2022 ACCESS Working Group Committee: Poverty

Committee Members:
- Alycia Maloney
- Ellie Beaver
- Emma Keiski
- Emily Ward
- Jen Coles
- Heather Blackwell

Committee Members:
- Anthony Bonagura
- Amy Ronneberg
- Miguel Perales
- Ron Potts
- Dianna Howard

Committee Members:
- Robert Richards
- Corey Cutler
- Gary Goldstein
- Anurekha Hall
- Nandita Khera
- Patrick DeMartino

• ASTCT Chair: Navneet Majhail
• NMDP Chair: Jess Knutson
1. Reducing Barriers to Transplant through Medicaid:

a. Medicaid coverage of HCT/CT varies state-by-state.
   - Identify coverage and barriers for patients covered by Medicaid to access life saving cellular therapies.
     i. Complete Medicaid scan, publish
     ii. Identify target states for policy change
     iii. Launch state policy change campaigns leveraging trained advocates

b. Collect Insurance Data
   - Work with CIBMTR and NMDP to begin collecting insurance data on patients at prelim search
1. Reducing Barriers to Transplant through Medicaid:

Will work with Manatt Health, LLP to provide 50-state analysis of key Medicaid coverage issues related to HCT and CAR T-cell therapies

1. Clinical coverage policies for HCT and CAR T-cell therapies
2. Travel and lodging coverage
3. Donor coverage

Funding:
- NMDP
- ASTCT secured $50,000 via Kite
- NMDP secured $25,000 via Takeda
1. Reducing Barriers to Transplant through Medicaid:

<table>
<thead>
<tr>
<th>Medicaid Scan</th>
<th>Accomplished</th>
<th>Group responsible</th>
</tr>
</thead>
<tbody>
<tr>
<td>Request for Proposals</td>
<td>DONE</td>
<td>ASTCT</td>
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<tr>
<td>Funding- Secured</td>
<td>DONE</td>
<td>NMDP/ASTCT</td>
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<tr>
<td>Contract Manatt</td>
<td>In process</td>
<td>NMDP</td>
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<tr>
<td>Analysis</td>
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<tr>
<td>Write Paper</td>
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<td>Solution</td>
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<tr>
<td>Publish paper</td>
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<td>Grasstops/grassroots activation</td>
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<tr>
<td>Take Action</td>
<td>Not Started</td>
<td>Everyone</td>
</tr>
</tbody>
</table>

1. Reducing Barriers to Transplant through Medicaid:

1. **Reduce Barriers to Transplant through Medicaid**: The project aims to reduce barriers to transplant through Medicaid. The following actions are planned:

- **Request for Proposals**: Done by ASTCT.
- **Funding Secured**: Done by NMDP/ASTCT.
- **Contract Manatt**: In process by NMDP.
- **Analysis**: Not started by NMDP/ASTCT/Poverty Workgroup.
- **Write Paper**: Not started by Authors/Poverty Workgroup.
- **Solution**: Not started by NMDP/ASTCT/Poverty Workgroup.
- **Publish paper**: Not started by Authors/Poverty Workgroup.
- **Model Language**: Not started by NDMP/ASTCT.
- **Medicaid Coalitions**: In process by NDMP/ASTCT.
- **Grasstops/grassroots activation**: In process by NMDP/ASTCT.
- **Take Action**: Not started by Everyone.

**Equal Outcomes for All**
2. TCT Advocacy Swat “Posse”

• Transplant Professionals need to be able to respond quickly and efficiently at the state and federal level to advocate for legislation that helps patients access the care they need and for them to provide the care necessary.
• Identify and train clinicians, administrators, and other professionals to be able to act at the state level in state capitols but also with Federal lawmakers at home in the district.
• Launch at Tandem:
  • NMDP has booth for clinicians, administrators, researchers, partner organizations, etc to join advocacy efforts.
  • Activities focused on Donor Leave and some state level issues.
2. TCT Advocacy Swat “Posse”

- **NMDP Advocacy Team**
  - Create Joint Action Center ASTCT/ NMDP
  - Identify “SWAT Team Members”
  - Identify States with legislation that will move (e.g., prior auth, biomarker testing, Medicaid)
  - Focus on in-person, letter on letterhead, and calls (off-line actions)

- **NEEDED – Training/Onboarding**
  - Poverty committee/other volunteers to assess NMDP/ASTCT training materials to see what can be used and what needs to be developed
  - Advocacy 101
  - Ambassador Training
3. Data analysis to understand barriers to access

- Partner with Kaiser to identify access barriers to HCT using claims dataset
  - Partnership with Dr Ron Potts
  - Claims data on patients from pre-diagnosis to post-treatment
  - Looking for volunteers to identify research questions and assist with analyses/dissemination of results
4. Identify psychosocial and financial resources

• Work with NDMP Patient Services Team (Katie Schoeppner) to better highlight the Patient Support Center that is made up of 30+ professionals with expertise in patient navigation, social work, insurance and finance and offers programming to include financial grants, counseling, peer support, education, support groups and more.

• Opportunities to highlight resources available through other partner patient advocacy organizations.