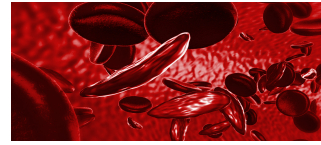


Association for the Prevention of Sickle Cell Anemia, Inc.
STATEWIDE ORGANIZATION (APSCA INC.)
P.O. Box 208 | Aberdeen, Maryland 21001
Email: 1982sicklecellassociation@gmail.com
APSCA Phone/Voicemail: (443) 327-9173



Established: 1982
501-C3 since 1987

TESTIMONY FOR HB0178

Public Health – Sickle Cell Disease – Specialized Clinics and
Scholarship Program for Medical Residents

Bill Sponsor: Delegate Patterson

Committee: Health and Government Operations

Organization Submitting: APSCA INC (Association For The
Prevention of Sickle Cell Anemia, INC)

Person Submitting: Sarahia M. Benn, President

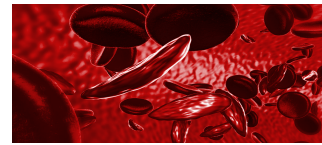
Position: FAVORABLE

Hearing Date: February 10, 2026

Dear Chairperson and Members of the Committee,

I am submitting this testimony in favor of HB0178 on behalf of APSCA INC. APSCA INC is one of the oldest nonprofit organizations in Maryland serving the sickle cell warrior community and is now restructured and reenergized to advance statewide systems reform. We are a member of the Maryland Statewide Sickle Cell Disease Committee, a member of the regional SINERGE Coalition, and one of only two Maryland-based organizations representing sickle cell patients at the national advocacy level(SCDAA).

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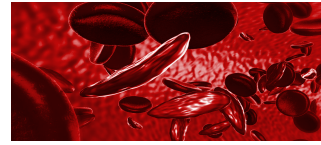


APSCA INC provides direct support services, education, awareness, and legislative advocacy. Our work spans the entire State — from the Eastern Shore to Southern Harford County, Baltimore City, Prince George’s County, Montgomery County, Charles County, and communities throughout Maryland. We operate at the intersection of direct service and policy reform because patients need both immediate support and long-term structural solutions.

Sickle cell disease affects an estimated 100,000 Americans and occurs in approximately 1 out of every 365 Black births in the United States (CDC: <https://www.cdc.gov/sickle-cell/data/index.html>). Despite being one of the most common inherited blood disorders, it has historically received disproportionately lower federal research funding compared to other genetic diseases that affect smaller or less racially impacted populations (NIH RePORT data: <https://report.nih.gov/>).

Maryland is home to thousands of individuals living with sickle cell disease, yet patients continue to face systemic barriers including limited access to hematologists, inconsistent standards of care, emergency department overreliance, and inadequate comprehensive clinics. National Academies reports have documented gaps in coordinated care and workforce shortages in sickle cell treatment (National Academies of Sciences, 2020: <https://nap.nationalacademies.org/catalog/25632/addressing-sickle-cell-disease-a-strategic-plan-and-blueprint-for-action>).

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This pattern of underinvestment has not been accidental — it reflects longstanding structural inequities in how diseases that disproportionately impact Black communities are prioritized. Correcting that imbalance requires intentional infrastructure investment.

HB0178 addresses two foundational needs in Maryland:

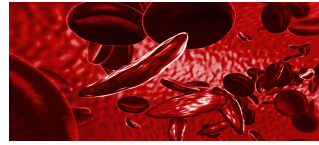
- Establishing specialized sickle cell clinics to provide comprehensive, coordinated, evidence-based care
- Creating a scholarship program to grow Maryland’s pipeline of classical hematologists specializing in sickle cell disease

Specialized clinics will reduce preventable hospitalizations, improve continuity of care, integrate behavioral health and social support services, and create statewide care standards. Workforce scholarships will directly address the shortage of physicians trained in classical hematology with sickle cell expertise — a shortage repeatedly identified in national workforce assessments.

The required FY2028 appropriation of \$6,138,000 is a strategic investment in preventative infrastructure. Without specialized outpatient systems, Maryland will continue to incur significantly higher downstream costs through emergency utilization, unmanaged complications, and avoidable hospital admissions.

HB0178 represents a measurable step toward correcting structural gaps in Maryland’s sickle cell system of care. It strengthens

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infrastructure, builds workforce capacity, and affirms that the lives of sickle cell warriors warrant specialized, sustained investment.

APSCA INC respectfully urges a FAVORABLE report on HB0178.

Respectfully submitted,

Sarahia M. Benn
President, APSCA INC

1982sicklecellassociation@gmail.com

(Dedicated to Black History Month)

Black History Month reminds us that health equity requires policy action, not rhetoric.

[Dr. Martin Luther King Jr. stated:](#)

[“Of all the forms of inequality, injustice in health is the most shocking and the most inhuman.”](#)