Medical Coverage Policies

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Kidney Disease Education

EFFECTIVE DATE 05/18/2010	LAST UPDATED 05/18/2	010
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This policy follows the Center for Medicare and Medicaid Services guidelines.

Description:

Chronic kidney disease (CKD) is kidney damage for 3 months or longer, regardless of the cause of kidney damage. Patients can be classified into 5 stages of CKD, based on how quickly blood is filtered through the kidneys (glomerular filtration rate, or GFR), with stage I having kidney damage with normal or increased GFR to stage V with kidney failure, also called end-stage renal disease (ESRD). Once patients with CKD are identified, treatment is available to help prevent complications of decreased kidney function, slow the progression of kidney disease, and reduce the risk of other diseases such as heart disease.

Individuals with CKD may benefit from kidney disease education (KDE) interventions as there is substantial medical information available that could affect patient outcomes, including the increasing emphasis on self-care and patients' desire for informed, autonomous decision-making. Pre-dialysis education can help patients achieve better understanding of their illness, dialysis modality options, and may help delay the need for dialysis. Education interventions should be patient-centered, encourage collaboration, offer support to the patient, and be delivered consistently.

KDE services should be tailored to meet the needs of the individual involved, designed to provide them opportunities to actively participate in the choice of therapy by offering comprehensive information regarding:

- Management of comorbidities, especially for the purpose of delaying the need for dialysis;
- Prevention of uremic complications; and
- Each option for renal replacement therapy (including hemodialysis and peritoneal dialysis, at home and in-facility, dialysis access options, and transplantation).

Medical Criteria:

Not applicable, this is a reimbursement policy.

Policy:

Medicare:

Kidney disease education services are covered only for Blue CHiP for Medicare members diagnosed with Stage IV CKD (severe decrease in glomerular filtration rate (GFR); GFR value of 15-29 ml/min/ 1.73 m2)for the following conditions and not covered for all other BCBSRI products:

- No more than 6 sessions of KDE services are provided in a member's lifetime;
- Either individual sessions or in a group setting of 2 to 20 individuals, and
- When provided by the referring physician managing the member's kidney condition, or by a qualified individual, such as a;
 - o physician, physician's assistant, nurse practitioner, or clinical nurse specialist;

o hospital, critical access hospital (CAH), comprehensive outpatient rehabilitation facility (CORF), home health agency (HHA), or hospice, that is located in a rural area; or

o hospital or CAH that is paid as if it were located in a rural area.

Medicare policy is developed separately from BCBSRI policy. Medicare policy incorporates consideration of governmental regulations from CMS (Centers for Medicare and Medicaid Services), such as national coverage determinations or local coverage determinations. In addition to benefit differences, CMS may reach different conclusions regarding the scientific evidence than does BCBSRI. Medicare and BCBSRI policies may differ. However, BlueCHiP for Medicare members must be offered, at least, the same services as Medicare offers.

NOTE: KDE services are **not covered** when provided by renal dialysis facilities.

Coverage:

Benefits may vary between groups and contracts. Please refer to the appropriate subscriber agreement or RIte Care contract for the education coverage/benefits. For BC for Medicare, no benefit category currently exists in the 2010 Evidence of Coverage. For that product, the service will be covered with no copay in 2010.

Coding and Reimbursement:

HCPCS codes to be used to report KDE services covered for Blue CHiP for Medicare only:

G0420 Face-to-face educational services related to the care of chronic kidney disease; individual, per session, per one hour

G0421 Face-to-face educational services related to the care of chronic kidney disease; group, per session, per one hour

Sessions should be billed in increments of 1 hour (In order to bill for a session, a session must be at least 31 minutes in duration. A session that lasts at least 31 minutes, but less than 1 hour still constitutes 1 session.)

A seperately identifiable E&M service may be filed at the same time.

Related Topics:

Not applicable.

Also Known As:

Not applicable

Published:

Provider Update, July 2010

Reference:

Centers for Medicare and Medicaid Services: CMS MLN Matters MM6557 Coverage of Kidney Disease Patient Education; Released 12/18/09

This medical policy is made available to you for informational purposes only. It is not a guarantee of payment or a substitute for your medical judgement in the treatment of your patients. Benefits and eligibility are determined by the member's subscriber agreement or member certificate and/or the employer agreement, and those documents will supersede the provisions of this medical policy. For information on member-specific benefits, call the provider call center. If you provide services to a member which are determined to not be medically necessary (or in some cases medically necessary services which are non-covered benefits), you may not charge the member for the services unless you have informed the member and they have agreed in writing in advance to continue with the treatment

at their own expense. Please refer to your participation agreement(s) for the applicable provisions.

This policy is current at the time of publication; however, medical practices, technology, and knowledge are constantly changing. BCBSRI reserves the right to review and revise this policy for any reason and at any time, with or without notice.



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