Public Health Funding and Policy Committee Meeting

October 16th, 2024

Minutes

Committee Members Attending

Stephen Williams, MEd, MPA – Houston Health Department – Chair

Jennifer Griffith, DrPH, MPH – Texas A&M University

Julie St. John, DrPH – Texas Tech University

Lisa Dick, Brownwood-Brown County Health Department

Sharon Melville, MD, MPH – DSHS, Public Health Region 7

Sharon Whitley – Hardin County Health Department

Todd Bell, MD – Amarillo Public Health Department

Attendees:

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| Dr. Lillian Peake |  |  |
| Dr. Scott Milton |  |  |
| George Roberts |  |  |
| Shauntel Wright |  |  |
| Josh Hutchison |  |  |
| Dr. Sai Bala |  |  |
| Dr. Varun Shetty |  |  |
| Alma Allen Johnson |  |  |
| Abbey Melick |  |  |
| Katherine Wells |  |  |
| Christina Kubenka |  |  |
| Laura Ryon |  |  |
| Glenna Laughlin |  |  |
| Michael Comfort |  |  |
| Noah Chornyak |  |  |
| Crystal Biggs-Pope |  |  |
| John Chacon |  |  |
| Dana Bimberg |  |  |
| Aelia Akhtar |  |  |
| Dr. Cristina Garcia |  |  |
| Mohib Nawab |  |  |

Chair, Mr. Stephen Williams, called the meeting to order at 9:02 a.m. and the committee members present proceeded to introduce themselves.

**Public Health Provider- Charity Care Program Update:**

Mr. Mohib Nawab provided an update on the Public Health Provider Charity Care Program, highlighting the participation of 12 new local health departments (LHDs) in this year’s Cost Report training. He detailed the eligibility criteria for program participation and shared important dates and timelines, inviting questions to be directed via email to PHP-CCP@hhs.texas.gov.

Mr. Stephen Williams asked about the program’s expiration date, to which Mr. Nawab replied that it had been previously renewed and is scheduled to expire in 2027. The current program funding limit stands at $500 million, necessitating renewal in 2027. Mr. Williams further inquired if the renewal would align with the next legislative session and about the procedure for increasing funding due to increased participation. Mr. Nawab noted that the program falls under the jurisdiction of the Centers for Medicaid & Medicare Services (CMS) and mentioned that the program is currently in its third year, with funding based on second-year participation numbers, which included only charity care. To request increased funding for the 2027 renewal, evidence of additional participation and a comparison of actual versus projected expenditures would be required.

Ms. Lisa Dick questioned whether the $500 million in program funding was solely for public health or if it also included mental health services. Mr. Nawab clarified that the funding covers all immunizations, behavioral health, public health, and other services within the program.

**June 12, 2024, Meeting Minutes:**

Ms. Dick motioned to approve the minutes. Ms. Sharon Whitley seconded the motion. Minutes approved.

**Data Modernization/public health sharing Update:**

Mr. Josh Hutchison provided updates on several key areas, including the congenital syphilis website, vaccine updates, and public health data sharing. The new congenital syphilis website is now live on the DSHS site, and Mr. Hutchison encouraged everyone to visit it. Regarding respiratory infectious disease vaccines, he noted that the Respiratory Syncytial Virus (RSV) vaccine supply is stable this year with no supply constraints.

Updates on COVID-19 vaccines were also shared, including the conclusion of the CDC Bridge program in September 2024. Additional COVID-19 vaccines for adults are available through the VAOS application, and Mr. Hutchison advised providers to charge an administration fee for vaccines. He also informed the committee that Medicaid and CHIP will no longer reimburse administration fees for COVID-19 vaccines under EUA authority, affecting vaccines such as Novavax, Moderna, and Pfizer. He reminded all that last season’s COVID-19 vaccines should not be administered and must be disposed of.

Updates on public health data sharing, particularly related to the immunizations program, were provided. A record level of data sharing with all 50 contracted LHDs has been achieved since July 2024. Dashboards for visualizing and sharing ImmTrac data are being developed, although Mr. Hutchison cautioned that these dashboards should not be used for coverage rate assessments.

Dr. Sai Bala provided insights into data modernization and public sharing efforts, detailing the phases of the National Electronic Disease Surveillance System (NEDSS) project. Phase 1 involves delivering aggregate-level disease surveillance dashboards to each LHD, while Phase 2 offers line-level NEDSS provisional data in the Snowflake database. Support will be provided for the more technical Snowflake database queries. Updates on NIFI 4 enhancements were shared, with preliminary upgrades planned through the summer of 2026. These updates are based on feedback and system improvement needs.

Dr. Bala also discussed the HTI-2 Proposed Rule Comments, which require healthcare IT system upgrades to enhance interoperability. The proposal includes four major sections impacting public health: updated naming conventions in data exchange, new certification criteria for Health IT, USCDI V4 adoption, and FHIR-based API exchange. Dr. Bala noted that the timeline is aggressive, and DSHS, along with other states, is expressing concerns about the timeline and funding at the national level.

Dr. Bala also provided an update on data visualization efforts, indicating that Texas Health Data dashboards will become more robust by the last quarter of this year. These dashboards will eventually replace traditional EPI profile reports. The Texas Health Data site is designed to offer multiple data sets in a single area for customization and visualization. Dr. Bala highlighted updates to the congenital syphilis dashboards and new releases on the maternal and child health dashboard, emphasizing improvements for user ease and navigation.

In response to a question from Mr. George Roberts about the currency of data on public websites, Dr. Bala explained that data is refreshed annually, with the current public website featuring 2022 data. He also mentioned that the Centers for Disease Control and Prevention (CDC) must finalize data before it is published on public websites.

**Emerging and Infectious Diseases update:**

Dr. Varun Shetty provided updates on several health concerns. A new interactive dashboard for Respiratory Syncytial Virus (RSV) was launched in January, allowing users to explore specific data. DSHS hopes this tool has been beneficial for healthcare providers.

Dr. Shetty reported on hospitalization data, noting that the previous requirement for COVID-19 bed counts ended on May 1st, and participation in optional reporting was limited. However, a new mandate from the CMS reinstates the bed count reporting requirement for RSV, COVID-19, and influenza. In terms of influenza surveillance, public health officials are observing a return to more typical patterns for the virus.

Dr. Shetty also shared a national report on H5N1, highlighting a case in Nebraska where transmission occurred without animal exposure, raising concerns about potential unidentified cases. He emphasized the importance of enhancing traditional flu surveillance systems. The CDC considers the risk to the general population low but higher for those in contact with farm workers. Increasing sample submissions to public health labs is a goal. Regarding vaccines for farm workers, who traditionally have lower vaccination rates, the CDC has offered free immunizations. Expanding access to farm workers can alleviate local health strains during flu season. In partnership with the CDC, efforts are underway to provide flu vaccines to farm workers.

Dr. Shetty also updated on the Oropouche Virus, a zoonotic infection spread by flies and mosquitoes, with increased activity in Africa and Cuba. The CDC has issued travel guidance for pregnant women traveling to these regions. All 90 U.S. cases are travel-related from Cuba to Florida, with none reported in Texas. The Marburg Virus, a viral hemorrhagic fever similar to Ebola, is experiencing an outbreak in Rwanda with 62 cases and 15 deaths. Most affected individuals are healthcare workers. The CDC has issued a health advisory, and infectious disease experts are reviewing this guidance for distribution to DSHS.

In response to a question, Dr. Shetty confirmed that a level 2 advisory urging providers to practice enhanced precautions has been issued for Mpox.

**Public Comment:**

No public comment at this time.

**Timelines, Next steps, Announcements, and Future Meeting Dates:**

Mr. Williams sought suggestions for upcoming agenda items, as well as any final questions or comments. Glenna Laughlin provided an update, indicating that the final report is currently under review at the Commissioner’s office. Mr. Williams inquired about the cap on the Charity chair provider, questioning whether the amount could be increased administratively or legislatively, expressing a preference for an administrative adjustment.

**Adjourn:**

Dr. Jennifer Griffith motioned to adjourn the meeting, and Ms. Dick seconded the motion. The committee voted to adjourn and Chair, Mr. Williams adjourned the meeting at 11:15am.

Approved:

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Stephen L. Williams, Committee Chair Date