

**Texas Diabetes Council (TDC)**  
**FINAL Meeting Minutes**  
**Thursday, January 12, 2023**  
**1:00 pm.**

**Hybrid Meeting:**  
**TEAMS Virtual Meeting – Moreton Building, Room M-100**

**Agenda Item 1: Welcome, logistical announcement, and roll call**

The Texas Diabetes Council meeting was called to order by Dr. Feyi Obamehinti, Chair at 1:00 pm, at the physical meeting location in the Moreton Bldg., Room M-100. Dr. Obamehinti welcomed committee members, staff and members of the public.

Mr. John Chacón, Facilitator, HHSC, announced the meeting was being conducted in accordance with the Texas Open Meetings Act, conducted roll call, and noted that a quorum was present for the meeting.

**Table 1:** Texas Diabetes Council member attendance at the Thursday, January 12, 2023, meeting.

MEMBER NAME	YES	NO	MEMBER NAME	YES	NO
Ms. Felicia Fruia-Edge	X		Ms. Maryanne Strobel	X	
Mr. Dirrell Jones	X		Dr. Christine Wicke	X	
Dr. Gary Francis	X				
Ms. Aida (Letty) Moreno-Brown		X	<b>NON-VOTING MEMBERS</b>		
Dr. Feyi Obamehinti, Chair	X		Ms. Lisa Golden	X	
Dr. Stephen Ponder, Vice-Chair	X		Dr. Kelly Fegan- Bohm	X	
Dr. Ninfa Pena - Purcell	X		Dr. Mitchel Abramsky	X	
Ms. Ardis Reed		X	Ms. Diane Kongevick	X	
Mr. Jason Ryan	X		Ms. Umme Salama Oan Ali	X	

Yes: Indicates attended the meeting

No: Indicates did not attend the meeting

**Agenda Item 2: Consideration of October 13, 2022, draft meeting minutes**

Dr. Feyi Obamehinti, Chair, called for edits or changes to the draft minutes. Council members provided edits and were noted by TDC DSHS staff.

- Ms. Lisa Golden said that on pg. 5, item 7e, should say “beep baseball”
- Dr. Obamehinti suggested the “he” to be changed to “she” when referring to the Chair on the first paragraph of pg.1
- Dr. Obamehinti said that the incorrect label of “Advisory Committee” should be replaced with “Texas Diabetes Council” on pg. 1 on the top of the attendance chart. Also on top of the attendance chart, she said that “October 14, 2023” should be changed to “October 13, 2022”
- Dr. Obamehinti also wanted to add the phrase “workgroup leader” after Jason Ryan’s name on page 4 under the word “Motion”.
- Dr. Ninfa Purcell suggested that “Dr. Ryan” be changed to “Mr. Ryan” on page 4

Dr. Feyi Obamehinti, Chair, called for a motion to approve the minutes of the October 13, 2022, meeting with edits noted.

**Motion:** Dr. Gary Francis moved to approve minutes with requested edits. The motion was seconded by Ms. Maryanne Strobel. The motion to approve the October 13, 2022 meeting minutes with edits was approved by a unanimous roll call vote, with nine (9) approvals, no disapprovals, no abstentions.

## **Agenda Item 6: Legislative activities refresher**

Dr. Feyi Obamehinti, Chair, stated she would like to go over the legislative activities refresher and referenced a handout titled "Texas Diabetes Council-Legislative Activities Overview and Guidance" before proceeding with agenda item #4 regarding the 2023 State Plan Priorities. Dr. Obamehinti led the discussion. Highlights of discussion included:

- Dr. Obamehinti mentioned that it would be important to go over the information on the handout before they had a discussion about the State Plan Priorities. She especially wanted to go through the table on pg. 2 of the handout.
- Dr. Stephen Ponder had questions on the definition of "notify" vs. "consult" and Dr. Obamehinti answered those questions
- Ms. Rachel Wiseman reminded the council that they had been shown this document before

Mr. Jason Ryan made clear that only if the council votes on something, and therefore approves a stance on an issue or item, may the council do the actions listed in the chart on page 2. He clarified that in a council member's personal capacity, they can advocate and reach out to the legislature as much as they want, they just cannot claim to be doing it on behalf of the TDC.

## **Agenda Item 3: 2023 State Plan Priorities**

Dr. Feyi Obamehinti, Chair, led the discussion and referenced a handout titled "Texas Diabetes Council State Plan Priorities". Highlights of discussion included:

- Dr. Obamehinti pointed everyone to the State Plan Priorities handout.
  - She started read the first Priorities on the sheet, which was the insulin and drug price transparency priority. She asked everyone if they wanted to keep it or move on. Dr. Stephen Ponder wondered if "affordability" is the word we should use, and a discussion ensued. Dr. Ponder suggested "availability", Dr. Ninfa Pena-Purcell suggested "access", Ms. Lisa Golden suggested "attainability", Dr. Ponder also suggested "accessibility" and Dr. Gary Francis suggested a combination of "affordability" and "availability".
  - Dr. Obamehinti said that a best summary might be to use the word "access"
- Dr. Obamehinti introduced the next priority on the list "Reduce therapeutic interference in hospital settings", but then stated that the council had expressed wanting to move on from this priority on account that the only action that could be taken was already taken.
- Dr. Obamehinti then introduced the next priority on the list "Make telehealth and telemedicine permanent". She states that the council wanted to move on from that priority due to believing that there were other organizations and powers that could do a better job in advocating than the TDC.
- Dr. Obamehinti introduced the next priority which was "Decrease identified health disparities for all persons with diabetes and obesity". She then read actions that had been taken to address the priority.
  - She said that the last recommendation from council was to keep the priority in 2023
- Dr. Obamehinti introduced the last priority of the 2021 list which was "expand the use of automated Diabetes technologies such as continuous glucose monitoring".
  - She said that there were no actions done to address this priority, and so the council wanted to keep the priorities
- Dr. Obamehinti said she wanted the workgroup leaders to present and share what was discussed in each of their workgroups.

- Dr. Obamehinti highlighted the topics for the 5 priorities and then handed it over to the workgroup leaders. Mental health, eye health, drug access, health disparities, and advanced diabetes technologies are the tentative five priority topics. She asked if anyone wanted to add any more.
- Dr. Pena-Purcell added that within the Health Disparities she hoped that DSMES could be incorporated.
- Other members confirmed that the 5 priority topics seemed good
- Dr. Obamehinti turned it over to Mr. Jason Ryan and Ms. Veronica De La Garza to summarize what was discussed in their workgroup.
  - Mr. Ryan affirmed that the Mental Health and Eye Health were discussed in the Advocacy and outreach workgroup meeting. What was decided was that there would be more workgroups created that will meet between the meeting today and the April meeting. Diabetes affects people's life generally, including mental health. The workgroup identified a few experts that they wanted to consult with. The workgroup discussed increasing awareness of Eye Health for people with Diabetes. This could be addressed with signage in doctor's offices or another resource. New workgroups were established during the discussion, and they are planning on discussing further.
  - Dr. Ponder stated that there's a lack of mental health professionals to deliver care and that there is a need for more mental health training. He wondered if there could be training sponsored by the TDC.
  - Mr. Ryan said that he agreed and that the workgroups will create action items around these topics.
  - Dr. Francis noted that there is a budget surplus this year and that there might be a way to use some of that for mental health training.
  - Dr. Obamehinti stated that this could be included in the recommendations within the Mental Health priority.
  - Dr. Pena-Purcell stated that the TDC needs to identify their wants and that she knows many resources already available that could be disseminated.
  - Ms. Golden affirmed that the American Diabetes Association has a mental health professional directory along with Diabetes Education 101 for providers. She expressed wanting to convince more providers to get trained.
- Dr. Obamehinti asked for Dr. Ponder and **Dr. Mary Kate Sain** to share what was discussed during their workgroup.
  - Dr. Ponder asked Dr. Sain to verify anything he said. They had discussed the priority about Diabetes Drug and Treatment Access. Older populations with Diabetes and the complications that come with them was discussed and emphasized as well. Dr. Ponder asked Dr. Sain to expand.
  - Dr. Sain stated that taking a survey was discussed, but they expressed not feeling ready to do a full systematic review. They had discussed defining what "underserved" populations were to the TDC.
  - Dr. Ponder expressed that this would probably be more of an informal survey.
  - Dr. Obamehinti asked him to state the priority formally for the record
  - Dr. Ponder said that there were multiple words thrown around. He said that "accessibility" was what he believed could cover all ground. He said it was important to include all Diabetes drug treatments in the priority. He

- noted that the cost of most Diabetes drugs is very high and that it's important to include all Diabetes therapies within the priority.
- Dr. Ponder noted that for Automated Diabetes Technologies priority from the 2021 State Plan, there were some bullet points that were focused on. He stated that the workgroup wanted to attempt to bring together multiple people together to discuss it further. A new workgroup was created on the topic. Dr. Ponder reemphasized that the older populations with Diabetes are struggling uniquely because people are living longer. There is a clear need to improve the standards in assisted living facilities. Dr. Ponder said he had a call with an individual whose father could not be administered insulin within his assisted living facility and that it was a huge issue around the state. Dr. Ponder stated that he hoped the rules that had created that issue could be changed soon in order for medical aides to be allowed to administer insulin once again. He emphasized that he wanted Diabetes in Elderly Populations must be covered within a priority.
  - Dr. Ponder said that there will be a workgroup formed for this topic. He said that automated Diabetes technologies are not going away and that technologies are expanding. He expressed that there needs to be more training regarding these advanced Diabetes devices. He said that the workgroup decided that that priority should be kept.
  - Dr. Obamehinti asked how they wanted to word the priority topic
  - Dr. Ponder suggested that "automated" should be adjusted.
  - Dr. Sain said that she would say "expand the use of Diabetes technologies"
  - Dr. Ponder suggested using "advanced" instead of "automated".
    - Other council members said yes to using the word "advanced"
  - Dr. Pena-Purcell expressed that she wishes for it be worded as "persons with Diabetes" instead of "Diabetic"
  - Dr. Francis asked whether the "Diabetes and Obesity" should be changed to "Diabetes and/or Obesity" to be more inclusive.
  - Dr. Ponder expressed wanting it to be "Diabetes and/or Obesity"
  - Dr. Obamehinti asked Ms. Julia Robinson to read out the five priorities
    - Ms. Robinson said that they had never stated a sentence for the Eye Health or Mental Health priority
    - Dr. Obamehinti asked what Mr. Ryan's workgroups had decided and Mr. Ryan said that they hadn't chosen a more specific topic
    - Dr. Ponder expressed the importance of retinopathy. There was then a discussion on the importance of Retinopathy vs Ocular complications. Others expressed wanting to choose simpler wording.
  - Dr. Obamehinti asked Ms. Robinson to read it out
    - Ms. Robinson stated that she was not allowed to make the priorities for Council and so they needed to craft a sentence. She did state that she had the 3 other priorities ready to read. She proceeded to read them out loud.
    - Dr. Obamehinti thanked Ms. Robinson
  - Dr. Francis suggested that the priority be "encourage the prioritization of Mental Health issues in people in Diabetes" and the same for mental health
    - Dr. Ponder suggested "ocular complications" for the wording for Eye Health
    - Dr. Sain suggested "ocular complications"

- Dr. Pena-Purcell said that they should be considerate of their audience and that some of the legislature might get confused with terminology that is more complex. She also reminded them that the priorities were just overarching categories and that the recommendations within them can be more specific.
- Dr. Ponder suggested retinopathy and vision disturbances
- Dr. Obamehinti said that vision disturbances would be more understandable
- Dr. Sain mentioned that the ADA uses the phrase "Eye Health"
- Dr. Kelly Fegan-Bohm mentioned that all the other priorities start with a verb. She suggested choosing "improve" and make the sentence "improve eye health in persons with Diabetes" and the same for Mental Health.
- Dr. Pena-Purcell said that she liked the idea of "improving outcomes" but that it might not capture it as broadly. She recommended having a broad category and then let the workgroups define the specifics later
- Dr. Obamehinti agreed and restated that sentiment. She said that the topics were broad. She emphasized that the council needed 5 topics to vote on.
- Ms. Golden said that she liked the term "Eye Health".
- Dr. Francis said he likes the sentences "improve eye health" improve mental health" in " all persons with Diabetes"
- Dr. Pena-Purcell said that she likes the phrases but she wants to add "access" to the priority
- Dr. Fegan-Bohm said that that could be within the priority
- Dr. Pena-Purcell said that she was interested in hearing about more mental health more from Lisa Golden from what she had said earlier about mental health in people with Schizophrenia. She wanted to know if Ms. Golden was comfortable with the way the mental health priority wording was set.
- Ms. Golden thanked Dr. Pena-Purcell. She said that they could go into a deeper dive within Mental Health
- Dr. Ponder said that he liked the phrase "mental well-being". Dr. Pena-Purcell said that she also liked that phrase and that she liked including "all persons with Diabetes" to be inclusive.
- Dr. Obamehinti said that they needed to define their 5 topics because they were overtime. She asked Ms. Robinson to read out the 5 topics that they had so far.
  - Ms. Robinson asked if they wanted to have it as "mental health" or "mental well-being".
  - Dr. Obamehinti said to keep it as "mental health"
  - Ms. Robinson read the priorities which are as follows:
    - Improve Eye Health in all persons with Diabetes
    - Improve Mental Health in all persons with Diabetes
    - Increase access to insulin and Diabetes treatments
    - Reduce identified health disparities for all persons with Diabetes and/or Obesity
    - Expand the use of Advanced Diabetes Technologies

Dr. Feyi Obamehinti, Chair, called for a motion to approve the five 2023 2023 State Plan Priorities with edits noted during today's meeting.

**Motion:** Dr. Feyi Obamehinti moved to approve the five 2023 2023 State Plan Priorities with edits noted during today's meeting. The motion was seconded by Dr. Gary Francis. The motion to approve the five 2023 2023 State Plan Priorities with edits noted was approved by a unanimous roll call vote, with nine (9) approvals, no disapprovals, no abstentions.

#### **Agenda Item 4: State plan writing responsibilities**

Dr. Feyi Obamehinti, Chair, led the discussion and requested volunteers from the Council for writing assignments for each of the five responsibilities. Highlights of discussion included:

- Dr. Obamehinti asked the council to volunteer to help write one or more of the State Plan Priorities that had been established
- Dr. Obamehinti stated that Dr. Kelly Fegan-Bohm and Dr. Ninfa Pena-Purcell had expressed interest in joining the Mental Health priority workgroup.
- Dr. Obamehinti also expressed that Dr. Stephen Ponder and Dr. Mary Kate Sain had expressed interest in being in the Eye Health workgroup to help write the Eye Health priority.
- Dr. Obamehinti said that for the Advanced Diabetes Technologies workgroup that Dr. Ponder and Ms. Lisa Golden had expressed interest in being in those workgroups.
- Dr. Pena-Purcell volunteered to help with the Health Disparities priority and then also volunteered to lead the Mental Health priority
- Dr. Obamehinti asked her if she wanted to still be in the Mental Health workgroup still in addition to the Health Disparities workgroup
- Ms. Maryanne Strobel volunteered to help with the Insulin and Diabetes Treatment Access priority writing Dr. Christine Wicke volunteered to help write the Access to Diabetes treatment priority as well
- Dr. Obamehinti asked for one more volunteer for the Mental Health and Advanced Diabetes Technologies priority writing
- Mr. Jason Ryan said he would fill in wherever he was needed
- Dr. Gary Francis said that he would help with the writing for the Advanced Diabetes Technologies priority
- Dr. Obamehinti asked if Ms. Veronica De La Garza could be added to the list helping write the Eye Health priority and Mental Health priority
- Ms. Golden volunteered for the Mental Health and Eye Health priority writing

#### **Agenda Item 5: Finalize TDC bylaws**

Dr. Feyi Obamehinti, Chair, led the discussion for suggested changes and/or additions and referenced handout titled "Texas Diabetes Council Bylaws". Highlights of discussion included:

- Dr Obamehinti explained that the Bylaws document being reviewed is a rough draft and that the Council had Operating Procedures previously, but these will be official Bylaws
- Dr. Obamehinti proceeded to read through the Bylaws document. In section 2, Dr. Obamehinti asked Ms. Rachel Wiseman to clarify what "the Department" meant and Ms. Wiseman explained that it meant DSHS. Dr. Obamehinti continued to read through the Bylaws document.
- In Section 4 under "Voting Members" Dr. Ponder had a question about where the "policies and procedures" portion came from. Ms. Wiseman explained that the policies and procedures portion was pulled directly from statute.
  - Dr. Stephen Ponder expressed that he wished that there was a required pharmacist and mental health professional role on the Council. Ms.

Wiseman explained that the category of “members of the general public” could mean health professionals such as pharmacist and mental health professionals. Dr. Ponder expressed concern about not making a pharmacist required. Dr. Kelly Fegan-Bohm clarified that all that would take is a change in statute, which is possible. Dr. Christine Wicke stated that she replaced another pharmacist so maybe there was a trend there.

- Dr. Obamehinti continued to read through the Bylaws.
- Under section 5, “Member Terms”, Dr. Ponder had a question about why we didn’t include the exact number of years for member terms, Rachel Wiseman said that she just put in what was in statute, but that they could choose to add that. Dr. Ponder expressed wanting to put the term length. Ms. Wiseman explained that she was unclear while writing the Bylaws whether they wanted term limit or term length which is why she didn’t input the 6-year term length of the TDC. Dr. Obamehinti asked ACCO to provide clarity. Mr. John Chacón explained that this is just a rough draft for Council to provide input and that after that Legal counsel and ACCO will both review and provide input on all edits and will then present the Bylaws again to the TDC. Dr. Francis stated that the term length is established at points in the statute. Dr. Fegan-Bohm clarified that the council can add the term length very easily and that it seems like that is the wish of the council.
- Dr. Obamehinti continued to read through the Bylaws. She chose to skip the section titled “Member Expectations”.
- Dr. Ponder asked what “new member orientation” means. Dr. Obamenhinti states that she believed it meant the Open Meetings Act training, Code of Conduct Ethics training and public Information Act training. She said you have to complete those trainings and send the certificates to someone. Mr. Chacon clarified that members send those to the DSHS program and that members have 90 days to do that. He said that in addition to those training that there is a new member orientation so that members understand how different state agencies support the Council. Dr. Ponder asked if that training was in-person and Mr. Chacon answered that it has recently been a virtual training.
- Dr. Obamehinti continued reading through the Bylaws.
  - In section 10, Rachel Wiseman states that she wished to make clear the subcommittees cannot have non-council members participating and that is why the TDC’s subcommittees are called workgroups instead. She also clarified that non-council members cannot get travel reimbursement.
  - Dr. Ponder replied that there had been travel reimbursement for non-members in the past. Rachel Wiseman replied that it was done incorrectly.
- Dr. Obamehinti continued reading the Bylaws document. Dr. Obamehinti noted on pg. 19 that it should say “Council Member signature” instead of “Advisory Board member Signature”.
- Dr. Obamehinti asked if anyone had any questions.
  - Dr. Ponder replied that he had a few questions. He said that there’s a lot of information in the old bylaws that is not in the new bylaws. Dr. Obamehinti clarified that the old “Bylaws” were not actual Bylaws. Dr. Ponder indicated that he understands.
  - Dr. Ponder said that he was concerned with something that is referenced as a statute. He said that it says that “the department shall accept gifts and grants on behalf of the council and deposit them into a special account.” Dr. Ponder said that it says that the monies will be used on

behalf of the council for conducting special studies or projects of the council and will be used for the State Plan. Dr. Ponder asked where that special account went and what happened to that being a possibility. Dr. Obamehinti said she would let Ms. Wiseman speak on that. Ms. Wiseman said that there haven't been gifts or grants given that she's been aware of. Dr. Ponder replied that it seems like there used to be monies given to the council and that he doesn't know when that stopped. Dr. Obamehinti clarified that if there was money given, the agency staff would have to approve and distribute those funds. Dr. Ponder said that he reads it differently than her and that they can just disagree on the interpretation.

- Dr. Obamehinti explained the process of the Bylaws being developed and Mr. Chacón clarified.

### **Agenda Item 7: Updates from State Agency Representatives**

- a. Department of State Health Services (DSHS) – Dr. Kelly Fegan-Bohm provided the update.
  - Dr. Fegan-Bohm informed the council that there is a new DSHS commissioner who was the interim commissioner but was promoted.
  - She also informed the council that the 88<sup>th</sup> legislative session began January 10<sup>th</sup> and will run until May 29<sup>th</sup>
- b. Health and Human Services Commission – Dr. Michael Abramsky, HHSC, provided the update.
  - Dr. Abramsky said that he had an update on House Bill 2658, which started a study that is trying to determine the effects on DSMES on Medicaid recipients. The current status of the study is that it is still in progress. Once it is done, it will be posted on the public policy website for public comment and then it will advance up for policy change.
- c. Teacher's Retirement System of Texas – Ms. Umme Salama Oan Ali, Engagement Specialist and Mr. Erick Wolfe-Schacter, TRS, provided the update.
  - Ms. Oan Ali introduced Mr. Eric Schater-Wolfe who gave an update on the Virta Health program and its success.
  - Dr. Stephen Ponder had questions. He asked if there was an end to the program, and Mr. Schater-Wolfe said that if you can choose to stop participating at any time.
- d. Dr. Ponder then asked if there was a follow through on if people from the program reverted back and Mr. Schater-Wolfe said people are learning about lifestyle changes and that they've seen a reduction in cost of drugs. Employee Retirement System – Diane Kongevic, Director of Group Benefits, ERS, and Ms. Lacy Wolff, ERS, provide the update and referenced a PowerPoint titled "Diabetes Prevention Solutions Update".
  - Ms. Diana Kongevick said that they were presenting on an initiative that was adopted by ERS a few years ago. It wanted ERS to develop a prevention program for Diabetes. She explained that she will present for a few slides and then Ms. Lacy Wolff will present the last few slides.
  - Ms. Kongevick explained how Real Appeal and the Wonder Health both helped address the initiative in different ways. Real Appeal focused on losing weight and Wonder Health focused on losing weight as well.
  - Ms. Wolff introduced herself and talked about two programs that she's worked on: Wonder Health and Peak Performance. They both help address health issues and prevent larger health problems. She then talked about the ERS walk and talk podcasts, which was a program that they started during the Pandemic. Ms. Wolff then turned it back over to Ms. Kongevick
  - Ms. Kongevick discussed then AMP Wellness Campaign and talked about how Controlled Diabetes is important and that they are trying to target the uncontrolled Diabetes. She asked for questions.



- Dr. Stephen Ponder asked if there was a connector between completion rate and results or if there was another way to calculate success. She answered.
  - Dr. Kelly Fegan-Bohm said that there's a lot of research around Diabetes language and that using the terms "controlled" and "uncontrolled" is not preferable because there's often only so much that can be controlled by the patient. She said that the preferred terms are "is there A1C on target or not on target". She said that it could be something to review if they are presenting to a population with Diabetes. Dr. Ponder agreed and said that a preferred term is "managed" because we don't want to use language that implies a moral judgement
  - Ms. Kongevick said thank you and that they will be mindful when presenting to populations with Diabetes.
  - Dr. Feyi Obamehinti stated that she thought it was interesting that in April 2016 they had virtual program, even before covid pushed people to do more virtual programs
  - Ms. Kongevick thanked her for pointing that out.
  - Dr. Obamehinti thanked Ms. Kongevic and Ms. Wolff
- e. Texas Workforce Commission - Ms. Lisa Golden, Vocational Rehabilitation Services Diabetes Specialist, provided the update.
- Ms. Golden said that Vocational Rehabilitation has been losing their Diabetes Educators across the state. She encouraged the TDC to tell colleagues who might be interested in applying to do so. She gave more details of the position.
  - Ms. Golden mentioned that the TWC emails have changed in recent times and that now the email is "{person's name with period in between first and last name}@{agency acronym}.texas.gov"

**Agenda Item 8: Announcements and follow up on items from October meeting**

Dr. Obamehinti said that there was only one follow up item. She said that the agency sent out a November Newsletter which was the council's official first newsletter. She mentioned that the feedback was low, and that the Spring edition would come out next month. At that time, the Council will need to revisit the Newsletter and consider the feedback.

**Agenda Item 9: Public Comment**

Mr. John Chacón, Facilitator, HHSC, announced that no one pre-registered to provide oral testimony but stated that one member of the public pre-registered to provide written comment. TDC DSHS staff provided the written comments to council members prior to the meeting.

- Mr. Chacon said that there was no one registered for oral comment but there was a written comment. Dr. Feyi Obamehinti indicated that council members had a copy of a written comment.
- Dr. Ninfa Pena-Purcell asked if the written comment was the letter that was titled "Problems for Diabetics in Assisted Living". Dr. Obamehinti confirmed that it was. Dr. Pena-Purcell indicated that she was personally affected by the letter and that she thought it warrants further discussion. She states that she wondered what is being done to assist older adults in assisted living. She said that it begs the question of how their needs are being addressed. She expressed wanting Council to have it on their radar.
- Dr. Obamehinti asked Council what they thought about addressing the issue within the Health Disparities priority topic.
- Dr. Gary Francis said that they also might be able to incorporate it into the Access priority topic as well.
- Dr. Stephen Ponder said that he spoke with this individual a few months ago. He said that he thinks there is a potential remedy to the issue that doesn't have to be addressed with legislation and is an agency issue.

- Ms. Rachel Wiseman responded that she believes that the policies in place from the Texas Administrative Code that are written by different state agencies and that she believes that these are written by HHSC. She stated that she believes that it could be remedied by working with HHSC to change the rules.
- Dr. Obamehinti said that she spoke with public commenter over the weekend as well. She said that she believes that the TDC could help address the issue by incorporating it into the priority topics in the State Plan. She stated that she believes that it deals with the credentialing of medical aides. Dr. Obamehinti said that she told Ms. Martin that the council can thank her and dive into the topic but that the solution is held with HHSC. Dr. Obamehinti then asked the Council if they wanted to focus on the Elderly population within the State Plan priorities.
- Dr. Francis said that he supports that and also said that he wanted to consult with DSHS who then can talk to the people who are in charge of credentialing.
- Dr. Obamehinti said that Dr. Francis made a motion. Dr. Francis responded that he didn't remember. Dr. Obamehinti said that it was for addressing Elderly populations within a priority topic on the state plan.
- Dr. Ponder asked if Dr. Mitchel Abramsky was still on the meeting. There was no response.
- Ms. Wiseman said that she can consult with Government Affairs to figure out the next best steps.
- Dr. Obamehinti thanked Ms. Wiseman and public commenter.

Dr. Feyi Obamehinti, Chair, called for a motion to address elderly population on the State Plan Priorities regarding accessibility and health disparity.

**Motion:** Dr. Gary Francis moved to approve the motion to address elderly population on the State Plan Priorities regarding accessibility and health disparity. The motion was seconded by Dr. Steven Ponder. The motion to approve the motion to address elderly population on State Plan Priorities regarding accessibility and health disparity was approved by a unanimous roll call vote, with eight (8) approvals, no disapprovals, no abstentions.

### **Agenda Item 10: Date and topics for next meeting**

- Next meeting is April 27, 2023. Morten Bldg. Room 100
- Key topics for agenda:
  - Dr. Feyi Obamehinti asked if anyone had any suggested speakers
  - Dr. Stephen Ponder mentioned that Ms. Veronica De La Garza had suggested some names for people to present during the workgroup.
  - Dr. Obamehinti suggested that if someone presents at a workgroup meeting they should also present at the general council meeting.
  - Dr. Ponder asked if it would be best to identify a speaker in the mental health area. Dr. Obamehinti said that we have a tentative speaker for the mental health topic.
  - Dr. Ponder asked if there wouldn't be enough time for more speakers.
  - Dr. Obamehinti states that the council might not have enough time for a 2<sup>nd</sup> speaker, it's up to them.
  - Dr. Obamehinti reminded council that the State Plan must be completed by November 1<sup>st</sup> and that it had to probably be submitted earlier so that agency staff could review it.
  - Rachel Wiseman said that if they have a speaker in mind they should get that information to them by February 1<sup>st</sup>.

- Ms. Rachel Wiseman also said that everything that will be included in the priorities will need to be fleshed out by the April TDC meeting and that writing assignments will need to be finished shortly thereafter so that agency can put together a draft. She reemphasized that the concepts and activities and ideas within the priorities need to be concrete by the end of the April TDC meeting.
- Dr. Ponder pointed out that there may be bills introduced in the legislative session during this time that could be relevant.
- Dr. Christine Wicke asked who sets the frequency and time limit of the council meetings as she thinks that the council would benefit from having more than one quarterly
- Dr. Obamehinti responded that the Statutes were what set the quarterly nature of TDC meetings. She then said that the council can appeal to get that changed.
- Dr. Wicke stated that she would love to meet more often
- Dr. Pena-Purcell said that that’s why we’re having the between-council-meeting workgroups. She also said that there’s people who have made years-long commitments with their terms with the understanding that the TDC meetings are quarterly. She said that she agrees that it would be nice to have more time to work together and that there might be a way to keep meetings quarterly but get good work accomplished still.
- Dr. Obamehinti responded that she suggests to Dr. Wicke that we focus on the State Plan first.

**Agenda Item 11: Adjournment**

- Dr. Feyi Obamehinti stated that this was her last meeting with the council and that her term has expired. She thanked God, the Governor, Senator Hancock, the current and past council members, agency staff, stakeholder agencies, leadership teams on the different state agencies. She said that it’s been a great journey serving Texans and that the council has accomplished a lot. She said that she wanted to thank her family and friends for being patient as she had to leave for meetings. She assured the Council that the Governor’s office will appoint a new chair.
- Dr. Gary Francis, Dr. Stehen Ponder and Mr. John Chacón all thanked Dr. Obamehinti for her service.
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- Dr. Feyi Obamehinti, Chair, adjourned the meeting at 4:54 p.m.

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Below is the link to the archived video of the January 12, 2023, Texas Diabetes Council will be available for viewing approximately two years from date meeting posted on website and based on the HHSC records retention schedule.

[Texas Diabetes Council](#)