1	STATE OF OKLAHOMA
2	1st Session of the 58th Legislature (2021)
3	HOUSE BILL 2810 By: Sneed
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6	AS INTRODUCED
7	An Act relating to public health; creating the Kidney Disease Prevention and Education Task Force Act;
8	stating legislative findings; creating the Kidney Disease Prevention and Education Task Force;
9	providing for membership; providing for meeting dates; providing that members serve without
10	compensation; providing for staffing; requiring certain study, plan, and reports; providing a sunset
11	date; providing for codification; and providing an effective date.
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14	BE IT ENACTED BY THE PEOPLE OF THE STATE OF OKLAHOMA:
15	SECTION 1. NEW LAW A new section of law to be codified
16	in the Oklahoma Statutes as Section 7315 of Title 63, unless there
17	is created a duplication in numbering, reads as follows:
18	This act shall be known and may be cited as the "Kidney Disease
19	Prevention and Education Task Force Act".
20	SECTION 2. NEW LAW A new section of law to be codified
21	in the Oklahoma Statutes as Section 7316 of Title 63, unless there
22	is created a duplication in numbering, reads as follows:
23	The Legislature finds that:
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A. Kidney disease is the ninth-leading cause of death in the United States. An estimated thirty-seven million (37,000,000) people in the United States have chronic kidney disease and more than seventy-two thousand (72,000) people in the State of Oklahoma are living with the disease. Early chronic kidney disease has no signs or symptoms and without early detection can progress to kidney failure.

B. If a person has high blood pressure, heart disease, 8 9 diabetes, or a family history of kidney failure, the risk of kidney 10 disease is greater. In Oklahoma, fourteen percent (14%) of all 11 adults have diabetes, and nearly forty percent (40%) have high blood pressure. The prevalence of diabetes, heart disease, and 12 13 hypertension is higher for African Americans, who develop kidney 14 failure at a rate of nearly four to one compared to Caucasians, 15 while Hispanics have a thirty percent (30%) higher risk of 16 developing kidney failure. Almost twenty-nine percent (29%) of the 17 people waiting for a kidney in the United States identify as African 18 American, but, in 2019, less than twenty-six percent (26%) of those 19 waiting received a kidney.

C. Although dialysis is a life-extending treatment, the best and most cost-effective treatment for kidney failure is a kidney transplant. Currently, the wait in Oklahoma for a deceased donor kidney is five (5) to seven (7) years, and nationally twelve people die while waiting every day.

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D. If chronic kidney disease is detected early and managed appropriately, the individual can receive treatment sooner to help protect the kidneys, the deterioration in kidney function can be slowed or even stopped, and the risk of associated cardiovascular complications and other complications can be reduced.

E. In light of the Covid-19 pandemic and the increased risk of
infection to patients with preexisting conditions and Covid-19
patients acquiring acute kidney disease, it is imperative to provide
support for those with kidney disease.

10 SECTION 3. NEW LAW A new section of law to be codified 11 in the Oklahoma Statutes as Section 7317 of Title 63, unless there 12 is created a duplication in numbering, reads as follows:

A. There is hereby created the Kidney Disease Prevention andEducation Task Force.

B. The Task Force shall consist of at least fourteen (14)
members to be appointed or selected as follows:

The President Pro Tempore of the Oklahoma State Senate, or
 his or her designee, who shall serve as cochair;

The Speaker of the Oklahoma House of Representatives, or his
 or her designee, who shall serve as cochair;

3. One member of the Oklahoma State Senate, who shall be
appointed by the minority leader of the Senate;

4. One member of the Oklahoma House of Representatives, who
shall be appointed by the minority leader of the House;

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1 5. Two members, appointed by the Governor, one of whom shall 2 represent the State Department of Health and the other of whom shall 3 represent a nationwide, nonprofit organization dedicated to kidney 4 research, education, and support; 5 6. The Secretary of State, or his or her designee; Seven members appointed by the cochairs, as follows: 6 7. 7 one member representing the renal care provider a. community, 8 9 b. one member representing a medical center with a 10 kidney-related program, 11 с. one member representing the kidney physician 12 community, 13 d. one member representing a nonprofit organ procurement 14 organization, 15 one member representing the kidney patient community e. 16 in Oklahoma, 17 f. one member representing tribal governments, and 18 one member representing providers of emergency q. 19 ambulance transportation; and 20 8. Other additional members, appointed by the cochairs as they 21 see fit, representing public health clinics, community health 22 centers, minority health organizations, and private health insurers. 23 C. The Task Force shall conduct an organizational meeting not 24 later than December 31, 2021. A majority of the members present at

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the organizational meeting or any subsequent meeting shall constitute a quorum for the purpose of any action taken including the preparation and approval of the reports required by subsection G of this section. The Task Force shall be authorized to meet as necessary in order to perform the duties imposed upon it.

D. Members of the Task Force shall serve without compensation.
E. Staff assistance for the Task Force shall be provided by the
8 staff of the State Department of Health.

9 F. The Task Force shall conduct a study regarding chronic 10 kidney disease, transplantations, living and deceased kidney 11 donation, and the disparities in affliction rates among racial 12 groups. After the study is complete, the Task Force shall develop a 13 sustainable plan to raise awareness about early detection, promote 14 health equity, promote transplantation, and reduce the burden of 15 kidney disease throughout Oklahoma. The plan shall include an 16 ongoing campaign that includes health education workshops and 17 seminars, preventive screenings, relevant research, and that 18 promotes social media campaigns and television and radio 19 commercials.

G. The Task Force shall submit an initial report to the
Governor, the Speaker of the Oklahoma House of Representatives, and
the President Pro Tempore of the Oklahoma State Senate not later
than December 31, 2022, and annually thereafter.

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1	H. The provisions of this section shall cease to have the force
2	and effect of law and the Task Force shall terminate effective
3	January 1, 2027.
4	SECTION 4. This act shall become effective November 1, 2021.
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