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# A BILL FOR AN ACT

RELATING TO KIDNEY DISEASE.

**BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:**

1           SECTION 1. (a) More than a century ago, Mother Marianne  
2 Cope and six Sisters of the Third Franciscan Order of Syracuse,  
3 New York, arrived in the islands in response to an urgent plea  
4 for their assistance in caring for the victims of Hansen's  
5 Disease. Mother Marianne and the Sisters began their service at  
6 the Branch Leper Hospital in Honolulu and five years later began  
7 serving in the Leper Settlement at Kalaupapa on Molokai. Since  
8 1883, the Sisters of St. Francis' mission as advocates for the  
9 poor and disadvantaged continues through the work of the St.  
10 Francis Healthcare System and its staff, fulfilling their  
11 historic role as visionaries and risk-takers. The St. Francis  
12 Healthcare System's history is steeped with inventive methods  
13 for addressing health care needs, including organ transplants,  
14 hemodialysis, home care, and hospice programs.

15           The St. Francis Healthcare System is developing an  
16 innovative concept for the residents of Hawaii with *Stay Healthy*  
17 *at Home*, a program for Hawaii's expanding older adult population  
18 and patients of chronic diseases. This program provides



1 services that allow them to stay at home for as long as possible  
2 and brings health care to patients right where they live. *Stay*  
3 *Healthy at Home* is modeled after a successful Boston program  
4 that offers services on a fee-for-service basis. *Stay Healthy*  
5 *at Home* will promote independent living and arrange a host of  
6 individualized supportive care services on an à la carte, fee-  
7 for-service basis in the person's home. The general concept of  
8 the program includes:

9 (1) Ongoing training and educational sessions for chronic  
10 disease self-management that targets the appropriate  
11 population;

12 (2) Wellness promotion by providing individuals with  
13 support services required at various levels of aging,  
14 such as medication management oversight by a  
15 pharmacist and registered nurse; and

16 (3) Case management for specific health issues, such as  
17 chronic heart disease, diabetes, and kidney disease  
18 with referrals to community resources and support  
19 services.

20 (b) Within the *Stay Healthy at Home* concept and consistent  
21 with promoting independent living, the St. Francis Healthcare  
22 System is developing a major health care initiative in the area



1 of chronic kidney disease through a four-year demonstration  
2 project to:

3 (1) Address health care access issues for chronic kidney  
4 disease patients located in target rural areas of  
5 Hawaii based on need and demographics;

6 (2) Develop a proving model for a modified home  
7 hemodialysis program in rural areas for sustainable  
8 reimbursements from the Centers for Medicare and  
9 Medicaid Services; and

10 (3) Develop a research program with the National Kidney  
11 Foundation in conjunction with the University of  
12 Hawaii John A. Burns school of medicine that focuses  
13 on stabilizing and slowing down the progression of  
14 chronic kidney disease.

15 (c) The legislature finds that chronic kidney disease,  
16 which is divided into five stages, affects all age groups.  
17 Patients at the last stage, or end-stage renal disease, require  
18 dialysis or kidney transplantation. The cost of treatment and  
19 care for end-stage renal disease patients is much higher than  
20 for patients at the earlier stages.

21 It is estimated that ten per cent of Hawaii's population,  
22 or 100,000 individuals, are afflicted with chronic kidney



1 disease. Approximately 2,000 of these patients have end-stage  
2 renal disease. The prevalence rate of end-stage renal diseases  
3 in Hawaii is 1,502 per million. This is 44 per cent higher than  
4 the national rate of 1,040 per million. The number of end-stage  
5 renal disease patients in Hawaii is increasing at an annual rate  
6 of five per cent, while the national rate has declined to one  
7 per cent. The current cost of caring for end-stage renal  
8 disease patients in the state is \$125,000,000, and that cost is  
9 projected to reach \$144,000,000 by 2011.

10 The legislature further finds that the St. Francis  
11 Healthcare System is developing a major chronic kidney disease  
12 health care demonstration project to address health care access  
13 issues for end-stage renal disease in remote areas of Hawaii.  
14 It is also developing a research program to help care for  
15 patients with chronic kidney disease. The focus of the  
16 demonstration project is to promote education, detection,  
17 prevention, and medical management, and treatment for those with  
18 chronic kidney disease through a modified home care and  
19 community health program. Under this program, patients in  
20 various stages of chronic renal disease would be able to visit a  
21 common site within their own community to receive necessary  
22 care.



1           The legislature further finds that locating a treatment and  
2 care site within patients' own communities will greatly improve  
3 their quality of life, especially patients with end-stage renal  
4 disease. End-stage renal disease patients, especially those who  
5 live in remote areas of the state, would not have to bear the  
6 physical punishment of enduring long commutes to a dialysis  
7 facility. For example, many end-stage renal disease patients  
8 living in rural communities presently must travel several hours  
9 to a dialysis clinic for treatment. After four hours of  
10 dialysis, they must endure the return trip home. To live, these  
11 patients must tolerate this tortuous ordeal three times a week.

12           Logistical challenges, such as allocating adequate space in  
13 a patient's home, the need for reliable electric and water  
14 service, and proper medical waste disposal, make home dialysis  
15 impractical. Furthermore, many end-stage renal disease patients  
16 live in multi-generational households where space and privacy  
17 are at a premium.

18           The legislature further finds that constructing full-scale  
19 dialysis facilities within isolated rural communities would not  
20 be cost-effective. An estimated minimum of 60 patients would be  
21 needed for such a facility to break even. The costs of start-up



1 and maintenance of full-scale facilities in remote areas would  
2 be prohibitive and unrealistic.

3 (d) The demonstration project proposes a facility located  
4 in a rural community to be selected based on need and  
5 demographics. The project would use a modified home care and  
6 community health approach that would allow dialysis patients to  
7 place their personal dialysis machines within a common facility.  
8 These facilities would have the necessary infrastructure and  
9 logistics to accommodate the machines, and trained personnel  
10 would be available to administer and monitor treatment. At the  
11 same facility, a multidisciplinary chronic kidney disease team  
12 would deliver various services, including:

- 13 (1) Patient education;
- 14 (2) Dietary counseling;
- 15 (3) Psychosocial counseling;
- 16 (4) Laboratory screening;
- 17 (5) Preventive vaccinations and primary care physician  
18 consultation;
- 19 (6) Evaluation and treatment of co-morbid conditions such  
20 as hypertension, diabetes mellitus, and  
21 hyperlipidemia;
- 22 (7) End-stage renal disease counseling;



- 1 (8) Early referral to nephrologists and vascular surgeons;
- 2 (9) End-stage renal disease social worker psychological
- 3 evaluation and counseling; and
- 4 (10) Education to address patient and family financial
- 5 issues.
- 6 (e) The first stage of the project would involve:
- 7 (1) Construction of a permanent community center to care
- 8 for chronic disease patients;
- 9 (2) Providing and underwriting equipment, supplies,
- 10 caregivers, and dialysis treatment for end-stage renal
- 11 disease patients;
- 12 (3) Providing and underwriting community health
- 13 screenings;
- 14 (4) Establishing a chronic kidney disease treatment
- 15 program for the community;
- 16 (5) Establishing an information technology infrastructure
- 17 and database on chronic kidney disease research; and
- 18 (6) Establishing and developing a chronic kidney disease
- 19 research program with the John A. Burns school of
- 20 medicine.

21 In the second stage of the demonstration project, patients

22 living in remote areas who have available space in their homes



1 for hemodialysis would have the opportunity for a trained  
2 caregiver to work with them.

3 (f) The legislature finds that the St. Francis Healthcare  
4 System meets the requirements of a grant recipient under section  
5 42F-103, Hawaii Revised Statutes, and that a grant to the St.  
6 Francis Healthcare System to develop and implement the modified  
7 home care and community health demonstration project for chronic  
8 kidney disease patients is in the public interest and for the  
9 public health, safety, and general welfare.

10 The purpose of this Act is to award a grant to the St.  
11 Francis Healthcare System to develop and implement the modified  
12 home care and community health demonstration project to provide  
13 necessary treatment for chronic kidney patients and end-stage  
14 renal disease patients in rural areas of the state.

15 SECTION 2. There is appropriated out of the general  
16 revenues of the State of Hawaii the sum of \$ or so much  
17 thereof as may be necessary for fiscal year 2008-2009 as a grant  
18 pursuant to chapter 42F, Hawaii Revised Statutes, to the St.  
19 Francis Healthcare System to develop and implement the modified  
20 home care and community health demonstration project; provided  
21 that no funds shall be released pursuant to this Act unless  
22 matched with \$1,000,000 by the St. Francis Healthcare System,





1 the National Kidney Foundation of Hawaii, federal funds, other  
2 private funds, or a combination thereof.

3 The sum appropriated shall be expended by the department of  
4 health for the purposes of this Act.

5 SECTION 3. This Act shall take effect on July 1, 2020.



**Report Title:**

Health; Chronic Kidney Disease

**Description:**

Awards a grant to St. Francis Healthcare System to support the modified home care and community health demonstration project; requires \$1,000,000 in matching funds. Effective 7/1/2020.

(HB2913 HD1)

