(NP) SR 1810

**By** Senator Braynon

ī	35-02776-17 20171810
1	Senate Resolution
2	A resolution recognizing the need for, and encouraging
3	policies that improve access to, home dialysis for
4	minorities living with end-stage renal disease.
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6	WHEREAS, end-stage renal disease (ESRD), also known as
7	kidney failure, currently impacts 661,000 Americans, and more
8	than 89,000 Americans die from ESRD annually, and
9	WHEREAS, more than 117,000 new ESRD cases are diagnosed
10	each year, with 7,500 of those cases diagnosed in Florida, and
11	WHEREAS, dialysis and transplant are the only treatments
12	for ESRD, and 70 percent of patients are on dialysis, and
13	WHEREAS, when dialysis is the method of treatment, a
14	patient may either obtain treatment in his or her home with home
15	hemodialysis (HHD) or home peritoneal dialysis (PD) or be
16	transported to a dialysis center three times each week for
17	hemodialysis, and
18	WHEREAS, HHD provides significant economic and lifestyle
19	advantages, including greater autonomy and flexibility over when
20	a patient dialyzes; reduces dependence on transportation, as
21	there is no travel to a clinic for treatments; and is more
22	conducive to employment, as evidenced by higher rates of
23	employment among home dialysis patients, and
24	WHEREAS, the first 3 months of dialysis cost an average of
25	\$43,000 per patient, and
26	WHEREAS, access to an HHD training program allows Medicaid
27	patients to move to Medicare as their primary payer on the first
28	day of treatment, as opposed to at the beginning of the fourth
29	month of treatment, by eliminating the Medicare waiting period

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35-02776-17 20171810 and, therefore, saves taxpayers a significant amount of money, WHEREAS, this 3-month Medicare waiting period drives up the cost to states and, assuming 1,000 new Medicaid ESRD cases, could mean as much as \$43 million in Medicaid costs each year, WHEREAS, only 10 percent of dialysis patients receive treatment at home, and

WHEREAS, ESRD disproportionately affects minority 38 39 Americans, with incidence among African Americans 3.7 times 40 greater than in Caucasians, and

41 WHEREAS, Hispanic patients are 13 percent less likely than 42 Caucasians to receive PD and 37 percent less likely to receive HHD, while African-American patients are 29 percent less likely 43 44 than Caucasians to receive PD and 17 percent less likely to 45 receive HHD, and HHD and HHD home training are less available in 46 poorer counties, and

47 WHEREAS, significant barriers preclude many patients from accessing HHD, including the lack of sufficient provider 48 49 education about HHD, insufficient reimbursement for HHD, limited 50 patient awareness of the option of HHD, and potentially 51 burdensome requirements for care partner support, and

52 WHEREAS, policymakers can alleviate these burdens by 53 focusing on telehealth, medical waste laws, and reimbursement 54 levels; by enabling and encouraging providers to offer HHD to more of their patients; and by providing a pathway for staff-55 56 assisted HHD, NOW, THEREFORE,

58 Be It Resolved by the Senate of the State of Florida:

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60	That the importance of equal access to all dialysis
61	modalities for end-stage renal disease is recognized as a means
62	of preserving state funds by enabling more patients who can
63	benefit from home dialysis to access it.
64	BE IT FURTHER RESOLVED that state agencies and policymakers
65	are encouraged to implement policies to decrease the
66	disproportionate number of African Americans and other
67	minorities who lack access to home dialysis modalities.

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