



CMS strives to improve access, quality, and experience of health care for individuals living with Sickle

States, the majority of whom are from Black or African American and Hispanic or Latino populations. While medical advancements, such as newborn screening and therapeutics, have transitioned SCD from

^{II} Additionally, many long-term health complications – including stroke, acute chest syndrome, and chronic end-organ damage – persist.

chronic pain and fatigue, hypertension, depression, chronic kidney disease, heart failure, liver disease, stroke, and epilepsy.^{III}

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- often as dually eligible enrollees in both Medicaid and Medicare underscoring the burden of disease among people enrolled in CMS programs and the importance of CMS action. Individuals with SCD often face challenges along their care journeys, including:
 - problems, including higher infection risks, lung problems, stroke, and pregnancy-related complications^{vii} y

Obstetric considerations, such as more frequent or more severe pain episodes and higher risk of preterm labor and of having a low birthweight baby

 Stigma that contributes to negative health care interactions and decreased physiological and psychological well-being^{xii}

designed to improve health outcomes and reduce health disparities for individuals with SCD. The Action Plan builds on the Health Equity pillar of the <u>CMS Strategic Plan</u> and the goals under the <u>CMS Health</u> <u>Equity Framework</u> and aligns with the mission and vision of the <u>CMS National Quality Strategy</u> and the <u>CMS Behavioral Health Strategy's</u>





analysis to potentially be included as analogous clinical scenarios under which Medicare payment cell transplantation for SCD would be a scenario under which Medicare payment could be made for inextricably linked dental services.

• Leveraging Multidisciplinary Teams to Promote Whole-Person Care



Equity and engagement

• Engaging Individuals and Communities with Lived Experience: CMS is committed to listening to the needs of individuals with SCD and identifying and addressing barriers to high-quality care. In

providers about SCD, including support and tools that are needed for improve access to care and realize better health outcomes and experience of care.

- Developing SCD Toolkit: In conj unction with the aforementioned roundtables, CMS plans to
 develop an SCD Toolkit that aims to strengthen the infrastructure for primary care and other
 care settings to care for people with SCD, improve care management, and assist providers with
 supporting the needs of people with SCD and other chronic conditions. Building on HRSA's portfolio
 of SCD programs, the toolkit will include provider-focused content as well as educational materials
 geared towards individuals with SCD and other community partners who serve them.
- Connecting individuals through Coverage to Care (C2C): <u>Coverage to Care</u> insurance literacy resources with consumer-friendly information in multiple languages that community partners and providers can use to help any person understand how to make the most

well as information about preventive care, telehealth, and behavioral health, Coverage to Care is currently expanding its care management portfolio to chronic care management, prescriptions, and other potential topics. These C2C resources can help people with SCD and other chronic conditions to understand health coverage, stay connected to care, and be an active part of their care plan.

Sharing educational resources
 resources – such as this <u>video</u> – about SCD through its website, listserv, partner emails, and social media to help providers deliver quality care to individuals with SCD.

Data and Analytics

- Examining state-level demographic, health characteristic, and utilization patterns

the At a Glance: Medicaid and CHIP Benef ciaries with Sickle Cell Disease (SCD), T-MSIS

Analytic Files (TAF) 2017 infographic, as well as the companion report - Medicaid and CHIP Sickle

Cell Disease Report, T-MSIS Analytic Files (TAF) 2017 to improve understanding of the diverse populations served by state Medicaid and CHIP programs and highlight opportunities for quality improvement.



CMS looks forward to working with partners across the health care system to increase access to services and improve the quality of care for people with SCD. More information may be found at <u>go.cms.gov/omh</u>.



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