



Wes Moore, Governor · Aruna Miller, Lt. Governor · Ryan Moran, DrPH, MHSA, Acting Secretary

March 10, 2025

The Honorable Joseline A. Peña-Melnyk
Chair, House Health and Government Operations Committee
Room 241, House Office Building
Annapolis, Maryland 21401

RE: House Bill 1306 – Public Health - Sickle Cell Disease - Specialized Clinics and Scholarship Program for Medical Residents – Letter of Information

Dear Chair Peña-Melnyk and Committee Members:

The Maryland Department of Health (the Department) respectfully submits this letter of information for House Bill (HB) 1306 – Public Health - Sickle Cell Disease - Specialized Clinics and Scholarship Program for Medical Residents. HB 1306 requires the Department to establish three specialized clinics for the management and treatment of sickle cell disease and establish a scholarship program for medical residents who specialize in benign or classical hematology with a focus on sickle cell disease.

The Department recognizes the shortage of health care providers in Maryland who specialize in sickle cell disease, with existing providers concentrated in the Baltimore area. Sickle cell disease requires comprehensive and knowledgeable care to ensure that those affected by the disease have access to disease-modifying therapies to improve their quality of life. The Centers for Medicare and Medicaid Services have noted the shortage of trained hematologists and the lack of knowledge on the disease as two of the many disparities faced by individuals with sickle cell disease.¹ These disparities have led to a 20 year decrease in life expectancy for individuals with sickle cell disease.²

The Department receives \$1.4 million in appropriations to address the needs of Marylanders with sickle cell disease and sickle cell trait. For State Fiscal Year 2026, the funding will be used to support notifying families if their baby has been born with sickle cell trait, providing sickle cell trait testing for uninsured individuals, providing a surveillance and notification program to ensure children with sickle cell disease receive an annual screening to identify and treat children at a higher risk of stroke, and building a statewide network of community health workers to provide social support to those with sickle cell disease and their families. Furthermore, the Department will be conducting a needs assessment to identify the best service delivery model to

¹ CMS Sickle Cell Disease (SCD) Provider Toolkit. (2024).
<https://www.cms.gov/files/document/2024-10/cms-2024-omh-scd-provider-toolkit.pdf>

² Brennan-Cook, J., Bonnabeau, E., Aponte, R., Augustin, C., & Tanabe, P. (2018). Barriers to Care for Persons with Sickle Cell Disease: The Case Manager's Opportunity to Improve Patient Outcomes. *Professional Case Management*, 23(4), 213-219. doi:10.1097/NCM.0000000000000260

address the aforementioned gaps in care and identify jurisdictions of high priority. The findings from the needs assessment will inform the Department of further strategies to be taken.

While HB 1306 intends to address the critical gap in access to care, the needs assessment the Department will be conducting will provide important information on how to improve care delivery in the state including:


- 1) The roles and responsibilities of a specialized sickle cell disease anchor hub which would provide training and clinical consultation to the spoke sites, technical assistance in billing and coding as well as changes to the Electronic Health Records, and support developing or modifying clinical procedures and policies.
- 2) How sickle cell spoke clinics locations should be determined in the state to best serve residents.
- 3) The types of service needs for children and adults, including the transition of care as children enter adulthood.

Lastly, the proposed scholarship program may be more effective as a loan assistance repayment program. Medical residents have already completed their education and would not benefit from a scholarship. The Department also notes that there is no established body of evidence indicating that a financial incentive increases the number of physicians who specialise in benign or classical hematology; the effect of this initiative on the sickle cell disease provider workforce in Maryland cannot be estimated.

HB 1306 will have a fiscal impact of \$6,133,244 on the Department for the sickle cell clinics. As there are no federal funds currently available for the scholarship program, the Department did not designate any fiscal impact for that portion of the bill. This program would also require allocating for the scholarships and loan repayments themselves. The amount required for scholarships and loan repayments is indeterminate at this time.

If you would like to discuss this further, please do not hesitate to contact Sarah Case-Herron, Director of Governmental Affairs at sarah.case-herron@maryland.gov.

Sincerely,

A handwritten signature in blue ink that reads "Ryan B. Moran". The signature is fluid and cursive, with a horizontal line underneath the name.

Ryan Moran, DrPH, MHSA
Acting Secretary