

SICKLE CELL DISEASE

PARTNERS CALL TO ACTION IN MICHIGAN

PUBLIC HEALTH

- ❖ Assess services to document gaps in care and identify opportunities which benefit patients and families.
- ❖ Expand eligibility for Children's Special Health Care Services (CSHCS) to adults ages 21+ with sickle cell disease (SCD) to ensure that all patients have access to adequate health benefits for prevention and treatment.
- ❖ Promote preventative care, health education, and expansion of patient support services.

"Addressing the needs of adult patients has been a challenge for many years, however with the new opportunity to expand CSHCS eligibility for those with SCD over age 21, innovative efforts are being implemented to enhance and improve care quality. As CSHCS begins to look at innovative ways to improve the systems of care for those with medical complexity, addressing the significant challenges faced by individuals with SCD is imperative."

Lonnie Barnett, MPH, CSHCS Division Director - MDHHS

HEALTHCARE

- ❖ Improve health outcomes and patient experience through establishment of primary care and specialty providers knowledgeable in SCD care.
- ❖ Reduce barriers to a successful transition from pediatric to adult care for individuals between ages 14 – 21.
- ❖ Maximize service delivery through expansion of Children's Multidisciplinary Service clinics utilizing health professional teams to offer coordinated, comprehensive, family-centered, and community-based care.

"This is an impactful time in Michigan. Along with our partners and patients we sit at the precipice of creating real change in medical settings for people with sickle cell disease. We have a long way to go to reach health equity where sickle cell is concerned. There's no time like the present to create systematic change."

Dr. Wanda Whitten-Shurney, CEO/Medical Director, SCDA – MI Chapter

EDUCATION

- ❖ Increase utilization of timely and appropriate preventative care and disease modifying therapies.
- ❖ Support community-based services that provide advocacy, outreach, and resources to patients.
- ❖ Collaborate with stakeholders to develop policies and opportunities to reduce health inequities.
- ❖ Improve treatment adherence by increasing payer and provider educational opportunities about care.

"Although SCD was first recognized over 100 years ago, there is still a lack of knowledge about SCD.

A major focus of our efforts is to educate the public, patients, and health professionals."

Dominic Smith, MSA, Public Health Genomics Manager - MDHHS

DATA

- ❖ Partner with the Centers for Disease Control and Prevention to establish a comprehensive national and state data repository to improve incidence and prevalence data, better identify health disparities, evaluate strategies to improve quality of life, and lower healthcare costs.
- ❖ Convene statewide, multidisciplinary partnerships to guide the focus and dissemination of data findings.
- ❖ Develop quality of care measures for Michigan Medicaid Health Plans to incentivize quality improvement.

"The SCD Data Collection Program integrates a wide range of clinical and public health data for persons living with SCD in Michigan. By doing so, the Program will facilitate improvements in the management of SCD across the state."

Dr. Sarah Leasure-Reeves – UofM CHEAR