

Provider Information Sheet – Sickle Cell Disease Expansion



Children's Special Health Care Services (CSHCS) is excited to announce an eligibility expansion for adults ages 21 and older with sickle cell disease. The information contained in this document is intended to streamline enrollment of adults with sickle cell disease.

Initial Adult Enrollment: A medical report will be accepted from subspecialty, primary care, and emergency care providers for initial enrollment. *The medical report must be signed by the provider and include a treatment plan related to a sickle cell disease diagnosis.* Signatures and medical reports from nurse practitioners and physician assistants are also acceptable for the initial enrollment. If there is supporting documentation, such as a hemoglobin electrophoresis or other lab reports, please include with the medical report.

The initial medical eligibility period is up to two years if the initial medical is not from a hematologist. Enrollees who are not currently being seen by a hematologist will need to be seen by a hematologist within the first two years of enrollment to continue being medically eligible for CSHCS.

If the initial medical report is received from a hematologist, the medical eligibility period is up to five years.

CSHCS has more than 2,600 eligible diagnoses. Not all diagnoses can be included on this. The Office of Medical affairs reviews medical documentation related to diagnoses not included on this list. If the condition meets chronicity and severity criteria, they will deem the individual eligible and assign an eligible diagnosis code to the enrollee. Although there are only four eligible diagnoses for sickle cell disease, providers should submit clients with any sickle cell diagnosis for determination of eligibility.

Renewal: The initial two-year medical eligibility period is to allow the patient to establish care with a hematologist for their sickle cell disease. A medical report from a hematologist will be needed for renewal.

Medically Eligible Services: CSHCS will cover services directly related to the sickle cell diagnosis.

Diagnostic Evaluation: For individuals without Medicaid, CSHCS will pay for a diagnostic evaluation to determine if they have a qualifying sickle cell diagnosis. Diagnostic evaluations can be arranged through the local health department CSHCS nurse.

Backdating and Prior Billing: In most instances an initial enrollment into CSHCS can be backdated up to six months. However, the start date for adults ages 21 and older with a sickle cell diagnosis cannot begin before 10/01/2021. Billing can be submitted back to the effective date of the CSHCS coverage.

For more information regarding CSHCS or the enrollment process, please contact us at 517-241-7186