations to determine reason(s) why they stop taking their medication.

e. Employees Retirement System of Texas (ERS)

Ms. Diana Kongevick, Director of Group Benefits, and Lacy Wolff, Health Promotion and Administrator, ERS.

Highlights included:

- HealthSelect of Texas is the largest plan provided to state employees and is driven mainly through PCP with a referral requirement for specialist.
- 200 agencies of higher education institutions are part of the ERS Plan.
- The sixteen largest agencies of higher education institutions equivalent to well over half of our population.
- Approached senior level leadership to get support and buy-in to present wellness program metrics to the sixteen agencies.
- Created the AMP Wellness Campaign – Assess, Manage and Prevention
 - Assess: take online health assessment
 - Manage: enroll in weight management program
 - Present: complete annual preventive screening
- Developed a Health Wellness Report Card for the sixteen agencies to compare AMP rankings, ER, Urgent Care, and Virtual Visits, and Common Chronic Conditions.
- 2015-2016 statistics show 40% of U.S. adults live with obesity.
- Considering the number of adults that live with obesity and chronic health conditions, the AMP campaign is essential to the diabetes prevention programs.
- In FY18, 42.23%, and in FY19, 42.99% of population completed an annual preventive screening. Would like to increase the number however the COVID-19 pandemic has created additional challenges.
- We are communicating with PCPs to encourage online screenings.
- In conclusion, AMP campaign is measuring:
 - Population percent that have taken online health assessment,
 - Population percent engaged with a Weight Management programs
 - Population percent that have completed their annual screening

Ms. Wolff reviewed the report card slide and stated the chronic conditions information only reflects medical treatment. It does not include pharmacy, which for those with diabetes, is a much more expensive cost.

Agenda Item 11: Workgroups

a. Advocacy and Outreach

Dr. LaCivita introduced, Mr. Jason Ryan, TDC member who presented the update on behalf of Mr. John Griffin.

Highlights included:

- Discussed ideas, areas of focus for the upcoming 2021 legislative plan
- Had a presentation overview of Texas vs. nationwide obesity and diabetes statistics; Texas is not ranked well. We will not solve this problem in the doctor's office.
- Discussed state, federal initiatives on insulin pricing; eleven states have capped co-pays on insulin, between \$25-100
- Brief update from ADA on COVID-19 related legislation at the federal level that deals with co-pays for insulin during the pandemic, testing in underserved communities and voting safety for the diabetes population

b. Health Professionals and Outcomes

Dr. LaCivita introduced, Ms. Joan Colgin, TDC member and co-facilitator of the Health Professionals and Outcomes workgroup.

Highlights included:

- Presentation on Diabetes Disaster Response Coalition from Maryanne Strobel
- Discussion with Shirley Ellis with WIC program; lead workgroup through the nutritional recommendations; WIC targeting women, children and infants, whereas SNAP covers the entire family; WIC is removing food barriers to access
- Discussed social media presence for Council; possibly meet with agency communications director and legal counsel to determine what would be allowed using social networking resources (Facebook, Twitter, etc.)
- Pursuing discussion with Texas Medicaid Drug Utilization Review committee and Vendor Drug, to define and better understand drug pricing, with a focus on insulin pricing and obesity drugs covered by commercial insurance companies.

Agenda Item 12: Announcements

Dr. LaCivita called for announcements Council members would like to share.

The Association of Diabetes Care & Education Specialists (ADCES), formerly American Association of Diabetes Educators, will host a virtual conference August 13-15, earn up to 31.5 CE. All sessions will be offered live, and then available on-demand for 90 days.

For more information go to DiabetesEducator.org.

Agenda Item 13: Public Comment

No public comment was received.

Agenda Item 14: Future Meetings

Dr. LaCivita stated the next virtual meeting is scheduled for October 22, 2020 at 1:00 p.m.

Topics of discussion for the October meeting:

- Beyond Type 1 Diabetes, Texas based initiative presentation
- Finalize survey results from the MCOs
- Finalize survey results for glucose monitoring
- Provide update on Diabetes Global Policy
- Ms. Ardis Reed would like to provide update at Health Professional Outcomes meeting on a new model on how to address postpartum education for A1C test and screening.

Agenda Item 15: Adjournment

Dr. LaCivita adjourned the meeting at 4:53 p.m.

Webcast: <https://texashhsc.swagit.com/play/07242020-734>