

Mission:

To protect, promote & improve the health of all people in Florida through integrated state, county & community efforts.



Ron DeSantis
Governor

Joseph A. Ladapo, MD, PhD
State Surgeon General

Vision: To be the Healthiest State in the Nation

**Diabetes Advisory Council (DAC)
Quarterly Meeting Summary Notes
Date: May 21, 2024**

Participants (note if participants had called in)

DAC Members –

(Quorum is met)

- Joseph Chebli
- Bridget Jennings
- Nancy Murphy
- Melvin Price

Applicants

- Gregg Laskoski (ph)
- Jennifer Waskovich
- Lamont Allen

- Lucille Beseler
- Lynn Howard
- Francesco Vendrame

Guests

- Carmen Fabre Pedrero
- Edward Clark
- Sarah Grant
- Liezl Dobbins
- Amanda Dibley
- Adam Fundora

- Rodrigue Pierre
- Kathryn Kazmierski
- Stella Nemuseso
- Michele Connors
- Rituparna Pay
- Kyle Bauer
- Christopher Cogle
- Aaron Messer
- Melissa Vergeson
- Betty Springer
- Sara Lerner

DAC Members Absent

Excused

- Larry Fox

Unexcused*

- Marlon Honeywell
- Donald Grossman

* Any DAC members who tried unsuccessfully to participate by phone should email Sarah Grant (Sarah.Grant@flhealth.gov) so their absence can be marked as excused.

Welcome:

Thank you all for joining our May 21 meeting.

DAC Member Appointment Updates

- To-date there are a total of 15 applicants awaiting review from the State Surgeon General and Governor.
- Dr. Chebli reiterated the point that the DAC is an independent board from the Department of Health. A request has been made to allow the DAC Chair to send appointment

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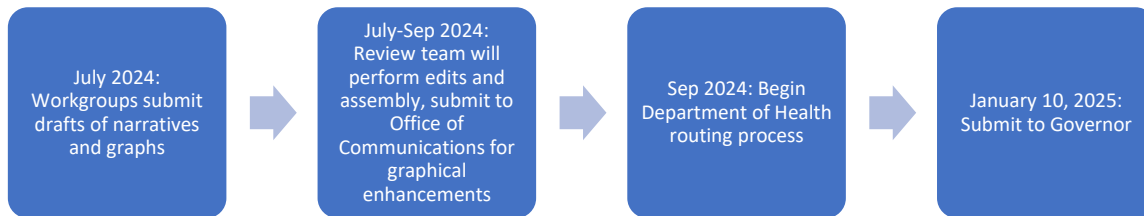
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recommendations to the State Surgeon General and the Governor for review instead of going through the Department of Health.

- DAC Voting will be conducted once the membership application review process has been completed. There will also need to be a vote to extend the Chair’s term for 1+ years; however, this would require a change in the Statute.

DAC Legislative Report:

- Must be submitted to the Governor, Speaker of the House, and Senate President on or before January 10, 2025.
- Working timeline:



- The goal is to reduce the report to a maximum of 10-20 pages, with more informative graphics added instead of paragraphs. There was a reminder of the suggestion to lead with the recommendations and be deliberate about tying the narrative back to the recommendations.
- **Action Item:** Review Stroke Registry and Cancer Reports for examples on more concise reports, data, and examples of graphics.
- **Action Item:** Review the 2023 report for context on what can be extracted and updated for the new report.
- There is still an opportunity for DAC members and meeting attendees to volunteer to work on a particular section of the legislative report.
 - **Action Item:** Please contact Dr. Chebli or Sarah Grant to volunteer for a section, if not already stated.
- Content should be streamlined and high-level, e.g. general categories of treatments. Workgroups can submit data requests then give feedback to clarify what parameters are needed.

Workgroup Reports

- Contributors were assured that they do not need to conduct extensive data research, but rather, focus on the narrative and submit data requests through Sarah Grant to the corresponding data teams. Contributors can make basic graphics and charts that can then be submitted to DOH’s Office of Communications for enhancement.

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- Section IV workgroup progress report: They will align recommendations with goals of the DAC, the preceding report narrative, and the CDC's 2320 grant. They will avoid recommendations that involve policy change or legislation. Major headings: early diagnosis, enhancing treatment strategies, education/promotion of self-management, implementing preventive measures to reduce complications.
 - o Tentative recommendations: blood-based A1c testing at annual exam; use of prediabetes risk test in pharmacies; promotion of Insulin Distribution Program and other existing resources; increase access to National Diabetes Prevention Program through Community Health Workers and others; hypoglycemia unawareness campaign; driver's license designation; streamlining the DAC member approval process.

Data Team Reports

Representatives from the Division of State Group Insurance, Agency for Health Care Administration, and Department of Health Epidemiology and Evaluation team discussed relevant sections of the legislative report.

- DSGI team shared preliminary data results pertaining to DSGI's total medical and pharmacy costs, as well as the cost of the Weight Management Pilot Program (WMPP). The feedback was that more context and explanation of the data was needed.
- A question was posed whether feedback on previous legislative reports has informed the current process. Feedback from policymakers and medical societies is that the report is too long and challenging to read thoroughly, hence the current goal of developing an abbreviated report.

Public Comment:

- Nancy Murphy shared about recent advocacy visit at the Capitol. A request was made for more information about diabetes from the CDC, beyond the National Diabetes Prevention Program. There was also a discussion about the prospect of standardizing type 1 diabetes screening in children and adolescents to potentially delay the onset. Nancy also recently represented the DAC in an introductory meeting with Blue Circle Health.
- Sara Lerner from Blue Circle Health introduced their public charity that provides free support to adults living with T1D. Flyer will be sent.
- There is an initiative through the Florida Podiatric Medical Society to distribute diabetic shoes and socks to eligible persons with diabetes in high-need counties in Florida. Flyer will be sent.

Future Scheduled Meetings:

Q3: August 20, 2024, from 2-4 p.m.: Diabetes Advisory Council Meeting

Q4: October 22, 2024, from 2-4 p.m.: Diabetes Advisory Council Meeting

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Calendar invites have been sent. Additional data meetings will be scheduled so that data teams can present their portions of the legislative report.

Wrap-up and Adjourn

- Workgroups were dismissed to their respective breakout rooms to collaborate on their section of the legislative report.

This conference call meeting was recorded. By staying on the conference call line, all participants agreed to be recorded.