

2005 SESSION

ENROLLED

HOUSE JOINT RESOLUTION NO. 574

Recognizing Chronic Kidney Disease as a health disparity and encouraging licensed health care providers to develop a plan for early identification and implementation of an appropriate clinical management program for individuals at highest risk for Chronic Kidney Disease.

Agreed to by the House of Delegates, February 5, 2005
Agreed to by the Senate, February 24, 2005

WHEREAS, today more than 20 million Americans, approximately one in nine adults, have a form of Chronic Kidney Disease; and

WHEREAS, of these, more than 8 million have seriously reduced kidney functions that, if left untreated, may progress to a more severe level, Stage 5, or End Stage Renal Disease, during which the patient must undergo kidney dialysis several times a week or receive a kidney transplant; and

WHEREAS, African Americans suffer from Chronic Kidney Disease at four times the overall rate of Chronic Kidney Disease in the United States. African Americans make up about 13 percent of the United States population but account for 32 percent of all people treated for kidney failure; and

WHEREAS, the term "health disparity" means a difference in health status between a defined portion of the population and the majority; and

WHEREAS, Chronic Kidney Disease is a major health care burden projected to cost \$20 billion for the national health care system by the year 2010; and

WHEREAS, End Stage Renal Disease is usually the result of years of Chronic Kidney Disease caused by diabetes mellitus, high blood pressure, inherited conditions, or other insult to the kidneys; and

WHEREAS, cost-effective means are available and can determine the level of kidney function and provide information for the clinicians about therapeutic interventions that may preserve kidney function, delay progression to End Stage Renal Disease or renal transplantation, and sustain life; and

WHEREAS, evidence-based clinical guidelines have been developed by scientists and renal experts, are published in numerous peer-reviewed journals, and, if implemented, could save the lives of countless Americans; and

WHEREAS, public policy initiatives targeted at early identification of individuals at risk for Chronic Kidney Disease (those that have diabetes, high blood pressure, or a family history of kidney disease) can reduce the serious long-term effects of Chronic Kidney Disease on the affected population, thereby potentially lowering the significant economic burden on the healthcare system while improving the quality of life for numerous Americans; now, therefore, be it

RESOLVED by the House of Delegates, the Senate concurring, That Chronic Kidney Disease be recognized as a health disparity and that licensed health care providers be encouraged to develop a plan for early identification and implementation of an appropriate clinical management program for individuals at highest risk for Chronic Kidney Disease; and, be it

RESOLVED FURTHER, That the Clerk of the House of Delegates transmit a copy of this resolution to the National Kidney Foundation so that it may be apprised of the sense of the General Assembly of Virginia in this matter.

ENROLLED

HJ574ER