What to Expect in Your Congressional Meetings and Sample Meeting Outline

How should I prepare?

❖ You are the expert! This is an opportunity to share your knowledge about diabetes, clinical and self-management, and the role of the diabetes care and education specialist. Be confident in your ability to promote the specialty.

❖ At our congressional meetings, we will be discussing the Expanding Access to Diabetes Self-Management Training (DSMT) (H.R. 5804, S. 2203) Act. Click here to learn more about this legislation including the current list of cosponsors and key talking points. There will also be an opportunity to discuss other legislation like permanent telehealth expansion, the Treat and Reduce Obesity Act (TROA), and the PREVENT DIABETES Act.

❖ An important aspect of discussing the legislation is thinking about how policy impacts Medicare beneficiaries with diabetes and your ability to provide care as a diabetes care and education specialist. One of the most effective advocacy tools is sharing personal stories and discussing how this policy impacts or would impact people in their daily lives. Think about those personal experiences in advance of your meetings. This is especially important when we are discussing access to diabetes care in the context of the COVID-19 pandemic and the racial and ethnic health disparities that exist in our healthcare system.

❖ Prepare for the visit by reviewing the legislation, but do not get overwhelmed by legislative details. It’s okay to say “I don’t know” if you are unsure about the answer to a question. ADCES staff can easily assist you in following up with the congressional office to provide additional information.

❖ Your legislator may be interested in diabetes statistics for your state. Consider reviewing the American Diabetes Association’s website which details the Burden of Diabetes by State. You can share diabetes-related information from your state health department.

❖ Do a little research on your member of Congress. Do you share an alma mater or have any areas of shared interest? Does your member of Congress have a connection to diabetes in some way? This is a time to set political views aside and focus on ways to connect. Even if you didn’t vote for your representative or senator, their support of the legislation is still important.

What should I expect in the meeting?

❖ We will be conducting virtual meetings (Zoom or phone).

❖ Begin with introductions. Thank the staffer or legislator for meeting and offer to begin by introducing yourself and other colleagues on the phone. If you are joined by other diabetes care and education specialists, decide in advance the order in which people will introduce themselves. Tell the member of Congress or staffer where you are calling from. Ask them about their ties to the district – where they are from, etc.
❖ Be cognizant of the time. Ask the member of Congress or staff member how much time they have to meet. If you would like to continue the dialogue, consider this meeting a first step in developing a relationship with your member’s office. You can always follow-up via e-mail, telephone, or by scheduling another meeting.

❖ Share information about diabetes care and education specialists. Tell the member of Congress or staff member who you are, what you do, and how you help the community. For example, “I’m not sure how familiar you are with what a diabetes care and education specialist does, so let me tell you a little bit about my role at Chicago Hospital.”

❖ Now it’s time to get into the legislation. Discuss the key points of the legislation. Try to provide real life examples or personal stories to illustrate how the changes proposed in the legislation will help improve access to care for Medicare beneficiaries with diabetes. Stop periodically to see if there are any questions. (See page 3 of this document for a sample script/outline)

❖ Ask the member of Congress to sign on as a cosponsor of the legislation, or thank them if they have already signed on as a cosponsor of the legislation.

❖ Thank the member of Congress or staff member for their time. Offer to serve as a resource for any diabetes or healthcare related issues. Ask if there is anything you or ADCES can do to help their office.

How Should I Follow-up?

❖ The person you are meeting with will likely share their contact information with you. After the meeting, send a follow-up e-mail, thanking them for their time and sharing any follow-up information that they requested. It’s also great to offer your expertise should they have any future questions about diabetes. The staff member’s contact information will also be available in the meeting portal.
**Suggested Meeting Outline**

1. **Introductions.** Discuss who you are and where you are from in the district. Ask legislator about their own ties to the district.

2. **Discuss the role of the diabetes care and education specialist.**

3. **Tell the legislator why you are meeting,** e.g., “We’ve asked to meet today to discuss the Expanding Access to DSMT Act and to discuss the permanent expansion of telehealth services to better serve people with diabetes.”

4. **Provide background on diabetes self-management education and support (DSMES)/diabetes self-management training (DSMT):**
   a. What is DSMES/DSMT?
   b. DSMT refers to the Medicare benefit for DSMES
   c. Who provides DSMT?
   d. What is the purpose of the legislation? Despite the undisputed benefits of DSMT for people with diabetes – lower hemoglobin A1c, weight loss, improved quality of life, healthy coping skills and reduced health care costs – only 5 percent of Medicare beneficiaries with newly diagnosed diabetes used DSMT services. This legislation works to address some of the barriers to accessing DSMT.

5. **Discuss the legislation,** specifically the provisions below. Try to share personal stories where possible.
   a. Allow the initial 10 hours of DSMT during the first year to remain available until fully utilized.
   b. Remove restrictions to allow DSMT and Medical Nutrition Therapy (MNT) services to be provided on the same day.
   c. Exclude DSMT services from Part B cost-sharing (co-pay) and deductible requirements.
   d. Permit physicians and qualified non-physician practitioners who are not directly involved in managing an individual's diabetes to refer them for DSMT services. Examples include podiatrists, specialists treating a comorbidity like gangrene or vision loss, or an emergency room doctor.
   e. Establish a 2-year demonstration of virtual DSMT, potentially paving the way for future Medicare coverage of virtual DSMT services.
   f. Share information from our cost-savings analysis that shows long-term savings as a result of reducing barriers to accessing the DSMT benefit.

6. **Ask the legislator to sign on as a cosponsor of this legislation.**

7. **Discuss the need to expand telehealth services.** Refer to the ADCES issue brief for specific information. Share personal stories discussing your experience with telehealth. Reference the other bills TROA and the PREVENT DIABETES Act.

8. **Thank the legislator or staff member for their time.** Offer to serve as a resource.
9. **SAMPLE THANK YOU MESSAGE**: Follow-up with a thank you e-mail. Sample text is below. Please customize and/or edit to best reflect the context of your meeting. We have included links to studies that show the benefits of DSMT in case that came up during your discussions and other frequently asked questions:

**Sample ‘Thank You’ E-mail to Congressional Staffer**

Below is a sample e-mail to send after your congressional meeting. Only one person per meeting needs to send a follow-up e-mail. Feel free to tailor the sample message to best reflect the context of your meeting. We have included links to studies that show the benefits of DSMT in case that came up during your discussions and other frequently asked questions.

Dear XX,

Thank you for taking the time to meet with me (and list other names of those who joined your meeting) from the Association of Diabetes Care & Education Specialists. We appreciated the opportunity to meet with you to discuss the Expanding Access to Diabetes Self-Management Training (DSMT) Act, permanent telehealth expansion, the PREVENT DIABETES Act, and the Treat and Reduce Obesity Act- all important issues for health care providers and individuals with or ask risk for diabetes.

We hope Senator/Representative XXXX will sign on as a cosponsor of these important bills, especially the Expanding Access to DSMT Act. If you have any questions about the legislation, or about diabetes in general, please do not hesitate to reach out. We are happy to serve as a resource.

Thank you,

**Additional Information that Might be Requested:**

**What are the benefits of DSMT?**

I also wanted to share some additional information highlighting the benefits of diabetes self-management training:

- **NEW! Improving Quality Outcomes: The Value of Diabetes Care and Education Specialists**
- **CDC Diabetes Self-Management Education and Support (DSMES) Toolkit: How people with diabetes benefit from DSMES**
- **CDC Diabetes Self-Management Education and Support (DSMES) Toolkit: Overview of the Business Case**
- **Systematic Review – Effectiveness of Diabetes Education**
- **The Value of Diabetes Education**
What is the cost of the legislation?

This legislation does not yet have a score, but estimates show that passage of the Expanding Access to DSMT Act would result in an average cost savings of $1,276 per year per Medicare beneficiary and added cost-savings to people with diabetes. Click here for more information.

What is the impact of diabetes in my state?

- Diabetes statistics per state. ADA Resource
- UnitedHealth Foundation