

**Texas Diabetes Council  
Meeting Minutes  
April 22, 2021  
1:00 p.m.**

**Location: Microsoft Teams Live Event**

Table 1: Texas Diabetes Council member attendance Thursday, April 22, 2021.

NAME	IN ATTENDANCE
Dr. Mitchel Abramsky (Non-Voting)	No
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)	No
Dr. Kathy LaCivita	No
Ms. Aida (Letty) Moreno-Brown	Yes
Ms. Averil Mullins (Non-Voting)	Yes
Dr. Feyi Obamehinti	Yes
Dr. Stephen Ponder	Yes
Dr. Ninfa Pena-Purcell	Yes
Ms. Ardis Reed	No
Mr. Jason Ryan	Yes
Ms. Maryanne Strobel	Yes
Dr. Christine Wicke	Yes

**Agenda Item 1: Welcome**

Dr. Feyi Obamehinti, Chair of the Texas Diabetes Council (TDC), convened the meeting at 1:04 p.m. and welcomed everyone in attendance. She expressed her thanks to Dr. Kathy LaCivita, Ms. Joan Colgin and Mr. David Sanders for their service to Council, and congratulated Ms. Aida "Letty" Moreno-Brown on her reappointment. Dr. Obamehinti also announced that Council will be sending a plaque to Dr. LaCivita in recognition of her leadership.

Dr. Obamehinti introduced Ms. Sallie Allen, HHSC, Advisory Committee Coordination Office, to provide logistical announcements.

**Agenda Item 2: Introduction of New Members**

Dr. Obamehinti introduced the new members, Dr. Ninfa Pena-Purcell and Ms. Maryanne Strobel and asked them to provide a brief history background and why they wished to serve on Council. She proceeded and asked the remaining members to introduce themselves with a brief background for the new members.

### **Agenda Item 3: Roll Call, Excused Absences, and Determination of Quorum**

Ms. Sallie Allen, HHSC, Advisory Committee Coordination Office, stated Ms. Ardis Reed, Ms. Diane Kongevick, Dr. Kathy LaCivita and Dr. Mitchel Abramsky provided notice they would not be in attendance for the meeting. Ms. Allen conducted a roll call of the members and at the same time, requested their approval of the excused absence of the four members noted.

Ms. Allen conducted a roll call and determined a quorum was present. Members also acknowledged and approved the absence of the four members recognized.

### **Agenda Item 4: January 28, 2021, Meeting Minutes**

Ms. Allen introduced the January 28, 2021, meeting minutes and asked if there were any edits from the members. Dr. Obamehinti provided an edit to Agenda Item #9 and noted the correction should read, "Ms." instead of "Mr." Ardis Reed.

**MOTION:** Dr. Ponder motioned to approve the January 28, 2021, meeting minutes with the correction provided. Dr. Obamehinti seconded the motion. Ms. Allen conducted a roll call vote and the motion carried with no objections or abstentions.

### **Agenda Item 5: Liquid-Stable Glucagon for Severe Hypoglycemia**

Dr. Obamehinti read a disclaimer and re-emphasized that the presentation was for educational purposes only and the Texas Diabetes Council and the Workgroup members do not endorse products or services that may be presented.

Dr. Obamehinti proceeded to introduce Dr. Kunai Ramani and Mr. Bill Asbury, Xeris Pharmaceuticals. Dr. Ramani reviewed a PowerPoint presentation, *Gvoke and Severe Hypoglycemia*.

#### **Highlights included:**

- Severe hypoglycemia (SH) occurs in both persons with Type 1 diabetes mellitus (T1DM) and Type 2 diabetes mellitus (T2DM).
- 30-40% with T1DM experience 1-3 severe hypoglycemic events/year
- Severe hypoglycemia has greater impact on patients with T2DM; there are 20 times more patients with T2DM than T1DM.
- Approximately 25% of those with SH are hospitalized, and less than 10% of those patients fill a glucagon prescription after ER visit.
- Detailed evidence of the medical cost burden of hypoglycemic events was identified from 14 studies for both T1DM and T2DM episodes requiring assistance.
- 69-94% of glucagon emergency kits (GEK) used had administration challenges and failed with the marketable injectable GEK.
- Gvoke pre-filled syringe (PFS) and Gvoke HypoPen, the first ever premix/prefill liquid glucagon.
- Out of 16 participants use of glucagon autoinjector (GAI) vs. GEK injections, favored GAI 14 to 5.
- The functional efficacy of a glucagon rescue pen and Gvoke PFS significantly reduces user errors and may reduce utilization of emergency services and in/outpatient costs.

**Members discussed:**

- Cost and shelf-life of GVOKE devices
- Insurable and accessibility through Medicaid, Medicare and commercial
- Current data related to lower usage rate of glucagon products.

**Agenda Item 6: Texas Diabetes Council Mission**

Dr. Obamehinti reviewed the Chair letter with Council, which outlined five key factors related to the effectiveness of Council and that of DSHS as a supporting governmental agency. She presented these topics to Council for discussion and approval.

**Highlights included:****1. New Texas Diabetes Council Visual:**

- The infographic was shared with agency leadership, and they think it is a great idea. It is simple, straightforward and will communicate Council's mission.
- Dr. Ponder provided overview of the infographic he created for Council's mission.
- Members reviewed the infographic and recommended to:
  - Turn arrows inward to reflect the mission is responding to those issues; and
  - Revise left box to read, "Advise Texas legislature on needed legislation on diabetes."
- Discussion about revising Council's mission statement to expand beyond education services will be tabled for another meeting.

**MOTION:**

Dr. Obamehinti requested a motion. Dr. Ponder motioned to approve and accept the infographic with the edits suggested. Ms. Maryanne Strobel seconded the motion. A roll call vote was conducted, and the motion unanimously passed with no objections or abstentions.

**2. New Workgroup Times:**

In alignment with legal and operational requirements of DSHS, beginning July 2021, Council and its workgroups will meet on the fourth Thursday of each quarter. This will ensure that DSHS support staff are not working outside normal office hours and reduce the number of travel days for Council members. Members will be reimbursed for the overnight accommodations in accordance with travel policy.

**3. New Workgroup Leaders:**

In alignment with Council statute, each workgroup is required to be led and facilitated by a Council member and a volunteer. This will begin in July, and the following persons were proposed to serve in these roles:

- Advocacy and Outreach: Jason Ryan and Veronica De La Garza
- Health Professional and Outcomes: Dr. Steve Ponder and Dr. Shannon Brow

**4. New Workgroup Structure:**

Beginning July, workgroups will have a theme for discussion at their meetings. This will ensure effective facilitation, action plans and measurable outcomes.

Theme/topics will be determined for the remainder of 2021 and will be communicated with members.

#### **5. New Timeline Calendar:**

A calendar (Excel format) will be created and utilized to capture important deadlines related to Council business. Deadlines for all pertinent information pertaining to a meeting (e.g., Council, workgroups) will be recorded in the calendar. All Council members will have access to the calendar and will be responsible for ensuring deadlines are met and guidelines are followed. This includes submission of topics, presentations, internal/external presenters, etc. This process will ensure the efforts and effectiveness of both Council and DSHS are successful and productive.

#### **MOTION:**

Dr. Obamehinti motioned to adopt the four proposed changes: 1) new workgroup times, 2) new workgroup leaders, 3) new workgroup structure, and 4) new timeline calendar. Dr. Ponder seconded the motion. A roll call vote was conducted, and the motion passed unanimously with no objections or abstentions.

#### **Agenda Item 7: 2021 State Plan for Diabetes and Obesity Treatment**

Dr. Obamehinti reviewed the PowerPoint handout which outlined the 2019 and 2021 TDC priorities and opened the floor for discussion.

#### **Highlights included:**

- Reiterated Council will develop and implement a state plan and the supporting agency will provide research services and assist with preparing reports.
- Recommendations and comments regarding the list of 2021 priorities were:
  - Remove equalization of COVID-19 vaccine for all persons with diabetes.
  - Include a section in report related to lessons learned during pandemic as it relates to inequality and inequity.
  - Rephrase bullet 5 as: Increase Access to Automated Insulin Delivery and Continuous Glucose Monitoring System or Augmented Insulin Delivery Devices.
  - Members address legislative staff on T1 and T2 educational differences.
  - Coordinate with Governmental Affairs unit about the dates the legislative hearings are on Bills that relate to diabetes topics, Council members go and provide testimony.
  - Look at current legislative hearing on Health Care Pharmacy, possibly provide testimony.
- Ms. Doyle clarified for the 2019 priorities, Council would provide an update on the work done in alignment with those priorities (e.g., TEKS update addressing obesity and prediabetes in the school-aged children). For the 2021 priorities, Council would outline their recommendations on the work to be done as it relates to each task priority area.
- Although the writing team has been established, all Council members are welcome to share their knowledge and expertise on state plan priorities.

- Ms. Doyle will provide current, publicly available data to the writing team to assist with drafting a cohesive report.

Based on these comments, the discussion concluded and moved to vote on the proposed amendments.

**MOTION:**

Dr. Obamehinti motioned to adopt the proposed amendments listed above to the 2021 State plan. Dr. Ponder seconded the motion. A roll call vote was conducted, and the motion passed unanimously with no objections or abstentions.

**Agenda Item 8: State Agency Representatives**

Dr. Obamehinti introduced the State Agency representatives to provide updates to the members.

**a. Department of State Health Services**

Dr. Kelly Fegan-Bohm reiterated her thanks to Dr. LaCivita for her leadership of the Texas Diabetes Council during her six-year tenure and wish her all the best in her future endeavors. She also congratulated Dr. Obamehinti on her appointment as the new chair of the Texas Diabetes Council, Miss Moreno-Brown on her reappointment to the Texas Diabetes Council and welcomed Dr. Purcell and Ms. Strobel to the Texas Diabetes Council. DSHS is happy to have them on Council and looks forward to working with all of them.

She turned the floor over to Ms. Kelsi Dilley to provide program updates. Ms. Kelsii Dilley, Diabetes and School Health Branch Manager, DSHS, provided the following update.

**Highlights included:**

- The 87th Regular Legislative Session began on Tuesday, January 12.
- The comprehensive border health related bills (SB 116 and companion HB 727) included a diabetes education and screening component along with obesity and other chronic diseases. It has been referred to the Senate Health and Human Services committee and the House version was left pending in committee.
- SB 1049, relating to demonstration programs for childhood obesity and chronic disease prevention in certain border counties, was filed in March. This bill is almost identical to SB 1313 from the 86th Session. It does not specifically mention diabetes, but it should have an impact if the bill passes this Session. This bill has also been referred to the Senate Health and Human Services Committee.
- Senate Bill 1 and House Bill 1 were recently released and are being reviewed by our Chief Financial Officer and Division Finance Analyst. The 5% reductions that were put forward by DSHS in October 2020 are reflected in these budget bills. Program has not received any further updates on these, except that this reduction is expected to move forward in the legislative process.

- **Program Updates**

- The Diabetes Prevention and Control Program hosted a state engagement call/webinar on March 9, and the University of Texas Medical Branch at Galveston presented strategies to retain participant attendance in diabetes prevention programs implemented virtually.
- The 2020 Response to the Texas Diabetes Council was published in March 2021 and is posted to the DSHS Legislative Reports and DSHS Diabetes Prevention and Control Program webpages.
- DSHS and HHSC are drafting the 2021 Assessment of Programs to Prevent and Treat Diabetes. This report and the 2021 State Plan for Diabetes and Obesity Treatment are due to the legislature on November 1, 2021.

**b. Employees Retirement System of Texas (ERS)**

Dr. Obamehinti advised there was no report for this agency.

**c. Health and Human Services Commission**

Dr. Larry Lewellyn, Associate Medical Director, HHSC Medicaid and CHIP Services, provided an update on behalf of Dr. Abramsky.

**Highlights included:**

- Continuous Glucose Monitoring
  - The Adjunct CGM policy draft is currently under leadership review.
  - Will be posted for 2-week public comment sometime in May.
  - On track to be presented at the May 25 rate hearing.
  - If no big changes are received, implementation would be September 1.
- DSMES
  - DSMES was approved by the Governance committee to move forward for further consideration on December 14, 2021, and it is in the queue with other topics awaiting review.
  - A couple of related bills (SB 2028 and HB 410) have been introduced this legislative session that may impact how a DSMES benefit would be administered, so we are also actively monitoring the progress of those bills.
  - Once legislative issues have been satisfied, about 18-24 months is anticipated to develop and have rate hearing.

**d. Teacher Retirement Systems of Texas**

Ms. Averi Mullins, Health Benefits Program Analyst Specialist, TRS, did not have anything to report. Hopefully in July they will have more to share after the legislative session ends.

**e. Texas Workforce Commission (TWC)**

Ms. Lisa Golden, MA, Vocational Rehabilitation (VR) Services Diabetes Specialist provided an update.

### **Highlights included:**

- Continue to work and connect with referral sources and individuals with a medical diagnosis.
- Conducting easy virtual fairs to connect individual with disabilities to jobs that work for them, or resources and services that could be provided for them.
- Next virtual fair is scheduled for May 4 and will address two groups:
  - For individuals – 1-hour session at 9:00am and 11:00am
  - For community partners – 30-minute session at 12:30 and 4:30pm

The session for individuals is focused on managing diabetes at work and how VR services can assist them, and it will include diabetes education as needed.

The session for community partners, diabetes educators, physicians, social workers is to provide them with information about VR services that would be beneficial to share with their customers, especially those living with complications of diabetes and COVID related disabilities. These are the people that can really benefit from VR services. We just need to get connected!

- Also, we can assist the older individuals who are blind, 55 or older, with services to help them remain independent in their home.
- Call the helpline, 512-936-3388 or send email to [oib.info@twc.texas.gov](mailto:oib.info@twc.texas.gov).

### **Agenda Item 9: Workgroups**

#### **a. Advocacy and Outreach**

Dr. Obamehinti introduced, Mr. Jason Ryan, TDC member, and co-facilitator of the Advocacy and Outreach workgroup. Mr. Ryan provided the following update.

#### **Highlights included:**

- Majority of meeting was spent on discussion of the state plan.
- Received update on therapeutic interference and have some tasks to follow-up on with legislative offices, to advance the topic.
- Theme topic for next meeting, will be focused on equity or inequity among our population of diabetes as it relates to education.
- Discussed several bills pending in the legislative session that relate to diabetes:
  - House Bill 18: state-sponsored program to reduce cost of insulin, other drugs for Texans.
  - House Bill 410: pre-authorization not required for diabetes treatment.
  - House Bill 1646: patient protected with regards to medication being switched for non-medical reasons
  - House Bill 1935: allows for 3/year emergency insulin refills.
  - House Bill 2668: ensures co-pay assistance patients can better afford their prescriptions.
  - House Bill 3922: mandates that information about insulin patient assistance programs be shared with patient.
- Recommendation to full Council to allow council members to advocate around these topics and testify on behalf of Council before the legislature to provide information that is beneficial to the legislators' decision to advance these items for Texans.

- Dr. Obamehinti asked for legal clarification as to what is permissible to allow representation of Council.
- Ms. Ashley Doyle provided a response from legal counsel, which stated that: In accordance with the statute, Council may advise the legislature on legislation that is needed to further develop and maintain a statewide system of quality education services for all persons with diabetes. Council comment or testimony is permissible, and the Council would need to explain how the legislation affects persons with diabetes. It is imperative that the member stay within the scope of Council duties under the statute.

Dr. Ponder expressed concern that some of the workgroup members were non-council members and would they be allowed to speak on behalf of Council. Dr. Obamehinti reiterated that Mr. Ryan is a Council member, and he would be voice of Council. Other non-members of the workgroup that testify represent themselves or another third-party, but do not speak on behalf of Council.

**MOTION:**

To accept the Advocacy and Outreach Workgroup to serve as a speaking voice on behalf of the Council at the legislative session on various bills brought forth that relate to diabetes and are within the scope of the Council’s statute and that it is strictly as a member of the Texas Diabetes Council.

Mr. Jason Ryan made the motion as stated. Dr. Obamehinti seconded the motion. A roll call vote was conducted, the motion passed unanimously, with no objections or abstentions.

**b. Health Professionals and Outcomes**

Dr. Obamehinti introduced, Dr. Stephen Ponder, TDC member and co-facilitator of the Health Professionals and Outcomes workgroup. Dr. Ponder provided following update.

**Highlights included:**

- Had update on the use of various hybrid closed-loop insulin pumping systems.
- Discussion about social determinants of health as they relate to adult obesity.
- Received two requests from a public member in the group to bring to the Council for consideration:
  - Endorsing the use of hybrid closed-loop insulin pump systems generically; and
  - Try to endorse various glucagon options to treat severe hypoglycemia.
- Considering this was Dr. Ponder’s first meeting to co-facilitate, they are working on theme for the remaining meetings and will get it to leadership soon.

Regarding the considerations mentioned above, Dr. Obamehinti reminded all council members of Council’s statute and what is expected with every

presentation that we have, it is only for education purposes and Council does not endorse any product or service.

### **Agenda Item 10: Announcements**

Dr. Obamehinti called for any announcements Council members would like to share.

- Dr. Obamehinti reconfirmed Mr. Jason Ryan and Ms. Veronica De La Garza will co-lead the Advocacy and Outreach workgroup; Dr. Stephen Ponder and Dr. Shannon Brow will co-lead the Health Professional Outcomes workgroup and will come up with their meeting theme for July and October meetings.
- We will review and vote on the adoption procedures for election of officers as we need to elect a vice chair for Council at July meeting. Ms. Doyle will send email and request your nominations for the vice chair position.
- Ms. Ardis Reed had excused absence for today because she is attending the Nebraska conference on Health Equity. She has agreed to provide the Council with a recap of that conference at the next meeting.

### **Agenda Item 11: Public Comment**

Public comment was received for the meeting.

Mr. Tim Hampton, Global Medical Affairs Department, Zealand Pharma

Mr. Hampton provided a written comment which he referenced in his oral comment. It related to information on Dasiglucagon which is a novel glucagon analog with aqueous solubility and has been studied in a comprehensive phase 3 clinical trial program.

### **Agenda Item 12: Next Meeting**

Dr. Obamehinti stated the next meeting is scheduled for Thursday, July 22 at 1:00 p.m. The meeting will be held virtually through Microsoft Teams.

Topics of discussion for the July meeting:

- Ms. Reed will give a recap of the Nebraska Health Equity conference.
- Reminder - members have access to the timeline calendar and can submit topics to the workgroups or Council based on the deadline provided.
- Workgroup updates on 2021 State Plan priorities are welcomed in the format of a summary progress update. These updates could then be used when preparing the report.
- Dr. Obamehinti reminded members to send their July meeting topics to Ms. Ashley Doyle.

### **Agenda Item 13: Adjournment**

Dr. Obamehinti thanked the members for their valuable input, the agency staff and facilitation team for their support, and the public for the participation. She adjourned the meeting at 3:54 p.m.

Webcast: <https://texashsc.swagit.com/play/04222021-1080>