# 2023 National SCD Policy Forum





### Opening & Welcome

11:00 - 11:10 am ET



### **Ashley Valentine**

President & Co-Founder Sick Cells



### **Regina Hartfield**

Executive Director Sickle Cell Disease Association of America, Inc. (SCDAA)



### Dr. Lakiea Bailey

Executive Director

Sickle Cell Disease Community Consortium

# Today's Agenda

Scan to view the full program book:



DAY 1 AGENDA   MARCH 21, 2023		
11:00-11:10am ET	Kick-Off & Welcome	
11:10-11:20am ET	Keynote Address Andy Lord, Sickle Cell Foundation of Georgia	
11:20-12:20pm ET	Panel: "Policy Efforts to Promote Comprehensive Care for SCD"	
	Dr. Andrew Campbell, Children's National Dr. Titilope Fasipe. Texas Children's Cina Glass, Dreamsickle Kids Foundation Stephanie Kaplan, American Society of Hematology	
	This panel discussion will define a comprehensive care model for sickle cell disease (SCD) and explore the plan of action to develop SCD care centers and networks.	
12:20-12:40pm ET	Guided Break Dr. Marjorie Dejoie-Brewer, Vertex	
	10-minute guided meditation + 10-minute free break	
12:40-2:40pm ET	Hill Day Training Event Hosts	
	This session will highlight this year's federal priorities and allow attendees to practice their pitch through mock legislator meetings and regional breakout rooms in preparation for Day 2.	
2:40-2:45pm ET	The Next Generation	
2:45-3:00pm ET	Hear from the youngest SCD advocates on what inspires them. Closing Remarks	



## Thank you to our sponsors!





### Keynote Address

11:10 - 11:20am ET



### Andy Lord

Lobbyist, Sickle Cell Foundation of Georgia



# My Family's Experience

• Trait testing

Newborn screening & Follow-up

• Advocating for your health & your family



# **Turning Experience into Action**

- Identifying gaps
  - What is missing in your state?
  - What efforts are currently underway?
  - Do they relate to federal efforts?
  - · Can you look to another state's successes?

### Finding Champions

- Connecting with legislators & staying in touch
- Pairing your story with data & a plan



# **Turning Experience into Action**

- Building a state budget from \$0
  - Establishing relationships
  - Making the request
  - Following up on the request
- Implementing the budget
  - Notable programs
  - Program reporting

Learn more about the Sickle Cell Foundation of Georgia at www.sicklecellga.org





### Panel Discussion

11:20am - 12:20pm ET

**Q&A** 12:05-12:20pm ET

# "Policy Efforts to Promote Comprehensive Care for Sickle Cell Disease"

Time	Session Agenda
10 mins	Topic Introduction & Defining Key Terms
10 mins	Panel Introductions
30 mins	Moderated Discussion
10 mins	Questions from the Audience



This panel discussion will define a comprehensive care model for sickle cell disease (SCD) and explore a plan of action to develop SCD care centers and networks. This session will discuss:

1

4

• What components of comprehensive care are needed to deliver quality care to individuals and families living with SCD?

• What are SCD care centers, and how are the criteria determined?

• What actions are needed at local, state, and federal levels to overcome barriers to establishing SCD care centers?

• What strategies are clinics and policymakers using to address provider shortages in SCD?



### Definitions



# Let's start with defining key terms for the discussion...



### **Elodie Ontala**

Program Manager Sick Cells

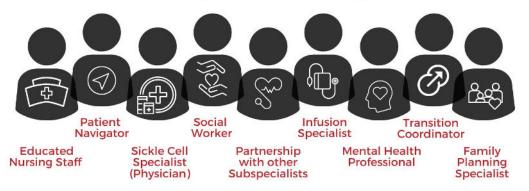


## What is Comprehensive Care for SCD?

Comprehensive care is **an approach that cares for the whole patient and all their needs.** Many professionals work together to co-manage a patient and ensure that **essential & support services** for SCD warriors are easily accessible.

### WHO IS A PART OF THE CARE TEAM?

SCD care requires a team made up of many medical disciplines. The following health care professionals are part of SCD care team at a typical SCD care center:





# What is a Sickle Cell Specialist?

A sickle cell specialist is someone who is:

knowledgeable of the **evidence-based guidelines** for SCD

- I trained in hydroxyurea management and transfusions
- I trained on screening for organ damage in SCD
- **aware of psychosocial** and cognitive issues in SCD
- experienced working with SCD patients
- I trained **in pain management** and on SCD emergencies
- attends SCD conferences regularly
- I mentored by an SCD specialist
- Continuing medical education on SCD every 2 years

\*Nine criteria defined by the NHLBI's SCD Implementation Consortium.



# What is a SCD care center?

A **SCD center** provides comprehensive, high-quality care for individuals living with sickle cell disease. SCD centers must meet certain requirements in staffing and services.

• Specialized care centers are sometimes referred as "centers of excellence," however currently there is no established criteria to be called a centers of excellence for SCD.

The National Alliance for Sickle Cell Centers (NASCC) supports sickle cell disease centers by setting standards of care, promoting guideline adoption, and recognizes SCD centers have the essential components needed to provide full spectrum disease care in their respective geographic regions.





# How are clinical practice guidelines used in SCD care centers?

One of the benefits of a care center model is to **improve and standardize patient care** and **promote the adoption of treatment guidelines** that reflect the newest evidence.

The American Society of Hematology (ASH) and other national organizations work together to set guidelines and standards to define quality care for SCD. With these guidelines, accredited centers can then provide a standard of care for SCD.





# What are examples of comprehensive specialty care networks?

- Chronic genetic diseases such as **cystic fibrosis** and **hemophilia** have networks of comprehensive specialty care:
  - •130+ Cystic Fibrosis Foundation-accredited care centers offer comprehensive, high-quality specialized care for cystic fibrosis.
  - **~141 federally-funded Hemophilia Treatment Centers (HTCs)** specialize in treating people with hemophilia across the country.

Although the population with SCD in the United States is over **double** that of hemophilia and triple that of cystic fibrosis, there is **no equivalent** system of care for SCD.



# What are current barriers to establishing SCD care centers?

Various barriers have been identified, including:

- The **underinvestment in federal funding** and attention has created challenges in establishing a network of SCD care centers.
- SCD specialists and providers specializing in nonmalignant hematology for adults are rare
- While most US urban areas have SCD pediatric **comprehensive care centers**, comprehensive care centers for adults living with sickle cell disease **are limited**
- Upon transitioning out of pediatric care, **adults encounter a lack of providers** knowledgeable in SCD and a fragmented healthcare system

## Program Book Resource

You can access The Comprehensive Care Model **toolkit** in your program books located on the event platform

#### NATIONAL SCD POLICY FORUM

#### THE CARE CENTER MODEL FOR SICKLE CELL DISEASE

WHAT IS A SCD CARE CENTER?	A sickle cell disease (SCD) care center provides comprehensive, high-quality care for individuals living with sickle cell disease. SCD centers must meet certain requirements in staffing and services.
WHAT IS THE	The care center model for sickle cell disease can ensure

GOAL OF SCD

CARE CENTERS?

The care center model for sickle cell disease can ensure that essential services and supports for SCD warriors are all in one place and that everyone has access to a sickle cell specialist to improve quality of life and care.

#### WHO IS A PART OF THE CARE TEAM?

SCD care requires a team made up of many medical disciplines. The following health care professionals are part of SCD care team at a typical SCD care center:





### **SESSION SPONSOR**





#### Christina Hartman | Moderator

Christina Hartman is the Senior Director, Government Affairs & Alliance Development at bluebird bio. Christina is an external affairs professional with deep background in policy, government relations, alliance building and issue advocacy.



#### Dr. Andrew Campbell | Panelist

Dr. Campbell is the Director, Comprehensive Sickle Cell Disease Program at Children's National Hospital where has led their approaches to workforce diversity, health equity, and inclusion. He has lectured in and out of the U.S. on issues related to the care and healthcare system approach to patients and families dealing with the effects of SCD.



#### Dr. Titilope Fasipe | Panelist

Dr. Fasipe is the Co-Director, Sickle Cell & Thalassemia Program at Texas Children's Hospital and Assistant Professor, Department of Pediatrics, Section of Hematology-Oncology, Baylor College of Medicine. Dr. Fasipe's goals are shaped by her desire to help children facing the hardships of a blood disorder.



#### Gina Glass | Panelist

Georgene' "Gina" Glass is the founder and Executive Director of Dreamsickle Kids Foundation, Inc, the first sickle cell disease (SCD) organization in the state of Nevada, founded in 2018. Gina is the mother of two, including one SCD Warrior. Georgene' has worked extensively in state issues.



#### Stephanie Kaplan | Panelist

Stephanie Kaplan is the Deputy Director of Government Relations and Public Health at the American Society of Hematology (ASH). Stephanie leads the development of ASH's priorities, policies and programs focused on public health issues and oversees ASH's engagement with federal partners.



Christina Hartman

Comprehensive Care at bluebird bio





Dr. Andrew Campbell

Comprehensive Care at Children's National





Dr. Titilope Fasipe

Comprehensive Care at Texas Children's





Gina Glass

Comprehensive Care at

Dreamsickle Kids





Stephanie Kaplan

Comprehensive Care at American Society of Hematology





# **Q1**

# What **components** of comprehensive care are needed to **deliver quality care** to individuals and families living with SCD?

# What kind of **expertise and roles** must the comprehensive care team represent?



## **Q2**

### What are the **essential next steps** in establishing a national network of SCD centers to **provide comprehensive** and community-based care for all SCD warriors?

Provider Community Policy perspective perspective





### Please submit your questions for the panel using the "Comments & Questions" function on your screen

### 10-minute Guided Break





### Dr. Marjorie Dejoie-Brewer

Medical Director & Strategist, Global Medical Affairs

Vertex Pharmaceuticals



### 10-min Free Break

We will resume at 12:40pm ET (11:40am CT) (9:40 am PT)

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## Hill Day Training

12:40-1:10pm ET



### John Otsuki

Government Relations Manager

SCDAA



### **Emma Andelson**

Senior Program Manager

Sick Cells



Time	Session Agenda
30 mins	Federal Priorities Training
20 mins	Meeting Platform Training
20 mins	Mock Meetings
50 mins	Breakout Room Practice Session





Legislator is someone who makes laws.

Other names include member of Congress, a policymaker, or a lawmaker.

The primary function of **Congress** is to create and modify legislation.

- Legislation is introduced as bills.
- If approved, it becomes a law.

**Legislative staff** (or staffers) are staff hired by legislative offices to conduct research, draft legislation, give advice, and make recommendations.

A **constituent** is someone who lives in a particular constituency, especially someone who is able to vote in an election.



## U.S. Government 101

### The Senate

- "Senators"
- 100 members with two Senators per state
- 6-year terms
- Represent their entire state (two senators per state)

### The House of Representatives

- "Representatives," "Congressmen," Congresswomen" or "Members of Congress"
- 435 members with varying members per state
- 2-year terms
- Represent a congressional district (number of districts differ in each state)



# **NEW:** Legislative Request

The Sickle Cell Disease Comprehensive Care Act will be re-introduced today.

**Sponsors:** Representatives Danny Davis (D-IL) and Michael Burgess (R-TX) and Senators Cory Booker (D-NJ) and Tim Scott (R-SC)

- Establishes a demonstration program through the Centers for Medicare and Medicaid services (CMS) to improve access to quality care for SCD Warriors enrolled in Medicaid.
  Identical to the version introduced in December of 2021.



# **NEW:** Legislative Request

The **Sickle Cell Disease Comprehensive Care Act** directs CMS to create a demonstration program in up to 10 states to improve access to comprehensive, high-quality, outpatient care for SCD Warriors enrolled in Medicaid.

- Improve patient access to clinical, mental health, and ancillary and support services
- Promote coordination through multidisciplinary teams
- Provide support to community-based organizations, community health centers, hospitals, and academic health centers
- Develop infrastructure to recruit providers and provide specialized training
- Appropriations: \$25M (planning grants) & \$50M (CMS)



### **This Year's Asks**

All asks this year will be referred to as **FY24 asks**, because they are for the federal government's NEXT fiscal year.

- Appropriate \$25M for the CDC Data Collection Program
- Appropriate \$15M for the HRSA Demonstration Program



### 2023 (FY24) "Leave Behind"



As you consider programmatic appropriations for Fiscal Year (FY) 2024, we respectfully request that you include robust funding to support and expand critical initiatives for research, surveillance, and treatment of ickle cell disease (SCD).

#### HRSA SICKLE CELL DISEASE TREATMENT DEMONSTRATION PROGRAM (SCDTDP)

SCDTDP is a HRSA grant program with the following goals:

- Increase the number of clinicians or health professionals knowledgeable about the care of SCD
- Improve the quality of care provided to individuals with SCD
- · Improve care coordination with other providers
- Develop best practices for coordination of services during pediatric to adult transition.

to adult transition.
Impact: Continued program efforts will accelerate the identification
and implementation of best practices and procedures for SCD care.

FY24 REQUEST

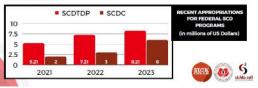
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#### CDC SICKLE CELL DATA COLLECTION (SCDC) PROGRAM

The Sickle Cell Data Collection (SCDC) program gathers health information from multiple sources to determine how many people live with the disease in a particular state.

- · The SCDC currently covers 11 states with plans to expand.
- The goals of the SCDC include learning where people with SCD live. gathering information on the transition from pediatric care to adult care, gathering demographic information, and much more.

Impact: Data collection is necessary to improve national incidence and prevalence data: better identify health disparities: and evaluate strategies to improve quality of file and lower costs associated with treating the population.



### FY24 Federal Requests Leave-Behind

Walk through



### FY24 Leave-Behind (Pt 1)



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- Improve care coordination with other providers
- Develop best practices for coordination of services during pediatric to adult transition.

Impact: Continued program efforts will accelerate the identification and implementation of best practices and procedures for SCD care.



### HRSA =

Health Resources & Services Administration

SCD = Sickle cell disease

#### TDP =

Treatment demonstration program



## FY24 Leave-Behind (Pt 1)

#### CDC SICKLE CELL DATA COLLECTION (SCDC) PROGRAM

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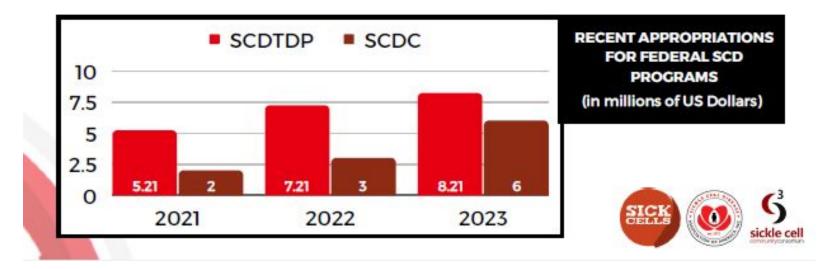
#### CDC =

Centers for Disease Control & Prevention

> SCDC = Sickle Cell Data Collection



### FY24 Leave-Behind (Pt 1)



Funding has increased since 2021, but needed levels of funding have not been met.



### 2023 (FY24) "Leave Behind"

FY24 Federal Requests Leave-Behind

Page 2

PAST	FEDERAL SUPPORT FOR	SCD
11	The purpose of this guide is provide information on past support fo disease at the federal level.	r sickle cell
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PAST SU	CESSES	
<ul> <li>Signed Into</li> </ul>	Ie Cell Anemia Control Act of 1972 (PL 92-294) law 5/16/1972 by President Richard Nixon esislation for SCD	
<ul> <li>Established</li> </ul>	guidance for SCD education, screening, testing, counseling, and resear first federal programs for SCD	ch
Prevention, a	Il Disease and Other Heritable Blood Disorders Research. nd Treatment Act of 2018 (PL 115-327)	Surveillance
<ul> <li>Sponsors: Se IL). Congress</li> </ul>	law 12/18/2018 by President Donald Trump nator Tim Scott (R-SC) and Senator Cory Booker (D-NJ). Congressman man Michael Burgess (R-TX)	
Administrat	s SCD prevention and treatment grants awarded by the Health Resour- ion (HRSA) he Centers for Disease Control and Prevention to award SCD surveillar	
<ul> <li>states. acad</li> <li>Passed &amp; Fu</li> </ul>	mic institutions and non-profit organizations nded	
PAST AT	TEMPTS: DEAD BILLS	
<ul> <li>Introduced</li> </ul>	II Comprehensive Care Act (H.R. 6216/S. 3389) n December 2021 by Representatives Davis (D-IL-7) and Burgess (R-TX- s Booker (D-N2) and Scott (R-SC) in the Senate	26) in the Hou
· Directs the	Centers for Medicare and Medicaid Services (CMS) to create a demonst ess to quality care for SCD Warrlors enrolled in Medicaid	ration to
The Sickle Co	Il Care Expansion Act (H.R. 7177/S. 4425)	
Senators Va	n March 2022 by Representatives Crist (D-FL-13) and Lee (D-CA-13) in the h Hollen (D-MD) and Booker (D-NJ) in the Senate (June 2022)	
<ul> <li>Hopes to in scholarship</li> <li>Died in 117ti</li> </ul>		ss and
	Il Disease Treatment Centers Act (H.R. 8855/S. 4866)	
and Represe     Establishes	n September 2022, by Senators Van Hollen (D-MD) and Booker (D-N3) intative Lee (D-CA-13) Davis (D-IL-7) and Adams (D-NC-12) in the House a hub-and-spoke model for caring for SCD Warriors and requires collab	
<ul> <li>Died in 117tl</li> </ul>	nd nonprofits	and a
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### FY24 Leave-Behind (Pt 2)

### FEDERAL SUPPORT FOR SCD

The purpose of this guide is provide information on past support for sickle cell disease at the federal level.

#### PAST SUCCESSES

#### National Sickle Cell Anemia Control Act of 1972 (PL 92-294)

- Signed into law 5/16/1972 by President Richard Nixon
- First major legislation for SCD
- Established guidance for SCD education, screening, testing, counseling, and research
- Created the first federal programs for SCD
- Passed & Funded

#### The Sickle Cell Disease and Other Heritable Blood Disorders Research, Surveillance, Prevention, and Treatment Act of 2018 (PL 115-327)

- Signed into law 12/18/2018 by President Donald Trump
- Sponsors: Senator Tim Scott (R-SC) and Senator Cory Booker (D-NJ), Congressman Danny Davis (D-IL), Congressman Michael Burgess (R-TX)
- Reauthorizes SCD prevention and treatment grants awarded by the Health Resources and Service Administration (HRSA)
- Authorizes the Centers for Disease Control and Prevention to award SCD surveillance grants to states, academic institutions and non-profit organizations
- Passed & Funded

This section highlights two important sickle cell-specific bills that were passed & funded at the federal level.



### National Sickle Cell Anemia Control Act of 1972 (PL 92-294)

- Signed into law 5/16/1972 by President Richard Nixon
- First major legislation for SCD
- Established guidance for SCD education, screening, testing, counseling, and research
- Created the first federal programs for SCD

### **Passed & Funded**



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- Authorizes the Centers for Disease Control and Prevention to award SCD surveillance grants to states, academic institutions and non-profit organizations

#### **Passed & Funded**



### FY24 Leave-Behind (Pt 2)

#### PAST ATTEMPTS: DEAD BILLS

#### The Sickle Cell Comprehensive Care Act (H.R. 6216/S. 3389)

- Introduced in December 2021 by Representatives Davis (D-IL-7) and Burgess (R-TX-26) in the House and Senators Booker (D-NJ) and Scott (R-SC) in the Senate
- Directs the Centers for Medicare and Medicaid Services (CMS) to create a demonstration to improve access to quality care for SCD Warriors enrolled in Medicaid
- Died in 117th Congress

#### The Sickle Cell Care Expansion Act (H.R. 7177/S. 4425)

- Introduced in March 2022 by Representatives Crist (D-FL-13) and Lee (D-CA-13) in the House, and Senators Van Hollen (D-MD) and Booker (D-NJ) in the Senate (June 2022)
- Hopes to increase the number of physicians treating SCD through a loan forgiveness and scholarship program
- Died in 117th Congress

#### The Sickle Cell Disease Treatment Centers Act (H.R. 8855/S. 4866)

- Introduced in September 2022, by Senators Van Hollen (D-MD) and Booker (D-NJ) in the Senate, and Representative Lee (D-CA-13), Davis (D-IL-7) and Adams (D-NC-12) in the House.
- Establishes a hub-and-spoke model for caring for SCD Warriors and requires collaboration with SCD CBOs and nonprofits
- Died in 117th Congress



This section highlights three important sickle cell-specific bills that were introduced in the 117th Congress (last year) but died in Congress.

If a bill dies, it means it was not enacted during the term is was introduced. Bills can be re-introduced in the next session.



### The Sickle Cell Comprehensive Care Act (H.R. 6216/S. 3389)

- Introduced in December 2021 by Representatives Davis (D-IL-7) and Burgess (R-TX-26) in the House and Senators Booker (D-NJ) and Scott (R-SC) in the Senate
- Directs the Centers for Medicare and Medicaid Services (CMS) to create a demonstration to improve access to quality care for SCD Warriors enrolled in Medicaid

### **Died in 117th Congress**



### The Sickle Cell Care Expansion Act (H.R. 7177/S. 4425)

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### **Died in 117th Congress**



## 2023 (FY24) "Leave Behind"

Sickle Cell Disease Fact Sheet

Page 3

#### SICKLE CELL DISEASE FACT SHEET

Sickle cell disease (SCD) is a rare, genetic, life-shortening blood disorder that affects every organ in the body.

SCD is is the most common inherited blood disorder in the U.S. It is caused by abnormal red blood cells instead of being soft and round, these red blood cells are hard and sticky, and shaped like a 'tickle. This can block blood flow and oxygen from reaching all parts of the body.

The most common symptoms of SCD are recurring **pain crises**. The disease can also cause chronic complications such as organ damage, death of bone tissue, skin ulcers, stroke, blindness, neurocognitive impairment, pulmonary hypertension, heart and kidney failure, and early mortally.



 People with SCD have less access to comprehensive team care than people with genetic disorders such as hemophilia and cystic fibrosis.

Current standard of care for SCD treatments is not appropriate for all individuals living with SCD.

 Gene therapy is on the horizon for SCD. This development creates opportunities for legislative action to improve access to care and address issues with outdated healthcare payment models.





## FY24 Leave-Behind (Pt 3)

#### SICKLE CELL DISEASE FACT SHEET

#### Sickle cell disease

(SCD) is a rare, genetic, life-shortening blood disorder that affects every organ in the body. SCD is is the most common inherited blood disorder in the U.S. It is caused by abnormal red blood cells. Instead of being soft and round, these red blood cells are **hard and sticky**, and shaped like a "sickle." This can **block blood flow** and oxygen from reaching all parts of the body.

The most common symptoms of SCD are recurring **pain crises**. The disease can also cause chronic complications such as organ damage, death of bone tissue, skin ulcers, stroke, blindness, neurocognitive impairment, pulmonary hypertension, heart and kidney failure, and early mortality.



This section provides a basic description of SCD and notable facts about prevalence and treatments.



## FY24 Leave-Behind (Pt 3)

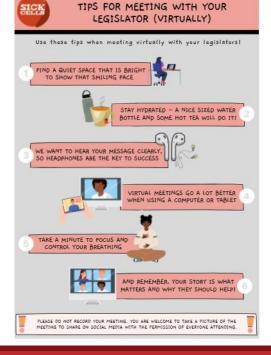
- People with SCD have less access to comprehensive team care than people with genetic disorders such as hemophilia and cystic fibrosis.
- Current standard of care for SCD treatments is not appropriate for all individuals living with SCD.
- Gene therapy is on the horizon for SCD. This development creates opportunities for legislative action to improve access to care and address issues with outdated healthcare payment models.

This section highlights a few more facts and the cost of SCD.





## **Support Materials**



Tips for virtual meetings:

- Audio
- Video
- Centering yourself



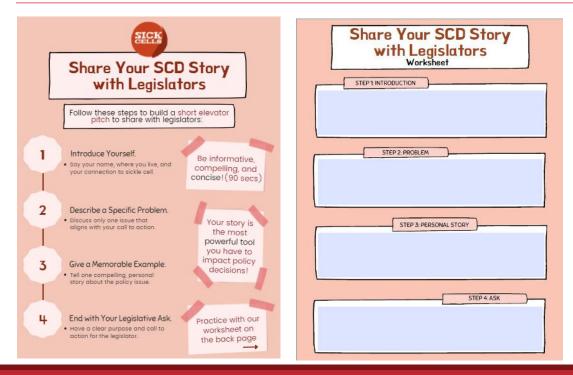
### **Support Materials**



PLEASE DO NOT RECORD YOUR MEETING. YOU ARE WELCOME TO TAKE A PICTURE OF THE MEETING TO SHARE ON SOCIAL MEDIA WITH THE PERMISSION OF EVERYONE ATTENDING.



### **Support Materials**



This is a guide to use to craft your story.

Follow these steps and you'll have what you need for Hill Day!





## Are there any questions about this year's asks?



### Hill Day Platform

1:10-1:30pm ET

What you'll use on Day 2 (Virtual Hill Day)

Relevant to those who signed up for Day 2



## Logging In

Everybody who registered for Hill Day meetings received an email from "Advocacy Day" (<u>advocacyday@advocacyassociates.com</u>) on Tuesday, March 14 at noon ET

To access your schedule, go to <u>sc.constituentvoice.net</u>



# Logging In

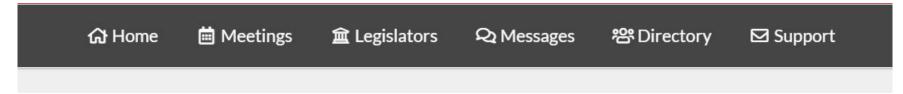
### Go to <u>sc.constituentvoice.net</u>

- Username: The email you used to sign up
- Password: The password you chose

	Your Meetings - National SCD Policy Forum	
Wednesda	y, March 23, 2022 Rep. Barry Moore (R) [AL-O2] Virtual Meeting: Click for details on how to join. You'll be able to join online or by conference phone number. Luke McKnight, Legislative Assistant ; Rep. Barry Moore	9:00 AM CDT (10:00 AM EDT)
60	Rep. Garret Graves (R) [LA-06] Virtual Meeting: Click for details on how to join. You'll be able to join online or by conference phone number. Ellen Bottcher, Staff Assistant	10:00 AM CDT (11:00 AM EDT)



## **Inside the Platform**



- Home: shows your full schedule
- **Meetings**: shows your full schedule (same screen as "Home")
- **Legislators**: Gives you background information on all the offices/legislators you're meeting with
- **Messages**: You'll see relevant notices here
- Directory: Allows you to send messages to other advocates signed up for Hill Day
- Support: Technical support from Advocacy Associates NOT from event staff



## **Your Meetings**

습 Home 🗎 Meetings 🏛 Legislators 오 Messages 뿅Di	rectory 🖾 Support 🗧	More <del>-</del>
Wednesday, March 23, 2022 at 9:00 AM CDT (10:00 AM EDT)	▼ Talking Points	Ĵ
Rep. Barry Moore (R) [AL-02] Meeting With: Luke McKnight, Legislative Assistant, and Rep. Barry Moore,	This year's asks will be listed here Might include office-specific notes	
Oin Online Meeting     Dial-In: 1-253-215-8782     Access Code / PIN: 454-111-9391#		•
<b>Important Information:</b> If you're joining through the Zoom app on a mobile device, you will need to enter this information:	✓ Documents	
Meeting ID: 454-111-9391 Access code: 405405 Please DO NOT click the "Join Online Meeting" button until 10 min prior to your specific meeting time, or use that link for anything other than this specific meeting.	This year's materials will be linked here	



### **Zoom Info**

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## **Your Talking Points**

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### **Meeting Documents**

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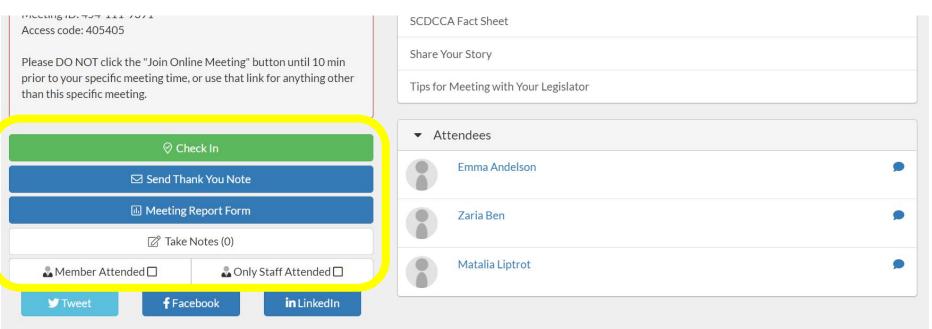
## **Your Meeting Buddies**

Access code: 405405	SCDCCA Fact Sheet	
Please DO NOT click the "Join Online Meeting" button until 10 min	Share Your Story	
prior to your specific meeting time, or use that link for anything other than this specific meeting.	Tips for Meeting with Your Legislator	
🛇 Check In	▼ Attendees	
Send Thank You Note	Emma Andelson	•
🔝 Meeting Report Form	Zaria Ben	
🖉 Take Notes (0)		
Member Attended Only Staff Attended	Matalia Liptrot	•
Tweet <b>f</b> Facebook <b>in</b> LinkedIn		



## **Post-Meeting Actions**

Copy & Paste our pre-written Thank You Note | Answer questions about how your meeting went





### **Share on Socials**

#### Copy & Paste our pre-written socials posts

Access code: 405405 Please DO NOT click the "Join Online Meeting" button until 10 min prior to your specific meeting time, or use that link for anything other than this specific meeting.	SCDCCA Fact Sheet Share Your Story Tips for Meeting with Your Legislator	
⊘ Check In	<ul> <li>✓ Attendees</li> </ul>	
🖂 Send Thank You Note	Emma Andelson	•
Meeting Report Form  Take Notes (0)	Zaria Ben	
Member Attended     Son V Staff Attended     Tweet     Facebook     in LinkedIn	Matalia Liptrot	•

March 21, 2023



# **Questions on Hill Day**

If you have **technical questions** (i.e. your portal has a bug, the platform isn't working, the staffer did not show) you can reach out to Advocacy Associates for immediate assistance:

- request "support" through the web portal
- Call their support staff directly: (301) 388-8107

If you have **questions about the Hill Day** (i.e. talking points, medical emergencies), please let event staff know by emailing

- Maggie Jalowsky: <u>mjalowsky@sickcells.org</u>
- Abby Tainter: <u>atainter@sickcells.org</u>
- Arielle Krahenbuhl: <u>akrahenbuhl@sickcells.org</u>





### Are there any questions about the Hill Day meeting platform or viewing your schedule?

### Mock Meetings

1:30-1:50pm ET



### Let's Practice!





### **Team Leads**

Team Leads are in charge of **coordinating speaking roles** during their Hill meetings. They are in charge of:

- Managing their meetings
- Reporting meeting details to
   event staff
- Taking screenshots
- Engaging on social media with offices
- Following the Team Lead doc →

### How to Lead Your Team

- Attend all of your assigned Hill Day meetings
- 2 Familiarize yourself with the FY24 One-Pager outlining this year's requests
- **Practice with your meeting buddies** during Day 1 Breakout Rooms or during event Office Hours
  - **Start the meeting** with introductions & thank the staff for their time. **Finish with a strong call to action** that ties in attendees' stories
  - Guide the conversation during all of your Hill meetings to balance stories & "asks"
  - Make sure those who want to speak are able to, including asking the staff if they have questions
  - Ask the staffer/legislator if you can **take a screenshot** photo to share
- 3 Send a follow-up "thank you" email and include leave-behind materials

www.sickcells.ord

9 Fill out the **post-meeting survey** & report back to event staff



## **Reminders for Meetings**

- Do not repeat negatives
- Bridge to key messages (this year's asks)
- Stay confident
- Be clear
- It's okay to say "I don't know"



# **Reminders for Meetings**

When you're working with the media, you might encounter situations you don't feel prepared for. Here are some tips to help you maintain control of your story in any situation.

SIGNAL PHRASES TO HELP REDIRECT

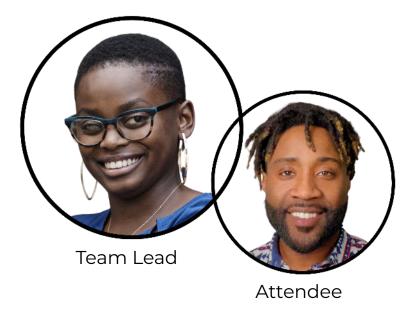
- "That's one view, but your readers would probably be interested to know that..."
- "I think what you're trying to say is..."
- "I don't think I have that information, but let me tell you who does..."
- "I'm not sure I'm the right person to answer that, but you could ask..."

SIGNAL PHRASES CAN STOP THE CONVERSATION, REFRAME IT, AND BRING IT BACK TO WHERE YOU WANT SO YOU STAY IN CONTROL.





# Meeting 1





Legislator/Staffer



# Meeting 2





Legislator/Staffer



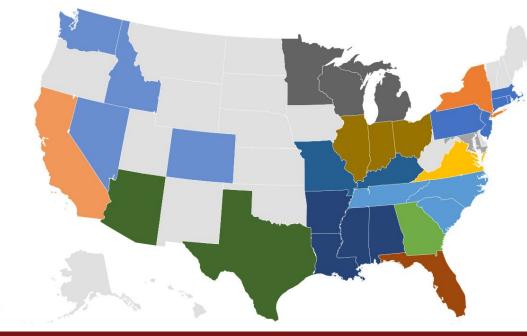
### Breakout Rooms!

1:50-2:40pm ET

Connect with your state team by heading to the "Session" relevant to you.



There are **14 breakout rooms**, according to your state or geographic region:



Room 1: Northeast (CT, MA, NJ, PA, RI)

Room 2: New York

- Room 3: Maryland
- Room 4: Virginia and DC
- Room 5: Southeast 1 (NC, SC, TN)
- Room 6: Georgia
- Room 7: Southeast 2 (AL, AR, LA, MS)
- Room 8: Florida
- Room 9: Midwest 1 (MI, MN, WI)
- Room 10: Midwest 2 (IL, IN, OH)
- Room 11: Missouri and Kentucky
- Room 12: South (TX, AZ)
- Room 13: West (CO, ID, NV, WA)
- Room 14: California



**5 states** will meet as independent breakout rooms:

- New York (Room 2)
- Maryland (Room 3)
- Georgia (Room 6)
- Florida (Room 8)
- California (Room 14)



**9 regions** will meet in combination with other states:

- Northeast (Room 1)
  - Connecticut
  - Massachusetts
  - New Jersey
  - Pennsylvania
  - Rhode Island
- Virginia & DC (Room 4)
  - Virginia
  - District of Columbia
- Southeast 1 (Room 5)
  - North Carolina
  - South Carolina
  - Tennessee
- Southeast 2 (Room 7)
  - Alabama
  - Arkansas
  - Louisiana
  - Mississippi

- Midwest 1 (Room 9)
  - Michigan
  - Minnesota
  - Wisconsin
- Midwest 2 (Room 10)
  - Illinois
  - Indiana
  - Ohio
- Missouri & Kentucky (Room 11)
  - Missouri
  - Kentucky
- Texas & Arizona (Room 12)
  - Texas
  - Arizona
- West (Room 13)
  - Colorado
  - Idaho
  - Nevada



### Breakout Goals:

- Confirm Day 2 attendance
- Confirm Team Leads
- Check Hill Day schedules
- Establish speaking roles:
  - Team Lead
  - 2 personal stories (flexible)
  - 1 person per ask (flexible)
  - Non-speaking/observing roles

Session Breakouts are intended for those **participating in the Virtual Hill Day.** 

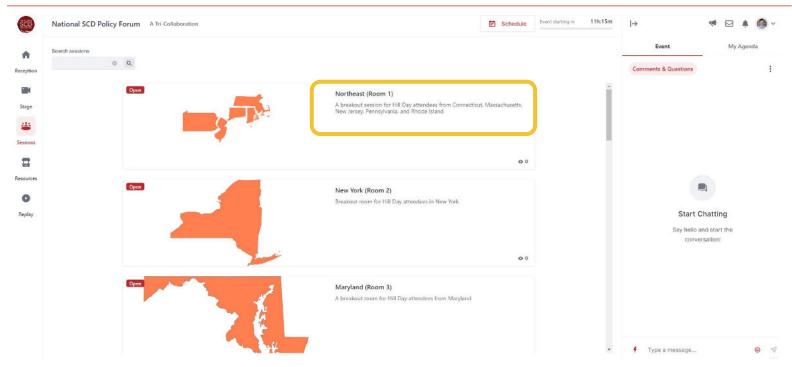
If you would like to observe but are NOT participating in the Hill Day, please remain a silent attendee.



SCED SCED		→ # 1	' 🖂 🌲 🚳 ~ My Agenda
Reception	SCD POLICY FORUM	Chat Polls People Q&A	:
Stage	MARCH 21-22, 2023 A TRI-COLLABORATIVE EVENT		
Sessions	National SCD Policy Forum	Start Chatt	
Networking	Time Left 2d:7h:42m	conversation	
	Description Schedule Speakers	F Type a message	

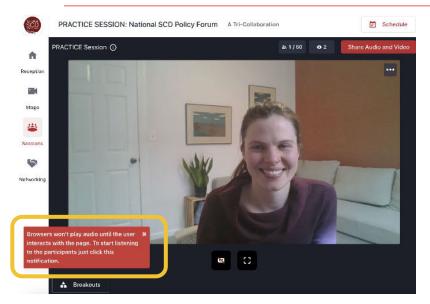


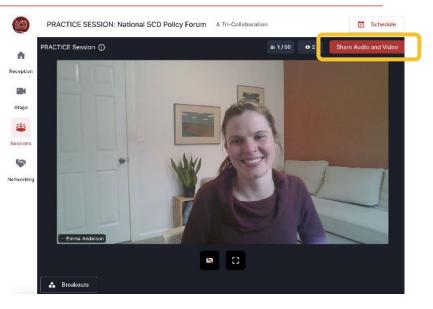
### **Pick Your Session**



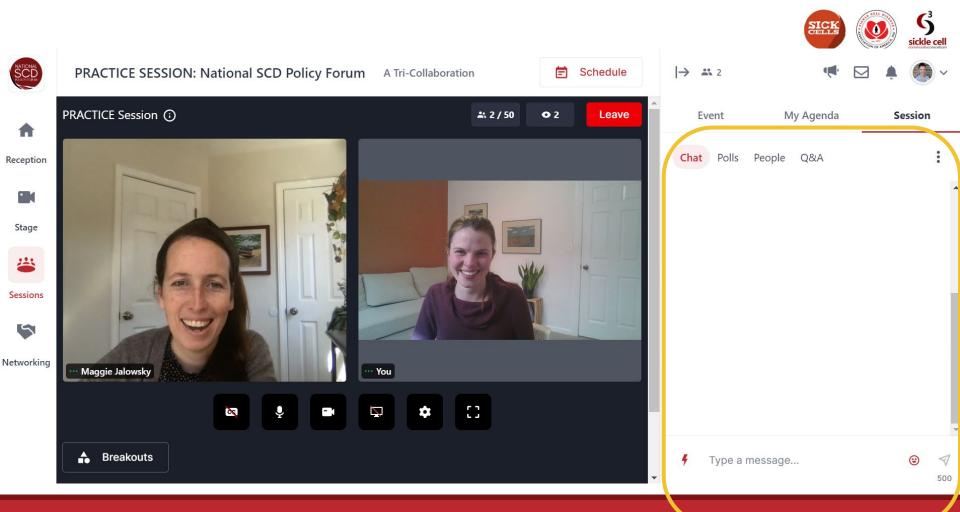


### **Enable Audio & Video**





#### March 21, 2023



March 21, 2023



## Session Info

Sessions will stay open & accessible for two hours after the event in case your team wants to use them to coordinate and practice more.

You are also welcome to practice with your team at tonight's Office Hours from 6-8pm ET



### Breakout Rooms

1:50-2:40pm ET

Please join the "Session" based on your state or region

Those not participating in Day 2 are welcome to observe silently or head out after watching the "Next Generation" message in "Booths"



### Next Generation

2:40-2:45pm ET

A message from young SCD advocates across the U.S.



### Closing Remarks

2:45-3:00pm ET



### **Ashley Valentine**

President & Co-Founder Sick Cells



### **Regina Hartfield**

Executive Director Sickle Cell Disease Association of America, Inc. (SCDAA)



### Dr. Lakiea Bailey

Executive Director

Sickle Cell Disease Community Consortium



### Thank you to our sponsors!





## Reminders

- View your Hill Day schedule
- Outline your SCD story
- Sleep well & prep for tomorrow!

### **Questions?**

- Come to Office Hours TONIGHT from 6-8pm ET
- Register at the link in the chat