



Employer Toolkit: Kidney Disease and Cost Management

PRACTICAL GUIDANCE FOR EMPLOYERS

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SECTION A: Orientation



How to Use This Toolkit

HOW TO USE THIS TOOLKIT

Chronic kidney disease (CKD) affects an estimated **1 in 7 U.S. adults** and is often considered a “silent” disease because it typically has no symptoms in its early stages. As a result, most people who have CKD don’t know it. For employers, this makes CKD a high-cost condition that often goes unnoticed, particularly because it is closely tied to diabetes, high blood pressure and heart disease.

This toolkit is designed to help employers take simple, practical steps to address kidney health by building on what they already do for chronic conditions.

- Understand how kidney disease overlaps with diabetes and heart health in their workforce
- Support routine kidney screening and education for at-risk employees
- Integrate kidney health into existing benefits and chronic disease programs

WHO THIS IS FOR

- HR/Benefits leaders
- CFOs and finance teams
- Workforce leaders and employee resource group (ERG) sponsors
- Health plan/Third-Party Administrator (TPA) partners
- Diabetes and hypertension program vendors

Privacy note: Employee health information is private. Employers do not have access to individual medical details, diagnoses, or test results. Health information is managed by health care providers and health plans in accordance with privacy laws.

HOW TO GET STARTED IN THREE STEPS

1. Learn why kidney health matters for employers by reviewing the Executive Brief.
2. Confirm kidney screening is included in existing health programs by reviewing your covered benefits.
3. Educate employees about kidney health using the included communications templates.

IMPORTANT NOTE

This toolkit is for **informational and educational purposes only**. It does **not** provide medical advice, diagnosis or treatment recommendations. All benefit and clinical decisions should be made with appropriate clinical and plan partners.

SECTION B:

Leadership Education



Why Early Kidney Care, Why Now?

KIDNEY DISEASE AT A GLANCE

- **Common:** More than 1 in 7 U.S. adults (about 35.5 million people) are estimated to have chronic kidney disease (CKD).
- **Mostly silent:** As many as 9 in 10 adults with CKD do not know they have it.
- **Closely Linked:** Diabetes is the leading causes of CKD and high blood pressure is a major contributing factor.
- **Compounding Risk:** CKD increases the risk of cardiovascular complications and hospitalization.
- **Costly:** CKD can account for up to 10% of employer health care spending when detected late and inadequately managed. With no cure for CKD, unmanaged disease becomes an escalating and long-term financial burden, driven by the high costs of dialysis and kidney transplantation.

Most CKD develops gradually over time, often alongside diabetes, hypertension, obesity, and cardiovascular disease. Because kidney disease rarely causes symptoms early on, it frequently goes undetected until complications arise. However, CKD can also result from genetic conditions or acute kidney injury (AKI), including kidney damage after events like heart attack, sepsis, surgery, or certain medications.

When kidney disease is identified earlier, progression can often be slowed through medications and better management of blood sugar, blood pressure and other risk factors. When it is missed, employees are more likely to experience serious complications that affect health, productivity and costs.



WHY EMPLOYERS SHOULD PUT KIDNEY DISEASE ON THEIR RADAR

For employers, especially self-funded, kidney disease is:

- **High cost:** Dialysis is a major cost driver; for privately insured patients, total health care spending in the **first year of dialysis averages about \$90,000 per patient**, depending on treatment type and payer mix.
- **Low visibility:** Many high-risk employees don't have a CKD diagnosis code; the condition is often buried inside diabetes, hypertension, and cardiovascular claims.
- **Predictable risk:** Employees with diabetes, hypertension and certain demographic risk factors can be identified in claims and lab data long before kidney failure occurs.
- **Productivity and equity issue:** CKD is more common and more severe in certain racial/ethnic groups and socio-economic groups, and can lead to missed work, reduced hours and financial strain.

The key takeaway: Kidney health is not a separate issue from diabetes and heart health. It is part of the same chronic disease story.



WHAT EARLY KIDNEY CARE MEANS IN PRACTICE

Employers do not need a dedicated kidney program to make a difference. The biggest opportunities are improving awareness and making kidney testing routine for people already known to be at higher risk, especially those with diabetes or hypertension:

- Normalize kidney testing as part of routine care for employees with diabetes and high blood pressure
- Provide clear, plain-language education, so employees understand what CKD is and why testing matters
- Ensure your diabetes and hypertension vendors include kidney health prompts (testing, education and follow-up)

What Non-Clinicians Need to Know

WHAT IS CHRONIC KIDNEY DISEASE?

Chronic kidney disease (CKD) happens when the kidneys are damaged over time and can't filter blood as well as they should. Waste and extra fluid build up in the body, leading to high blood pressure, heart disease, stroke, anemia, bone disease, and eventually kidney failure if not managed.

CKD usually develops slowly, often over many years.

WHY IS KIDNEY DISEASE SO OFTEN MISSED?

- **Few or no symptoms early on** – People usually feel fine even when their kidneys are not working well.
- **Hidden inside other conditions** – CKD frequently occurs alongside diabetes, high blood pressure and heart disease.
- **Testing gaps** – Blood and urine tests are available, but not all at-risk patients get them regularly.
- **Low awareness** – Up to 9 in 10 adults with CKD don't know they have it.





WHO IS AT HIGHER RISK?

Employees and dependents are at higher risk if they:

- Have **diabetes**
- Have **high blood pressure**
- Have **heart disease** or a history of stroke
- Are **over age 60**
- Have a **family history** of kidney disease
- Live with **obesity**
- Belong to a group that faces higher rates of CKD and kidney failure (including Black, Hispanic/Latino and some Indigenous communities)

HOW IS KIDNEY DISEASE DETECTED?

For people at risk, detecting CKD early usually involves:

- A **blood test** to estimate kidney function (often reported as eGFR)
- A **urine test** to check for albumin (protein) that can signal kidney damage (often reported as uACR)

Together, these tests, when ordered by a member of one's health care team, can identify kidney damage before symptoms appear, allowing providers to manage blood pressure, blood sugar and other factors to slow or prevent progression.

WHY SHOULD EMPLOYERS CARE?

- CKD is common, under-diagnosed and expensive.
- It often shows up inside existing high-cost conditions, which employers already target.
- Early detection and management can:
 - Reduce the likelihood of kidney failure and dialysis
 - Lower hospitalizations and emergency care
 - Support employees in staying healthy and working
 - Delay dialysis or transplant

Your role as an employer is not to diagnose kidney disease, but to make early detection and management easy and routine for employees who are at risk.

Kidney Disease and Health Equity in Your Workforce

Chronic kidney disease is not just a medical issue. It is a health equity issue.

UNEQUAL BURDEN

In the United States, kidney disease and kidney failure disproportionately affect:

- Black/African American adults
- Hispanic/Latino adults
- Some Native American/Alaska Native and other Indigenous communities
- Asian Americans and Pacific Islanders

These groups often experience **higher rates of diabetes and high blood pressure** and face barriers to prevention, early diagnosis and specialty care.

Employees in lower-wage roles may also have:

- Less flexibility for appointments
- Transportation challenges
- Higher levels of financial stress related to health care costs

WORKPLACE IMPACTS

For employees and families living with CKD or kidney failure, the workplace impact can include:

- Time away from work for dialysis, medical appointments and other treatments
- Fatigue and other symptoms that affect energy and concentration
- Financial strain from medical expenses and reduced income

HOW A KIDNEY DISEASE INITIATIVE CAN ADVANCE EQUITY

By being intentional, employers can make kidney health efforts equity-enhancing, not just cost-containing:

- **Identify gaps** – Where possible and appropriate, ask your health plan/TPA to stratify key CKD metrics (e.g., testing rates) by age, gender and race/ethnicity.
- **Engage employee resource groups** – Involve ERGs in shaping messaging, imagery and outreach channels so materials resonate with communities at higher risk.
- **Reduce access barriers** – Consider limiting cost-sharing for recommended kidney tests and key visits for at-risk employees. Support paid time or flexible scheduling for medical appointments.
- **Address language and literacy** – Ensure educational materials are available in the predominant languages of your workforce and written in plain language. The American Kidney Fund and other kidney health charities have educational information on their websites that can be used for this purpose.

SECTION C:

Benefit and Plan Design



Kidney Health Checklist (for employers)

Use this one-page checklist to confirm that your benefits and programs support the three priorities in this toolkit. Keep it simple: check what you already do and select one or two items to add this year.

PRIORITY 1 – ENCOURAGE EARLY KIDNEY SCREENING

- Employee communications encourage at-risk employees (diabetes, high blood pressure, heart disease, family history of kidney disease or kidney failure) to ask their PCP about kidney tests (blood + urine)
- The benefits portal will clearly explain how routine lab testing and PCP visits are covered and how to find an in-network lab/provider
- A clear call to action is shared at least once per year (e.g., open enrollment, wellness month)

PRIORITY 2 – EDUCATE EMPLOYEES ABOUT CKD

- A simple CKD explainer is available, including what CKD is, why it is often silent and who is at risk
- Educational materials connect kidney health to diabetes and blood pressure management (cardio-kidney-metabolic health) to explain why early detection matters
- Educational materials are available in the primary languages used by the workforce and written at an accessible reading level

PRIORITY 3 – MAKE DIABETES & HYPERTENSION PROGRAMS CKD-FRIENDLY

- Diabetes program materials and coaching explicitly encourage participants to undergo an annual kidney health evaluation (eGFR + uACR), consistent with clinical guidance
- Hypertension program materials mention kidney health and encourage participants to ask their clinician about kidney testing
- Program vendors provide simple “next steps” that encourage clinician follow-up when a participant reports abnormal results

Making Wellness Programs Kidney Disease-Friendly

WHAT TO ADD OR ENHANCE

In recent years, many employers have launched diabetes and hypertension programs with coaching, disease management and digital tools. To make those programs more CKD-friendly, you do not need to build something new. You just need to add a few kidney-specific prompts and measures.

- **Add kidney testing reminders:** Encourage at-risk participants to ask their clinicians about eGFR and uACR testing, which measure your kidney function and albumin and creatinine, respectively.
- **Add a short kidney education module:** Include 5-10 minutes in the program/app explaining CKD, why it often lacks symptoms and why testing matters. This content may be delivered through existing program materials or by directing participants to trusted resources, such as the American Kidney Fund's [Kidney Health Coach program](#).
- **Connect the dots:** Make sure diabetes and blood pressure coaching explicitly mentions kidney health as part of cardio-kidney-metabolic health.
- **Include “what to do next” language:** Encourage participants with abnormal results to follow up with their clinician.
- **Remove friction:** Ensure that program materials tell employees where to go (e.g., PCP, in-network lab, telehealth) and how benefits cover routine labs.

FOUR QUESTIONS TO ASK PROGRAM VENDORS

- For participants with diabetes, do you encourage an annual kidney health evaluation (eGFR and uACR)?
- Do your coaches/care managers have a standard script to explain kidney tests and encourage PCP follow-up?
- Do you provide materials in plain language and in the primary languages of our workforce?
- When abnormal kidney results are reported (through clinical channels), do you have a process to encourage appropriate follow-up and care navigation?

SECTION D:

Internal Communications



Stakeholder Messages on Kidney Health

Use these short messages when you talk about CKD with different internal stakeholders.

FINANCE/CFO

Core message: Kidney disease is common and asymptomatic, often unrecognized until late stages. Helping at-risk employees get checked earlier is a practical risk-management step that aligns with our existing chronic condition strategy.

Supporting point: National data suggests that CKD can account for up to 10% of employer health care costs when underdiagnosed. Early kidney screening and preventative support programs cost much less than dialysis and transplant.

HR/BENEFITS/WELLBEING LEADERS

Core message: We can improve employee health and protect benefit dollars by making kidney health a visible part of our chronic condition strategy, using our existing benefits that support diabetes and blood pressure. That includes encouraging routine kidney checks for people at higher risk and offering education.

Supporting point: Simple changes, like encouraging CKD screenings and providing educational materials, can help employees get the care they need earlier and avoid a health crisis, improving employee productivity.

MANAGERS

Core message: [Company Name] encourages preventive care. If you have diabetes or high blood pressure, talk with your doctor about whether you should have routine kidney blood and urine tests. Your health information is private, and we won't ask you for medical details.

Supporting point: Nearly 9 in 10 people with kidney disease don't know they have it, which is why routine testing is an important part of diabetes and blood pressure care.

Launch Communications Tools

SAMPLE CHIEF HUMAN RESOURCES OFFICER/BENEFITS EMAIL TO EMPLOYEES

Subject line: Protect Your Kidneys: A Simple Check That Matters

Hi [First Name],

At [Company Name], we want to help you stay healthy. This includes caring for a part of your body many of us don't think about: your kidneys.

Your kidneys help filter waste and extra fluid from your blood. When they aren't working well, this can lead to serious health problems like high blood pressure, heart disease, and, in severe cases, kidney failure. The challenge is that chronic kidney disease (CKD) is common and often has no symptoms early on. Many people don't know they have CKD until it has advanced to later stages.

WHAT YOU CAN DO

You may be at higher risk for kidney disease if you have diabetes, high blood pressure, heart disease, a family history of kidney disease or kidney failure, or are older than 60.

But the good news is that simple blood and urine tests can help check your kidney health.

At your next routine visit, ask your primary care provider: "Have I had a kidney function blood test (eGFR) and a urine test for albumin (uACR) recently?"

If not, ask: "Could I get them this year?"

To learn more about your coverage and in-network care options, visit [Benefits Portal Link] or call [Health Plan Member Services Phone Number].

Your health information is private and managed by your health care providers and health plan.

Your health matters – to your family, to us, and to you. We're here to support you in taking care of it.

Best,

[Name]

[Title, e.g., Chief Human Resources Officer]

[Company Name]



SAMPLE INTRANET ARTICLE

Title: “Your Kidneys Work Hard for You. Here’s How to Protect Them.”

Your kidneys quietly filter your blood all day, every day. When they aren’t working well, they can affect your heart, energy and overall health. Chronic kidney disease (CKD) is common, but it often has no early symptoms, so many people don’t know they have it.

Who’s at higher risk?

You may have a higher risk of kidney disease if you are over age 60 or have diabetes, high blood pressure, heart disease or a family history of kidney disease or kidney failure.

Simple tests that make a big difference

Two basic tests can help detect kidney problems:

- A **blood test** (eGFR) that estimates how well your kidneys are working
- A **urine test** (uACR) that checks for albumin/protein and can indicate kidney damage

These tests are usually ordered and reviewed by your primary care provider. If you’re in a higher-risk group, consider asking your provider whether you should have both tests this year.

What’s covered by [Company Name]?

Under **[Plan Name]**, your routine lab tests and provider visits are covered according to your medical plan benefits. For details, visit **[Benefits Portal Link]** or review your **[Plan Document Link]**.

If you have questions, call **[Health Plan Member Services Phone Number]** or contact **[HR/Benefits Email/Phone]**.

If you’d like to learn more about kidney health in general, visit the American Kidney Fund website, **KidneyFund.org**.

SAMPLE NEWSLETTER BLURB TO EMPLOYEES

Kidney Health Reminder: CKD is common and often has no symptoms early on. If you have diabetes, high blood pressure or a family history of kidney disease or kidney failure, ask your primary care provider if you should have a kidney function blood test (eGFR) and a urine test for albumin (uACR) this year.



ABOUT THE AMERICAN KIDNEY FUND

The American Kidney Fund (AKF) fights kidney disease on all fronts as the nonprofit with the greatest direct impact on people with kidney disease. AKF works on behalf of the 1 in 7 American adults living with kidney disease, and the millions more at risk, with an unmatched scope of programs that support people wherever they are in their fight against kidney disease – from prevention through post-transplant living. AKF fights for kidney health for all through programs that address early detection, disease management, financial assistance, clinical research, innovation and advocacy. AKF is one of the nation's top-rated nonprofits, investing 96 cents of every donated dollar in programs, and it has received 24 consecutive 4-star ratings from Charity Navigator as well as the Platinum Seal of Transparency from Candid, formerly known as GuideStar.

For more information, please visit [KidneyFund.org](https://www.kidneyfund.org), or connect with AKF on [Facebook](#), [Bluesky](#), [X](#), [Instagram](#) and [LinkedIn](#).