

# Protect Patients *with Sepsis*



HB 477 would require Managed Care Organizations (MCOs) to follow the same guidelines for Medicaid the federal government has already established for Medicare. The Cabinet currently requires the MCOs to cover treatment for Sepsis-2 but the MCOs want to stop that coverage and not pay for treatment of sepsis patients until the patient falls into Sepsis-3, where the patient has organ failure. **Please support HB 477 and protect patients with sepsis.**

## Support HB 477

- **HB 477 simply continues current policy** and requires the Cabinet and MCOs to continue covering sepsis patients just like the federal government requires for Medicare.
- **More than 35,000 Kentuckians are hospitalized with sepsis each year, and on average, almost 17% of patients will die from severe sepsis and septic shock with an estimated cost of over \$2.3 billion.**
- Sepsis is a syndrome encompassing a collection of symptoms rather than a single disease and is the body's extreme response to an infection. It can result in a life-threatening emergency which can lead to organ damage, organ failure, or death if not identified and treated quickly and correctly.
- **Early identification of sepsis and rapid treatment have been shown to prevent progression to organ failure and death.**
- In 2021 Kentucky ranked as the **fourth highest state for Septicemia mortality.**
- The U. S. Centers for Medicare and Medicaid Services (CMS) adopted and follows the definition, national coding classification, and Diagnosis Related Group assignment for Sepsis-2 because it encourages the early identification and treatment of sepsis.
- **The U.S. Centers for Medicare and Medicaid Services has approved using the CMS definition of Sepsis-2 as one of the hospital quality metrics in the Kentucky Hospital Rate Improvement Program.**

**Early  
identification  
of sepsis  
and rapid  
treatment  
saves lives!**

*For more information, contact:*



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