



Emergency Medical Condition: End-Stage Renal Disease

December 2018

Policy Change

Effective February 1, 2019, the Department of Health Care Policy & Financing will consider End-Stage Renal Disease (ESRD) an “emergency medical condition” as defined at Colorado Revised Statutes § 24-76.5-102(1).

Background

The Social Security Act defines “emergency medical condition” as “a medical condition (including emergency labor and delivery) manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in—

- (A) placing the patient’s health in serious jeopardy,
- (B) serious impairment to bodily functions, or
- (C) serious dysfunction of any bodily organ or part.”¹

Colorado statute adopts the federal definition of “emergency medical condition.”²

The severity of the symptoms and complications associated with End-Stage Renal Disease (ESRD) meet the statutory definition of “emergency medical condition.” ESRD indicates kidney failure, and those suffering with ESRD experience nausea and vomiting, swelling, muscle cramps, cardiac implications, and trouble breathing.³ Apart from receiving a kidney transplant, there is no cure for ESRD; however, dialysis provides life-saving treatment and some relief from symptoms by removing extra fluid and waste products from patients’ blood, restoring electrolytes, and controlling blood pressure.⁴ Relief from symptoms is only temporary and without dialysis treatments

¹ 42 U.S.C. § 1396b(v)3.

² COLO. REV. STAT. § 24-76.5-102(1).

³ Kidney Failure (ESRD) Causes, Symptoms, & Treatment. American Kidney Fund. <http://www.kidneyfund.org/kidney-disease/kidney-failure/> (last visited Nov. 20, 2018).

⁴ End Stage Renal Disease. Mayo Clinic. <https://www.mayoclinic.org/diseases-conditions/end-stage-renal-disease/diagnosis-treatment/drc-20354538> (last visited Nov. 20, 2018).



every few days, patients' health status deteriorates quickly.

With this policy change, recipients of Emergency Medicaid Services, who have a diagnosis of ESRD will be able to access services necessary for the treatment of the disease. Services can be rendered in the inpatient setting—as they have been in the past—or at an independent free-standing dialysis center. Per the Department's regulations, coverage is limited to care and services that are necessary to treat an "emergency medical condition."⁵ Providers have the discretion in determining what services are necessary to treat ESRD; however, care and services related to organ transplants are not covered. When billing, providers use field 24C (EMG) to indicate an emergency on a professional claim (CMS-1500/835P) and Admission Type 1 (Emergency) or 5 (Trauma) on an institutional claim (UB-04/837I).

Conclusion

The Department of Health Care Policy & Financing will consider End-Stage Renal Disease (ESRD) to be an "emergency medical condition." ESRD and its treatment fits within the statutory definition of "emergency medical condition" because without treatment, these patients experience: (1) serious health risks and severe acute symptoms; (2) impaired bodily functions, such as reduced toxin filtration, higher risk of cardiac arrest, and improper fluid absorption; and, (3) dysfunction and failure of the kidneys. Ultimately, this policy change allows recipients of Emergency Medicaid with ESRD to receive better, more cost-effective treatment in the most appropriate setting.

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⁵ 10 CCR 2505-10 8.100.53(H).

