



Available Services for People with Chronic Kidney Disease

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State Kidney Program

- The goals of the Kidney Program are
 - To provide secondary and tertiary preventive services to persons at risk for end-stage renal disease
 - To reduce the further risk and consequences of persons with end-stage renal disease by paying for some of their expenses for dialysis, medications, incidental supplies and transportation
 - New focus: Prevention



State Kidney Program

The State Kidney Program currently has two main components:

- Contracts with Dialysis Centers
- Purchase of Medical Care Services



State Kidney Program

- Contracts with Dialysis Centers
 - Currently contract with 14 dialysis centers
 - New RFA out in February 2007
 - 157 dialysis centers in NC



State Kidney Program

- Provides funds to reimburse persons and/or others on their behalf for specified expenses
 - Transportation
 - Medication
 - Emergency-related expenses



State Kidney Program

○ Restrictions

- Must meet the eligibility requirements
- Expenditures reimbursed by these funds may not exceed \$300 per patient for the fiscal year



State Kidney Program

- Purchase of Medical Care Services (POMCS)
 - Reimburses pharmacies for:
 - Prescription drugs
 - Over the counter medications
 - Incidental supplies essential to the health of End Stage Renal Disease



State Kidney Program

- POMCS

- Restrictions

- Reimburses items which can not be reimbursed by any other third party payer
 - Eligibility requirements are set at approximately 65% of the federal poverty guidelines for 2006



State Kidney Program

Program Eligibility

Persons in Family or Household	NC Kidney Program	Federal Poverty Guidelines (48 Contiguous States and D.C.)
1	\$6,400	\$ 9,800
2	\$8,000	\$13,200
3	\$9,600	\$16,600
4	\$11,000	\$20,000
5	\$12,000	\$23,400
6	\$12,800	\$26,800
7	\$13,600	\$30,200
8	\$14,400	\$33,600
For each additional person, add	\$800	\$3,400

SOURCES:

Purchase of Medical Care Services, 2006 Income Scales, October 27, 2006

(<http://www.dhhs.state.nc.us/control/pomcs/pomcs.htm>)

Federal Register, Vol. 71, No. 15, January 24, 2006, pp. 3848-3849



State Kidney Program

- Impact

- With many North Carolinians living at or below the federal poverty level, their quality of life is greatly impacted by the ability to obtain life saving medications, transportation to the dialysis center, and other basic services



State Kidney Program

- Impact

- The kidney program enables greater access to kidney dialysis for a significant number of North Carolinians, thereby constituting a life saving investment.



State Kidney Program

- A new goal for the kidney program is develop a focus on primary prevention
- Further discussion in future focus slide



CKD Care

- Who cares for patients with Chronic Kidney Disease (CKD)
 - Primary Care Providers
 - Other chronic disease (diabetes, hypertension)
 - Nephrologists
 - A physician who has been educated and trained in kidney diseases, kidney transplantation, and dialysis therapy. Nephrology is classified as an internal medicine subspecialty.



CKD Care

- 2005 ESRD Network 6 Annual Report
 - 147 providers
 - 12,027 patients

(www.esrdnetwork6.org/data/2005AnnualReport.pdf)



CKD Care

- Who cares for patients with CKD who are un/underinsured
 - Safety Net Providers
 - Community Health Centers
 - Rural Health Centers
 - Free Clinics
 - Local Health Departments



Safety Net

- NC Community Health Centers
 - 23 Health Center Grantees, 1 Migrant Voucher Program
 - 89 Clinical Service Sites, 15 migrant voucher program sites
 - 7 Migrant Health Center Grantees
 - 3 Healthy Schools/Healthy Community Grantees
 - 4 Homeless Health Care Grantees
 - 4 Federally Qualified Health Center Look-alike organizations with 11 clinical service sites

Bureau of Primary Health Care, Uniform Data System—Preliminary Data 2005
www.ncchca.org



Safety Net

- NC Community Health Centers - 2005
 - 313,241 patients
 - 1,043,805 patient visits
 - 49% of patients were uninsured (154,695)
 - 23% of patients receive Medicaid
 - 69% of patients live below 200% of the federal poverty level (FPL)
 - 51% live below 100% of FPL
 - 46,275 migrant and seasonal agricultural workers

<http://www.ncchca.org/177419.ihtml>



Safety Net

○ NC Rural Health Centers

- 108 federally certified rural health centers
- 81 state established rural health centers (most are also federally certified)
- 32 state-funded rural health centers
- Must provide care to Medicaid and Medicare recipients
- Exist in Health Professional Shortage Area (HPSA)
- Must provide primary care

NC IOM Task Force on the North Carolina Healthcare Safety Net Report
<http://www.nciom.org/projects/SafetyNet/safetynetreport.html>



Safety Net

- NC Rural Health Centers
 - Of 32 state funded rural health clinics:
 - 101,648 total users (SFY 2003)
 - 21% uninsured
 - 21% Medicaid
 - 28% Medicare
 - 30% Other forms of insurance

NC IOM Task Force on the North Carolina Healthcare Safety Net Report
<http://www.nciom.org/projects/SafetyNet/safetynetreport.html>



Safety Net

○ Free Clinics

- Private, non-profit, community based organizations that provide medical care at little or no cost to low-income, uninsured and underinsured persons
- Uses volunteer health care professionals and partnerships with other health care providers

<http://www.ncfreeclinics.org>



Safety Net

- Free Clinics

- 50 free clinics in NC
- 69,320 patients (2003)
 - 59,840 primary care and medical services
 - 9,480 specialized clinics –pharmaceutical or behavioral health

www.ncfreeclinics.org

NC IOM Task Force on the North Carolina Healthcare Safety Net Report

<http://www.nciom.org/projects/SafetyNet/safetynetreport.html>



Safety Net

- Local Health Departments
 - 85 Local Health Departments in NC
 - 79 single county
 - 6 district health departments
 - 39 with primary care

NC IOM Task Force on the North Carolina Healthcare Safety Net Report
<http://www.nciom.org/projects/SafetyNet/safetynetreport.html>



Safety Net

- Local Health Departments
 - 341,601 patients in SFY 2003
 - 260,603 (41%) uninsured
 - 36,657 seen in adult health clinics

NC IOM Task Force on the North Carolina Healthcare Safety Net Report
<http://www.nciom.org/projects/SafetyNet/safetynetreport.html>



Safety Net

- Safety Net Provider Issues include:
 - Continuity of care
 - Focus on disease management, not prevention
 - Lack of referral resources to specialists
 - Access to care



Access to care

○ Mrs. A

- Moving to Jacksonville, NC from Baltimore, MD
- Wants info about kidney program
- Does not qualify for kidney program
- Medicare only
- Recommended she talk with social worker at dialysis center in NC re: Medicaid eligibility and other assistance programs



Access to Care

○ Family Affair

- Brother has been on dialysis 6 years
- Sister was going to donate one of her kidneys
- Night before surgery, the surgeons cancelled because of concerns about brother's ability to pay for anti-rejection meds.
- Has Medicare only



Access to Care

- Family Affair (continued)
 - Brother's income (\$900/mo) is too high for eligibility for state kidney program (\$533/month for individual is max)
 - Suggested dialysis center and hospital social workers as resources
 - Suggested she contact pharmaceutical companies
 - Check into Medicaid eligibility



Access to Care

○ Mother's concern

- Calling about daughter - 56 year old with brain aneurysm – needs total care, has no income. Now needs dialysis.
- Suggested mom talk to social worker at dialysis center to start Medicare/Medicaid processing
- Dialysis center social worker can determine eligibility for State Kidney Program
- Suggested she talk to her local pharmacy regarding access to kidney program for medications (POMCS)



Access to Care

○ Daughter's concern

- Father on kidney transplant list at Johns Hopkins
- Uses dialysis center near Charlotte.
- Looking for medication resources after transplant. Father has Medicare, not sure about Medicaid
- Income too high for eligibility for state kidney program
- Suggested dialysis center social worker as resource, as well as social worker at Johns Hopkins.
- Suggested pharmaceutical companies as resource.
- Check into Medicaid eligibility



Focus for the Future

- Surveillance Document
- Focus on Prevention



Focus on the Future

- Surveillance Document
 - Burden of Kidney Disease in NC Report
 - Partnership with
 - UNC Kidney Center
 - National Kidney Foundation – NC
 - Southeastern Kidney Council – Network 6
 - NC DHHS DPH
 - NC State Center for Health Statistics



Focus on the Future

- ADA Education Recognition Program
 - Focus on diabetes self management
 - Prevent kidney disease
- Aging Grant
 - Statewide campaign to implement and sustain the Stanford University Chronic Disease Self-Management Program
 - Reduce the risk of disease and disability among seniors



Questions and Contact Information

Questions?

Contact information:

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