Diabetes Advisory Council (DAC) Quarterly Meeting
May 17, 2016
Tampa, FL and Via Conference Call

Participants

DAC Members Present
- Christel Aprigliano
- Lisa Buckloh – on phone
- Elizabeth Cayson
- Joseph Chebli
- Chet Evans
- Larry Fox
- Leslene Gordon
- Bridget Jennings
- Nicole Johnson
- Marci Knauss – on phone
- Mark Kummer
- Pauline Lowe
- Jennifer Marks
- Bonnie Masterson – on phone
- Nancy Murphy
- Melvin Price
- Dorothy Shulman
- Janet Silverstein

DOH Staff
- Rahel Dawit
- Jamie Forrest
- Ade Oladokun
- Shamarial Roberson
- M.R. Street

Guests
- Elicia Coley, Agency for Health Care Administration (AHCA)
- Janicka Harris, AHCA
- William Hightower, Florida Osteopathic Medicine Administration (FOMA)
- Anastasia Albanese O’Neill, University of Florida
- Betty Springer, Florida Society of Medical Assistants – on phone
- Megan Thompson, AHCA – on phone

Meeting Summary

1. Welcome/Roll-Call
   - Dr. Marks welcomed members and guests. Ms. Street took roll.
   - Participants introduced themselves.

2. Dr. Marks asked for review and approval of the January 2016 meeting minutes.
   - Motion by Dr. Fox
   - Seconded by Dr. Evans
   - Minutes approved

3. Florida Department of Health (DOH) Bureau of Chronic Disease Prevention Update: Dr. Roberson and Ms. Street provided an update on diabetes-related initiatives in the bureau.
   - Diabetes Prevention Program (DPP) Hub – The American Diabetes Association is our statewide champion for diabetes prevention, promoting provider referral to CDC-recognized DPPs and increasing awareness of the importance of diabetes prevention through conference exhibits and professional journal articles. Next year, the hub will revise its outreach strategies and also will offer “seed money” to programs preparing to apply for recognition.
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- **DPP Social Marketing Campaign** – The University of South Florida is spearheading this initiative to raise awareness about prediabetes and the Diabetes Prevention Program. This campaign targets health plans (reasons for including DPP as a covered health benefit), providers (refer eligible patients to DPP), and persons at risk for prediabetes. Next year’s project will continue some initiatives but will focus on an in-depth evaluation of the first two years’ effectiveness.

- **Diabetes Self-Management Education (DSME) Hubs** – Three health councils provide coordination for mini-grant funding and provision of technical assistance to organizations to improve access to quality DSME services. Funds can be used to (1) improve infrastructure such as training for staff and purchasing curriculum; (2) prepare to apply for ADA recognition or AADE accreditation; or (3) establish a satellite location. Next year we will tweak the mini-grant funding application to make it easier to match applicants with the services and support they need. We will also provide funds for a DSME via telehealth project. We plan to fund at least one distance (provider) site and one originating (consumer) site during 2016-2017, but have not finalized details of the funding opportunity announcement.

- **DSME via Telehealth** – The Bureau has been working with HRSA, the State of Montana, and other partners to develop a webinar on using telehealth to provide DSME. The webinar is scheduled for June 21, 2:00 – 3:30 PM. A flyer is attached that includes registration information.

4. **Agency for Health Care Administration (AHCA) Bureau of Medicaid Quality Update:** Dr. Coley and Ms. Harris provided an update on diabetes-related initiatives in AHCA. A hand-out is attached. Highlights include:
   - Statewide Medicaid Managed Care
     - Successfully completed in 2014
     - Two components:
       - Medicaid Managed Medical Assistance Program
       - Long Term Care
   - Focused study on Diabetes
     - Did not have too much information as it related to disease management
     - Conducted a study/survey at the health plan level to determine what was being done
     - Used FY14/15 to align with DOH and DSGI timeframe
   - One plan selected diabetes (A1C testing and comprehensive diabetes care) for their PIP
   - Procedure codes for DSME reimbursement:
     - G0108 – individual classes
     - G0109 – group classes

5. **Department of Management Services (DMS) Division of State Group Insurance (DSGI) Update:** Ms. Street provided information about a DPP pilot program that was launched in Leon County in April 2016. The purpose is to measure effectiveness of the DPP when offered to state employees. The pilot project includes 200 participants (plus a waiting list of 40) who live or work in Leon County. Participants are equally divided between Capital Health Plan (CHP) members and Florida Blue members. The full, one-year program is provided at no cost to participants. Partners include DOH, DMS DSGI, Florida Blue, and Capital Health Plan.

6. **Public Comment**
   - No public comment.
7. Legislatively Mandated Report Workshop
   - Ms. Forrest reviewed the requirement for a report, the current status, and an overview of diabetes data (presentation attached). As a reminder, a requirement was added to the DAC statute in the 2015 legislative session, requiring a report be submitted to the Governor, President of the Senate, and Speaker of the House of Representatives by January 10 of each odd-numbered year (beginning in 2017). The report is to be developed by the DAC in conjunction with DOH, DMS, and AHCA. The report must cover all types of diabetes, which have been defined by the group as: Prediabetes, Type 1, Type 2, and Gestational. It will spotlight the public health consequences and financial impact of diabetes on the state, a description and assessment of the impact of current programs to prevent diabetes or delay its complications, a description of coordination among state agencies, and a detailed action plan for improving diabetes efforts in the state. The report will include:
     - Data illustrating costs and impact of diabetes (take data that you have)
     - Current benefits (what are you doing and where are the funds coming from to pay)
     - Collaborative efforts to address diabetes
     - Evidence-based recommendations for legislative action to reduce impact of prediabetes, diabetes, and diabetes-related complications
     - Estimated budget (cost recommendations or no cost)

   - The workshop focused on development of the action plan section of the report. Participants broke into three small groups: Prediabetes, Type 1, and Type 2. They discussed the four elements that the legislation requires to be addressed in the action plan:
     - Reducing and controlling the number of new cases of diabetes
     - Identification of proposed action steps to reduce the impact of all types of diabetes
     - Identification of expected outcomes if the plan is implemented
     - Establishment of benchmarks for preventing and controlling diabetes

   - Next steps: Bureau staff will synthesize the notes from the three work groups, complete the other sections of the report, and provide a draft to the DAC. This might be done in phases as the different sections are fleshed out.

8. Presentation – Dr. Joseph Chebli
   - Dr. Chebli gave a presentation called, “Diabetes Advisory Council: The Metabolic Surgeon Perspective.” The presentation was previously disseminated. Please email Ms. Street at m.street@flhealth.gov if you need her to email it to you.

9. Next Meeting – Ms. Street will send out a Doodle poll to determine the best date for the next meeting.

10. Adjourn – The meeting was adjourned at 3:30 PM.