Preparing For, Executing, and Following Up After Your Hill Day Meetings

*Intended only for PPF Attendees. Do not share this document with Hill offices.*

**How should I prepare?**

  - Please use the links above to check to see if the office has already cosponsored any of the bills. If they have, thank them for their support and focus your meeting on the other bills.

❖ Prepare for the visit by reviewing this document in its entirety and the [leave behinds](#) for more information on the bills and key talking points, but do not get overwhelmed by legislative details. You only need one person in your group who can explain each bill. **It’s okay to say “I don’t know”** if you are unsure about the answer to a question. ADCES staff can assist you in following up with the congressional office to provide additional information.

❖ An important aspect of discussing the legislation is thinking about how policy impacts your ability to provide care. One of the most effective advocacy tools is **sharing personal stories** and discussing how this policy impacts you or would impact people with diabetes, obesity, etc. in their daily lives.

❖ Look up information on your member of Congress. Are they a member of the [Diabetes Caucus](#)? Do they sit on any of the committees of jurisdiction for our bills?
  - Senate Finance
  - House Ways & Means
  - House Energy and Commerce

❖ Do personal 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? Even if you didn’t vote for your representative or senator, their support for our issues is still important, so try to find a connection.

❖ Your legislator may be interested in diabetes or obesity statistics for your state. Consider pulling 2-3 statistics to have ready a reference.
  - American Diabetes Association diabetes statistics per state
  - America’s Health Rankings: Diabetes in Older Adults
  - America’s Health Rankings: Obesity in Older Adults
  - CDC Adult Obesity Prevalence Maps

❖ There will be a breakout session during the PPF training where team members will get an opportunity to meet each other. Please use the resources on the following page to make a plan about who is saying what in each meeting.
What are some FAQs you might be asked?

❖ **What is the cost of the DSMT Act?**
Both the House Energy & Commerce Committee and the Senate Finance committee have requested a score, but we are still waiting for that from CBO. External 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. See the [scoring summary](#) and [full analysis](#).

❖ **What is the cost of the Treat and Reduce Obesity Act?**
While CBO has not released a final score for TROA, they have indicated that early analyses are pointing towards a cost in the tens of billions of dollars. The Obesity Care Advocacy Network (of which ADCES is a member) and other stakeholders believe this score does not reflect real-world data on prescribing and use of anti-obesity medications and are actively working to provide additional information to CBO to further inform their scoring for this legislation.

❖ **Have any committees considered the DSMT Act or TROA yet?**
The House Energy & Commerce Committee’s Health Subcommittee held a hearing on September 19, “Examining Policies to Improve Seniors’ Access to Innovative Drugs, Medical Devices, And Technology” that included both the DSMT Act and TROA. The DSMT Act was then amended and passed unanimously during the November 15 E&C Health subcommittee markup and then again during the December 7 E&C full committee markup. Through the course of the E&C markups, the DSMT Act was amended to only include 2 of the 5 original provisions: expanding referring providers and increasing flexibility for using the initial 10 hours. ADCES and the bill champions still support the full bill as originally introduced.
What should I expect in the meeting?

❖ We will be conducting virtual meetings (Zoom, Teams, or phone). All meetings will be accessed from the Advocacy Associates meeting portal that you will receive access to by March 4.
  o See how to use the portal: https://www.youtube.com/watch?v=ockRbaU3dyM

❖ 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.

Suggested Meeting Outline

1. Introductions: Discuss who you are and where you are from in the state/district. Ask staff about their own ties to the state/district.

2. Discuss the role of the diabetes care and education specialist in the care team.

3. Tell the legislator/staff why you are meeting, e.g. “We’ve asked to meet today during Obesity Care Week to discuss the Expanding Access to DSMT Act, the Treat and Reduce Obesity Act, and the permanent expansion of telehealth services to better serve people with diabetes and obesity.”
   a. If the legislator is a co-sponsor of the DSMT Act, thank them and skip to step 7.

4. Provide background on diabetes self-management education and support (DSMES)/diabetes self-management training (DSMT):
   a. What is DSMES/DSMT and who provides it?
   b. What is the purpose of the legislation? Despite the benefits of DSMT for people with diabetes, 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 bulleted provisions in the DSMT Act Leave Behind. Try to share personal stories, where possible.

6. Ask the legislator to sign on as a cosponsor of the DSMT Act.

7. Repeat steps 4-6 for the Treat and Reduce Obesity Act. Refer to the leave behind for specific information on the legislation, which would expand coverage to obesity counseling and obesity medications in Medicare. Share personal stories discussing your experience with helping people manage their obesity.

8. Repeat steps 4-6 for the CONNECT for Health Act and the need to permanently expand telehealth in Medicare. Share personal stories discussing your experience with telehealth and the impact that telehealth access has had on your practice over the last 4 years.

9. Thank the legislator or staff member for their time. Offer to serve as a resource.

10. Designate one person to complete a meeting report in the Advocacy Associates portal for each meeting.
How Should I Follow-up?

The contact information for the staffer you are meeting with will be available in the Advocacy Associates portal. After each meeting, designate one person to send a follow-up e-mail thanking the staffer for their time and sharing any materials discussed in the meeting. Copy everyone who attended the meeting on the email. It’s also great to offer your expertise should they have any future questions about diabetes.

Sample “Thank You” E-mail to Congressional Staffer

Below is a sample e-mail to send after your congressional meeting, copying the other attendees so they have everyone’s information. Tailor the message to reflect the content of your meeting. Reattach the Leave Behinds for the bills you discussed and any other materials you promised during your meeting.

Dear XX,

Thank you for taking the time to meet with me [and list other names of those who attended your meeting] from the Association of Diabetes Care & Education Specialists. We appreciated the opportunity to meet with you during Obesity Care Week to discuss the Expanding Access to Diabetes Self-Management Training Act (S. 1832/H.R. 3842), the Treat and Reduce Obesity Act (S. 2407/H.R. 4818), and the CONNECT for Health Act (S. 2016/H.R. 4189) [tailor to what you discussed and keep only House or Senate bill #'s]. These are all important issues for individuals with or at risk for diabetes or obesity.

[Insert any additional information requested during the meeting.]

We hope Senator/Representative XXXX will sign on as a cosponsor of these important bills. 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

The resources found below and throughout this guide are suggestions based on commonly asked questions. You may need to track down additional materials depending on what they ask for. Only send materials that come up during your meeting. You want to be responsive but not overwhelm them.

Here is some additional information highlighting the benefits of diabetes self-management training:

- Improving Quality Outcomes: The Value of Diabetes Care and Education Specialists
- CDC DSMES Toolkit: How people with diabetes benefit from DSMES
- CDC DSMES Toolkit: Building the Business Case for DSMES
- Systematic Review – Effectiveness of Diabetes Self-Management Education
- The Value of Diabetes Education