

Medicaid Enrollees and Kidney Diseases

This Act provides that Medicaid enrollees who are eligible for services and who have a diagnosis of diabetes or hypertension, or who have a family history of kidney disease, shall be evaluated for kidney disease through routine clinical laboratory assessments of kidney function.

The Act provides that an enrollee in Medicaid who is eligible for services shall be classified as a chronic kidney patient when they have been diagnosed with diabetes or hypertension, or have a family history of kidney disease and have received a diagnosis of kidney disease.

This Act provides that the diagnostic criteria, which define chronic kidney disease (CKD) should be any generally recognized clinical practice guidelines which identify chronic kidney disease or its complications based on the presence of kidney damage and level of kidney function.

The legislation provides that patients receiving Medicaid benefits who are at risk for chronic kidney disease will be tracked regarding appropriate diagnostic testing in keeping with the state's Medicaid program's disease management program. It directs that Medicaid providers will be educated and disease management strategies implemented in order to increase the rate of evaluation and treatment for chronic kidney disease according to accepted practice guidelines including:

- Managing risk factors, which prolong kidney function or delay progression to kidney replacement therapy;
- Managing risk factors for bone disease and cardiovascular disease associated with chronic kidney disease;
- Improving nutritional status of chronic kidney disease patients, and
- Correcting anemia associated with chronic kidney disease.

Submitted as:

Louisiana

[Act 124](#)

Status: Enacted into law in 2005.

Suggested State Legislation

(Title, enacting clause, etc.)

1 Section 1. [*Short Title.*] This Act may be cited as “An Act to Mandate that Medicaid
2 Enrollees be Evaluated for Kidney Diseases.

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4 Section 2. [*Chronic Kidney Disease; Evaluation; Classification; Criteria; Healthcare
5 Coverage.*]

6 A. Any enrollee in Medicaid who is eligible for services and who has a diagnosis of
7 diabetes or hypertension or who has a family history of kidney disease, shall be evaluated for
8 kidney disease through routine clinical laboratory assessments of kidney function.

9 B. Any enrollee in Medicaid who is eligible for services and who has been diagnosed
10 with diabetes or hypertension or who has a family history of kidney disease, and who has
11 received a diagnosis of kidney disease shall be classified as a chronic kidney patient.

12 C. The diagnostic criteria which define chronic kidney disease (CKD) should be
13 generally recognized clinical practice guidelines, which identify chronic kidney disease or its
14 complications based on the presence of kidney damage and level of kidney function.

15 D. In keeping with the [Department of Health and Hospitals] Medicaid disease
16 management program, patients receiving Medicaid benefits who are at risk for chronic kidney
17 disease will be tracked regarding appropriate diagnostic testing. Medicaid providers will be
18 educated and disease management strategies implemented in order to increase the rate of
19 evaluation and treatment for chronic kidney disease according to accepted practice guidelines
20 including:

21 (1) Managing risk factors, which prolong kidney function or delay progression to
22 kidney replacement therapy;

23 (2) Managing risk factors for bone disease and cardiovascular disease associated
24 with chronic kidney disease;

25 (3) Improving nutritional status of chronic kidney disease patients, or

26 (4) Correcting anemia associated with chronic kidney disease.

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28 Section 3. [*Severability.*] [Insert severability clause.]

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30 Section 4. [*Repealer.*] [Insert repealer clause.]

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32 Section 5. [*Effective Date.*] [Insert effective date.]