

## SAMPLE POLICIES FOR KIDNEY DISEASE

1. **Allocating resources for kidney disease screening programs.** Financial resources need to be properly allocated to screening programs to determine disease characteristics and prevalence. It is also important to determine whether these screening programs will target high-risk individuals or the general population.<sup>1</sup>
2. **Focusing on early treatment of kidney disease through effective screening.**<sup>1</sup> Early detection and treatment is the best measure against the progression of kidney disease to kidney failure so it is essential that individuals are educated and made aware of the risk factors for developing kidney disease.<sup>2</sup>
3. **Ensuring access to adequate care after implementing screening programs.** For high-risk populations who have been screened, it is important that they participate in follow-up evaluation and enroll in a disease management program to maintain their health and prevent their disease from progressing to kidney failure.<sup>1</sup>
4. **Updating Medicare and Medicaid mandates to include kidney disease in state disease registries.** It is important to update Medicare and Medicaid disease registry codes to include kidney disease to ensure coverage for screening and disease management.
5. **Implementing standardized clinical guidelines to ensure that physicians and other medical professionals participate in kidney disease detection and management for their patients.**<sup>2</sup> Changing physician behavior is an essential component of the disease screening and management process. Provision of proper training and financial reimbursement are necessary to encourage physicians and other medical professionals to participate in kidney disease screening programs.
6. **For patients with kidney failure, create more opportunities for the preferred therapy of kidney transplantation.** In comparison to dialysis, kidney transplantation brings forth a greater chance of survival especially since over the last decade, transplantation success rates have progressively increased.<sup>3</sup> For young children with kidney disease, kidney transplantation has resulted in vast improvements in a child's physical development.<sup>4</sup> With kidney disease affecting minority populations disproportionately, it is important that all population groups have equal access to transplantation.<sup>5</sup>
7. **Encouraging national health organizations to establish a data surveillance system for kidney disease.**<sup>2</sup> Diabetes and obesity have national data surveillance systems but a system for kidney disease has yet to be developed. To understand the nature and burden of kidney disease on our nation and to develop tailored public health policies, a national data surveillance system should be developed.
8. **Accomplish the overarching goal of Healthy People 2010 for chronic kidney disease through implementing the policies mentioned above.** The Healthy People 2010 goal for chronic kidney disease is to reduce new cases of chronic kidney disease and its complications, disability, death and economic costs. This can only be accomplished if national policies focus on education, awareness and access to effective screening and disease management programs.

**Note: Women In Government provides these sample policies as educational resources and does not endorse the introduction and adoption of any specific sample policy.**

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<sup>1</sup> McClellan, W., Ramirez, S., and Jurkovitz, C. (2003). Screening for Chronic Kidney Disease: Unresolved Issues. *American Society of Nephrology*. 14: S81-S87.

<sup>2</sup> Schoolwerth AC, Engelgau MM, Hostetter TH, Rufo KH, Chianchiano D, McClellan WM, et al. (2006). Chronic Kidney Disease: A Public Health Problem That Needs a Public Health Action Plan. *Prev Chronic Dis*. Retrieved on March 21, 2006 from [http://www.cdc.gov/pcd/issues/2006/apr/05\\_0105.htm](http://www.cdc.gov/pcd/issues/2006/apr/05_0105.htm)

<sup>3</sup> USRDS. (1998) *1998 ADR*. Bethesda, MD: NIH, NIDDK, Table G-19.

<sup>4</sup> United Network for Organ Sharing (UNOS). (1997) 1997 Report of the Organ Procurement and Transplantation Network: Waiting List Activity and Donor Procurement. Executive Summary, Kidney Volume. Richmond, VA: UNOS.

<sup>5</sup> Bloembergen, W.E., Mauger, E.A., and Wolfe, R.A. (1997) Association of gender and access to cadaveric renal transplantation. *American Journal of Kidney Diseases* 30(6): 733-738.