

Oregon to get Lower-Cost and Lifesaving Treatment in 2026



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Focusing on People with Rare and Severe Diseases

Beginning January 1, 2026, Oregon will be able to increase access to lower-cost, lifesaving cell and gene therapies for people on Oregon Health Plan (OHP), the state's Medicaid program.

Oregon is one of 35 states that applied in 2024 to join a multi-year initiative with the Centers for Medicare & Medicaid Services (CMS) to negotiate lower costs for innovative therapies. By lowering costs for participating states, the Cell and Gene Therapy Access Model will improve access to transformative treatments for people who have health coverage through Medicaid and live with a rare or severe disease.

States will initially focus on providing lower-cost therapies for people living with sickle cell disease, a genetic blood disorder that affects 120,000 individuals nationally, the majority of whom are Black, African American and/or Hispanic. Approximately 800 Oregonians live with sickle cell disease.

The average lifespan for people living with sickle cell disease is 20 years shorter than the national average life expect-

tancy. Individuals living with the disease can experience severe and painful symptoms such as organ damage and strokes, resulting in multiple hospitalizations, organ failure and even death. CMS estimates that 50-60% of people living with sickle cell disease are enrolled in Medicaid and the U.S. health system spends \$3 billion each year on care for people living with the disease.

"The cost of cell and gene therapies for sickle cell disease is a real barrier that prevents Oregonians from living longer, healthier lives with less pain and fewer trips to the emergency room," said Emma Sandoe, Medicaid Director for Oregon Health Authority. "This initiative is a big step forward in promoting innovative treatments and increasing access to lifesaving treatment."

Cell and gene therapies are one-time treatments that can transform lives by correcting underlying causes of a disease, addressing symptoms and stopping the progression of diseases. However, gaining access to these potentially life-changing treatments can be difficult because they can cost millions of dollars.

Through the Cell and Gene Therapy Access Model, CMS will negotiate agreements with participating pharmaceutical manufacturers on behalf of states. Pricing for treatments will be tied to specific outcomes for Medicaid members including improved access to innovative treatment, improved health as well as reductions in health care costs and burdens to state Medicaid programs.

HEALTH



Cleveland Indians right fielder Melky Cabrera sprays sunscreen before a baseball game against the Texas Rangers, Sunday, July 22, 2018, in Arlington, Texas. (AP Photo/Sam Hodde, File)

You Should Wear Sunscreen Even If You Have Darker Skin

Excessive Sun Exposure Can Cause Painful Sunburn, Experts Warn

People with darker skin still need to wear sunscreen — for more reasons than one. Too much ultraviolet exposure from the sun can lead to sunburn, dark spots and wrinkles, and increased risk of skin cancer.

The melanin in darker skin offers some extra protection from the sun, but dermatologists say that isn't enough on its own.

"Everyone needs sunscreen. But the reasons that one might be reaching for sunscreen may differ depending on your skin tone," said Dr. Jenna Lester, who founded the Skin of Color Clinic at the University of California, San Francisco. White people are overall more likely to get skin cancer compared to Black and Hispanic people. But Black and Hispanic people are less likely to survive the most dangerous kind of skin cancer called melanoma, according to the American Cancer Society.

Black patients more commonly get melanoma on their hands and feet — places that are more shielded from the sun. Still, sunscreen is an additional protective layer that helps prevent a host of other problems including sunburns, hyperpigmentation after acne, rosacea and dark patches on the face.

Dr. Oyetewa Asempa at Baylor College of Medicine often reminds her darker-skinned patients: "All of the problems that you're coming to see me for are caused or worsened by the sun." To stay safe in the sun, it's important to grab sunscreen with a sun protection factor or SPF of at least 30 and reapply every two hours. People headed for the pool or beach should put on sunscreen beforehand, remembering to reapply liberally and after getting out of the water.

Most people don't wear enough sunscreen when they apply, Lester said. Make sure to put two long fingers' worth on the face and a hefty blob for the body.

Look for chemical-based sunscreens to avoid ashy white cast. Two key ingredients in mineral-based products — zinc oxide and titanium oxide — are the culprits for that pesky discoloration on dark skin. Tinted sunscreens contain pigments that block visible light from the sun, offering additional protection against dark spots. And wearing a hat or sun-protective clothing with an ultraviolet protection factor or UPF grading can provide an extra safety boost.

Whatever the sun protection routine, it's important to keep it up, Lester said. Some UV rays can climb right through car and house windows to cause sun damage even when indoors, making it even more important to take care of the skin while the sun shines.

"It's about trying to make it a daily habit," she said. "Consistency over intensity."