## WAC 182-540-055 Kidney disease program (KDP) covered services.

(1) The kidney disease program (KDP) covers the cost of health care services essential to the treatment of end-stage renal disease (ESRD) and its complications. Within available funding and at the discretion of the KDP contractor covered services include:

(a) Dialysis:

(i) Center dialysis - Covers the cost of dialysis, necessary supplies, and related services provided in a kidney center;

(ii) Home dialysis - Covers the cost of providing dialysis and related services in the home; and

(iii) Dialysis while hospitalized - Covers the cost of dialysis and related services while the KDP client is confined to an acute care facility and is unable to dialyze at his/her regular site.

(b) Medication - As defined in the approved drug list in the KDP manual;

(c) Access surgery (venous and peritoneal) - Covers costs associated with surgically preparing the client for dialysis and medical complications related to the access site;

(d) Laboratory tests and X-rays considered to be part of the overall treatment plan for ESRD;

(e) Pretransplant work-up including, but not limited to, transportation, lodging, and physician visits;

(f) Post-transplant visit to assess client's ESRD status to include, but is not limited to, transportation, lodging, and physician visits;

(g) Health insurance premium including copays and deductibles when found to be cost-effective;

(h) Spenddown expenses when found to be cost-effective; and

(i) Other services as approved by the agency's KDP program manager.

(2) If the KDP pays for medical and dental services required to receive a transplant, and the KDP client does not follow through with their recommended treatment plan in order to receive or make progress towards receiving a transplant, the KDP contractor must submit a request for a determination of noncompliance to the agency's KDP manager. If the request is approved, KDP funds must not be used for any follow-up or additional services. Once the KDP client makes progress with their treatment plan, the agency may rereview the request.

[Statutory Authority: RCW 41.05.021. WSR 13-23-065, § 182-540-055, filed 11/18/13, effective 1/1/14. WSR 11-14-075, recodified as § 182-540-055, filed 6/30/11, effective 7/1/11. Statutory Authority: RCW 74.08.090, 74.09.510, 74.09.520, 74.09.522, and 42 C.F.R. 405.2101. WSR 03-21-039, § 388-540-055, filed 10/8/03, effective 11/8/03.]