

**FINAL
FISCAL NOTE**

Drafting Number: LLS 13-0371
Prime Sponsor(s): Sen. Kefalas
 Rep. Primavera

Date: July 17, 2013
Bill Status: Signed into Law
Fiscal Analyst: Kirk Mlinek (303-866-2756)

TITLE: CONCERNING THE AUTHORIZATION OF DIALYSIS TREATMENT CLINICS TO PROVIDE OUTPATIENT HEMODIALYSIS TREATMENT TO PATIENTS WITH ACUTE KIDNEY FAILURE.

Fiscal Impact Summary	FY 2013-2014	FY 2014-2015
State Revenue		
State Expenditures	See State Expenditures section.	
FTE Position Change		
Effective Date: The bill was signed into law by the Governor and took effect on March 22, 2013.		
Appropriation Summary for FY 2013-2014: None required.		
Local Government Impact: None.		

Summary of Legislation

The bill eliminates the existing requirement that home dialysis only be used in cases of end-stage renal disease. It also prohibits a dialysis treatment clinic from providing outpatient hemodialysis treatment to a non-end-stage renal disease patient without a referral for treatment from a board-certified or board-eligible nephrologist licensed as a physician in Colorado. When making the referral, the nephrologist and other licensed physicians who cared for the patient in the hospital must use their professional judgment to determine when hospitalization is no longer required and the patient may receive outpatient dialysis.

State Expenditures

The bill will increase the workload for the Health Facilities and Emergency Medical Services Division (division) in the Department of Public Health and Environment. The bill will require the division to modify dialysis center rules; however, the update required by the bill will be included in a rules update that is already scheduled, meaning that the increase in workload will be absorbed within existing appropriations.

The Department of Health Care Policy and Financing uses Medicare rules as they pertain to dialysis at dialysis treatment clinics. In accordance with Medicare rules for billing, outpatient dialysis at a Medicare-certified renal dialysis clinic is only reimbursable for patients with end-stage renal disease. As a result, Medicare reimbursements under the bill will not increase.

Departments Contacted

Public Health and Environment
Health Care Policy and Financing

Regulatory Agencies