

By: Representative Cockerham

To: Appropriations

HOUSE BILL NO. 1666

1 AN ACT MAKING AN APPROPRIATION TO JACKSON STATE UNIVERSITY  
2 FOR USE BY THE COLLEGE OF HEALTH SCIENCES TO CONDUCT A REVIEW AND  
3 PREPARE A REPORT ABOUT MEDICATIONS, TREATMENTS, AND HEALTH CARE  
4 SERVICES AVAILABLE TO MEDICAID RECIPIENTS WITH A DIAGNOSIS OF  
5 SICKLE CELL DISEASE, FOR THE FISCAL YEAR 2024.

6 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF MISSISSIPPI:

7 **SECTION 1.** The following sum, or so much of it as may be  
8 necessary, is appropriated out of any money in the State General  
9 Fund not otherwise appropriated, to Jackson State University for  
10 use by the College of Health Sciences to conduct a review and  
11 prepare a report about medications, treatments, and health care  
12 services available to Medicaid recipients with a diagnosis of  
13 sickle cell disease, as provided in Section 2 of this act, for the  
14 fiscal year beginning July 1, 2023, and ending June 30, 2024.....  
15 .....\$ 250,000.00.

16 **SECTION 2.** (1) The money appropriated by Section 1 of this  
17 act shall be used by the College of Health Sciences of Jackson  
18 State University to complete and publish a report that details the  
19 findings from a review conducted by the college as provided under



20 subsection (2) of this section. The purpose of the review is to  
21 determine:

22 (a) If the covered medications, treatments, and health  
23 care services available to Medicaid recipients with a diagnosis of  
24 sickle cell disease are adequate to meet the needs of such  
25 recipients;

26 (b) Whether the Division of Medicaid should seek to add  
27 or facilitate access to additional medications, treatments, or  
28 services for such recipients; and

29 (c) Whether access impediments to such medications,  
30 treatments and services exist or are projected to exist based on  
31 the inadequacy of existing reimbursement methodologies or other  
32 reasons.

33 (2) The review conducted by the college shall include,  
34 without limitation, the following:

35 (a) An assessment of the extent to which the health  
36 care transitional programs or services offered or covered by the  
37 Division of Medicaid prepare, transfer, and integrate emerging  
38 adults with sickle cell disease into the adult care setting;

39 (b) An assessment of the extent to which providers of  
40 emergency medical services to Medicaid recipients are adequately  
41 trained and otherwise prepared to treat and manage sickle cell  
42 patients presenting with vaso-occlusive crises, including, without  
43 limitation, the extent to which such providers have followed



44 clinically validated algorithms and protocols regarding such  
45 treatment and management;

46 (c) The number of people with sickle cell disease who  
47 experienced a hospitalization or an emergency department visit  
48 with a vaso-occlusive episode or pain crisis more than twice a  
49 year, including the average length of stay for each such visit;

50 (d) An assessment of existing reimbursement frameworks  
51 and methodologies employed or expected to be employed by Division  
52 of Medicaid for drug products approved, or projected to be  
53 approved during the next five (5) years, for the treatment of  
54 sickle cell disease in the inpatient hospital setting, and whether  
55 such frameworks and methodologies may result in barriers to access  
56 to the products because of inadequate hospital reimbursement  
57 levels or other reasons; and

58 (e) If any access barriers identified in paragraph (d)  
59 result from or otherwise relate to the state's reimbursement  
60 methodologies, an assessment of whether such methodologies may  
61 feasibly be modified and improved to the extent authorized under  
62 federal law, including, without limitation, through the adoption  
63 of policies authorizing reimbursement to hospitals for the cost of  
64 sickle cell disease therapies administered in the inpatient  
65 setting at actual acquisition cost less all discounts, rebates or  
66 incentives, and voluntary outcomes-based payment arrangements with  
67 manufacturers that rely on Medicaid supplemental rebate mechanisms  
68 in connection with the utilization of such therapies.



69 (3) The report shall detail the results of the review and  
70 shall include any recommendations for improvements in the delivery  
71 of and access to health care services to the state's Medicaid  
72 recipients with a diagnosis of sickle cell disease.

73 **SECTION 3.** The money appropriated by this act shall be paid  
74 by the State Treasurer out of any money in the State General Fund  
75 not otherwise appropriated, upon warrants issued by the State  
76 Fiscal Officer; and the State Fiscal Officer shall issue his or  
77 her warrants upon requisitions signed by the proper person,  
78 officer or officers in the manner provided by law.

79 **SECTION 4.** This act shall take effect and be in force from  
80 and after July 1, 2023.

