FIRST REGULAR SESSION HOUSE BILL NO. 1084

94TH GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVE COOPER (155).

Read 1st time March 7, 2007 and copies ordered printed.

D. ADAM CRUMBLISS, Chief Clerk

2619L.01I

AN ACT

To amend chapter 192, RSMo, by adding thereto one new section relating to chronic kidney disease task force.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 192, RSMo, is amended by adding thereto one new section, to be 2 known as section 192.632, to read as follows:

192.632. 1. There is hereby created a "Chronic Kidney Disease Task Force".
2 Unless otherwise stated, members shall be appointed by the governor and shall include, but
3 not be limited to, the following members:

- 4 (1) Two physicians appointed from lists submitted by the Missouri State Medical 5 Association;
- 6 (2) Two nephrologists;
- 7 (3) Two family physicians;
- 8 (4) Two pathologists;

9 (5) One member who represents owners or operators of clinical laboratories in the

- 10 state;
- 11 (6) One member who represents a private renal care provider;
- 12 (7) One member who has a chronic kidney disease;
- 13 (8) One member who represents the state affiliate of the National Kidney
- 14 Foundation;
- 15 (9) One member who represents the Missouri Kidney Program;

EXPLANATION — Matter enclosed in bold-faced brackets [thus] in the above bill is not enacted and is intended to be omitted from the law. Matter in **bold-face** type in the above bill is proposed language.

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(10) Two members of the house of representatives appointed by the speaker of the
 house of representatives;

18 (11) Two members of the senate appointed by the president pro tem of the senate;

- 19 (12) Additional members may be chosen to represent public health clinics, 20 community health centers, and private health insurers.
- 2. A chairperson and a vice chairperson shall be elected by the members of the task
 force.
- 23

3. The chronic kidney disease task force shall:

(1) Develop a plan to educate the public and health care professionals about the
advantages and methods of early screening, diagnosis, and treatment of chronic kidney
disease and its complications based on kidney disease outcomes, quality initiative clinical
practice guidelines for chronic kidney disease, or other medically recognized clinical
practice guidelines;

(2) Make recommendations on the implementation of a cost-effective plan for early
 screening, diagnosis, and treatment of chronic kidney disease for the state's population;

- 31 (3) Identify barriers to adoption of best practices and potential public policy 32 options to address these barriers;
- (4) Submit a report of its findings and recommendations to the general assembly
 within three hundred sixty-five days of its first meeting.
- 4. The department of health and senior services shall provide all necessary staff,
 research, and meeting facilities for the chronic kidney disease task force.