

Agreement 19: Chronic Kidney Disease Progression Prevention Program

Parties: RenalCare Alliance and Australian Medicare **Country:** Australia **Disease Area:** Stage 3-4

Chronic Kidney Disease Agreement Overview: This innovative agreement addresses the significant health and economic burden of chronic kidney disease progression through early intervention.

Targeting approximately 4,800 patients with Stage 3-4 CKD across Australia, this contract incentivizes delayed progression to end-stage renal disease requiring dialysis or transplantation. The agreement incorporates comprehensive medical management, patient self-care, and specialized interventions for high-risk subgroups including diabetic nephropathy and glomerulonephritis.

Financial Structure:

- Annual care management: AUD 8,600 per patient for comprehensive CKD services
- Stage-based adjustment:
 - Stage 3a: AUD 5,200 base payment
 - Stage 3b: AUD 8,600 base payment
 - Stage 4: AUD 12,800 base payment
- Performance incentives:
 - 25% bonus for maintaining stable eGFR (decline <2 mL/min/1.73m² annually)
 - 20% bonus for controlling proteinuria (>50% reduction from baseline)
 - 35% bonus for delaying dialysis initiation beyond expected timeline
- Cost avoidance calculation: Provider receives 45% of savings from prevented or delayed dialysis
- High-risk patient adjustment: 30% higher payment for patients with diabetic nephropathy
- Hospitalization reduction: AUD 3,200 bonus per prevented CKD-related hospitalization
- Medication optimization incentive: AUD 950 per patient optimized on nephroprotective therapies
- Program ceiling: Maximum annual expenditure of AUD 48 million with risk-sharing
- Aboriginal and Torres Strait Islander supplement: 25% higher payment reflecting increased complexity

Duration: 5 years with annual performance review **Special Provisions:**

- Comprehensive nephrology evaluation every 4-6 months
- Standardized CKD management protocol following KDIGO guidelines
- Dedicated CKD nurse coordinator (1:75 ratio)
- Dietary counseling with renal-specific nutritional plans
- Remote monitoring of blood pressure, weight, and symptoms
- Point-of-care testing for rural and remote communities

- Medication review and deprescribing protocol for nephrotoxic agents
- Vascular access planning for patients approaching ESRD
- Conservative care pathway option for appropriate patients
- Integrated care with endocrinology for diabetic nephropathy