

WEST VIRGINIA LEGISLATURE

2024 REGULAR SESSION

Introduced

Senate Bill 672

By Senators Grady, Phillips, and Chapman

[Introduced February 6, 2024; referred
to the Committee on Health and Human Resources;
and then to the Committee on Finance]

1 A BILL to amend and reenact §9-5-20 of the Code of West Virginia, 1931, as amended, relating to
 2 Medicaid coverage for blood pressure monitoring devices to be offered to certain persons
 3 who have been diagnosed with hypertension; requiring benefits be provided; and requiring
 4 reimbursement for related costs.

Be it enacted by the Legislature of West Virginia:

ARTICLE 5. MISCELLANEOUS PROVISIONS.

**§9-5-20. Medicaid program; chronic kidney disease and hypertension; evaluation and
classification; blood pressure monitors.**

1 (a) Any enrollee in Medicaid who is eligible for services and who has a diagnosis of
 2 diabetes or hypertension or, who has a family history of kidney disease, shall receive coverage for
 3 an evaluation for chronic kidney disease through routine clinical laboratory assessments of kidney
 4 function.

5 (b) Any enrollee in Medicaid who is eligible for services and who has been diagnosed with
 6 diabetes or hypertension or who has a family history of kidney disease and who has received a
 7 diagnosis of kidney disease shall be classified as a chronic kidney patient.

8 (c) The diagnostic criteria used to define chronic kidney disease should be those generally
 9 recognized through clinical practice guidelines which identify chronic kidney disease or its
 10 complications based on the presence of kidney damage and level of kidney function.

11 (d) Medicaid providers shall be educated by the Bureau for Public Health in an effort to
 12 increase the rate of evaluation and treatment for chronic kidney disease. Providers should be
 13 made aware of:

14 (i) Managing risk factors, which prolong kidney function or delay progression to kidney
 15 replacement therapy;

16 (ii) Managing risk factors for bone disease and cardiovascular disease associated with
 17 chronic kidney disease;

18 (iii) Improving nutritional status of chronic kidney disease patients; and

- 19 (iv) Correcting anemia associated with chronic kidney disease.
- 20 (e) A Medicaid enrollee, who at the time of diagnosis of uncontrolled hypertension is
- 21 pregnant or immediately post-partum pregnancy, is eligible to receive a validated blood pressure
- 22 monitoring device. The Bureau of Medical Services shall amend the State Plan to revise the home
- 23 blood pressure monitor coverage requirements to include specific requirements for:
- 24 (1) Coverage determination for hypertension;
- 25 (2) Inclusion of a validated self-measured blood pressure device;
- 26 (3) Replacement frequency of self-measured blood pressure device;
- 27 (4) Reimbursement for self-measured blood pressure device and related services;
- 28 including training patients, transmission of blood pressure data, interpretation of readings and
- 29 costs of delivering co-interventions.
- 30 (f) The Bureau of Medical Services shall create a policy to enable data integration, storage
- 31 and transfer, and enable clinical oversight and compliance with this section.

NOTE: The purpose of this bill is to require coverage and reimbursement for home blood pressure monitoring devices for certain persons diagnosed with hypertension.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.