We need your Insurance Cards!!

* WEASK FOR THEM EVERY 3 MONTHS

- * Even if you gave us your new ones in January
- * Even if you have had the insurance card for 10 years

 We are just like any other medical office we need to verify

 that it is still current.

PLEASE SEE ANGELA, GINNY OR KIM SO THEY CAN MAKE A COPY OF YOUR INSURANCE CARD/S.





Newsletter

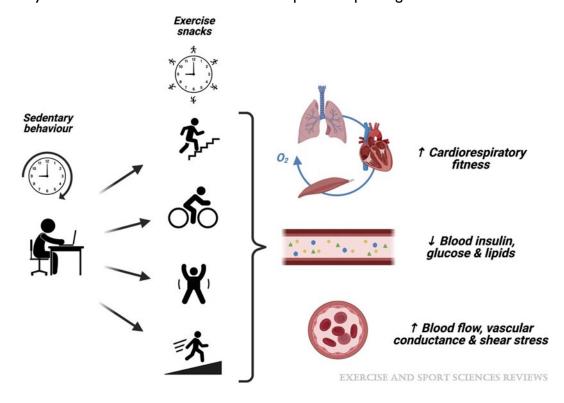
<u>"Snack"</u> Your Way To Better Health

Exercise "snacks" – less than on minute bouts of exercise done throughout the day. For example, hourly bouts of stair-based exercise snacks (~15–30 seconds) improve blood insulinemia (amount of insulin produced) and lipidemia (fat in the blood stream) as compared with 9-h of uninterrupted sitting.

Another version of short bouts of exercise which can affect health are brief bouts of incidental physical activity you likely do every day, such as, going up and down stairs, using a brisk pace when walking a short distance, carrying a light load such as children or groceries, or even walking on an incline. People who did these sorts of activities at least three days a week had measurable effects on cardiorespiratory fitness and aerobic power improvement.

Make an effort of do some physical activity every hour to 90 minutes. Doing so can have improvements to heart health, improve lung function, and help prevent type 2 Diabetes. Examples of exercises you can do with limited equipment include, jumping jacks, air squats, using a chair to go from sitting to standing, lunges, brisk walk outside or in your living area, carrying a weighted object, or walking on an incline.

Look for ways to make other tasks "harder" to increase heart rate and effort used. Taking the stairs instead of an elevator, keeping a faster walking pace, or carrying a shopping basket instead of using a cart at the grocery store, can make your body work harder. This extra effort can help with improving health.





Newsletter

HEALTHY PEOPLE PROJECT AND CKD

Background:

Healthy People is a project started in 1980 by the U.S. Department of Health and Human Services based on a landmark report written in 1979 by Surgeon General, Dr. Julius Richmond. The report launched a nationwide project focusing on health promotion and disease prevention.

Every 10 years, a new iteration of Healthy People is released and builds on the prior decade objectives. The following is a look at the Healthy People initiatives through today.

Healthy People 1990 focused on reducing deaths nationwide and increasing independence

Healthy People 2000 focused on 3 broad goals that included,

- Increase the life span through healthy living
- Reduce health disparities
- Achieve access to preventive services for all

Healthy People 2010 focused on improving quality of life and eliminating health disparities instead of reducing them

Healthy People 2020 focused on 4 overarching goals that included,

- Attain high-quality, longer lives free of preventable disease, disability, injury, and premature death
- Eliminate disparities and improve the health of all groups
- Create social and physical environments that promote good health for all
- Promote quality of life, healthy development, and healthy behaviors across all life stages

Healthy People 2030 was launched August 2020 and continues to build upon the knowledge gained over the last four decades, with an increased focus on social determinants of health, health literacy and well-being.

• Social determinants of health (SDOH) are the conditions a person was born into, lives, attends school, works, worships, and ages. SDOH provides a way to describe and measure how these conditions may affect one's health, especially over time.

Healthy People and CKD:

Healthy People 2000 was the first time CKD was listed. CKD was a focus under the priority of Diabetes and Chronic Disabling Conditions to reduce the incidence and prevalence of CKD and end-stage renal disease (ESRD), improve the quality of life for those living with CKD, and increase access to CKD preventive services and treatment options. CKD has remained a focus ever since 2000 as follows:

Healthy People 2010: The goal to reduce new cases of CKD and its complications, disability, death, and economic cost. New cases of CKD and ESRD have been measured as a way to evaluate the goal.

Healthy People 2020: The goal to reduce the burden of CKD and its complications, improve early CKD detection and treatment, and enhance the quality of life of those living with CKD. Specifically, (I) persons living with CKD receive care from a nephrologist prior to starting renal replacement therapy (dialysis and kidney transplant and prevent crashing into dialysis), and (2) increasing the number of people with CKD receiving a kidney transplant within three years of being diagnosed with ESRD.





Newsletter

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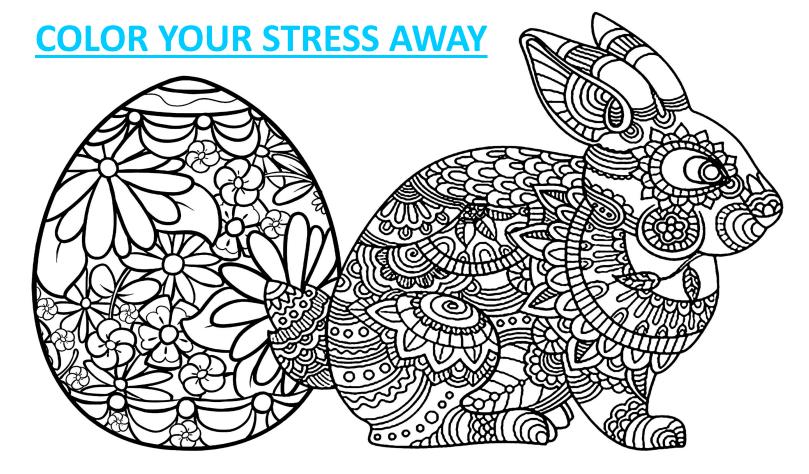
Healthy People 2030: This brings us to present day. There are many CKD foci in this decade that include

- Reducing the incidence of CKD in adolescents and adults
- Increasing CKD awareness
 - Currently only 10% of those living with CKD know they have it
- Reduce the number of new ESKD cases
 - The current name is end-stage kidney disease (ESKD) instead of ESRD to help people better recognize kidney disease as renal disease
- Healthy People 2030 also includes focusing on CKD comorbidities like hypertension and diabetes, along with other healthcare objectives

DCL and kidney care services:

It is exciting to know that CKD is an ongoing objective of the Healthy People project! CKD projects like DCL's novel Kidney Care Management (KCM) program is helping to increase awareness by providing education and support to people living with kidney disease pre-dialysis. Research continues to reveal ways to assist people with recognizing CKD risk factors for early detection and treatment (Paulus et al., 2024). A team at DCL is studying ways to assist people in the KCM program better understand their kidney disease and how to manage it.

You are working with a team of kidney health professionals (nephrologists, kidney nurse practitioners, nurses, patient care technicians (PTCs), dietitians, and social workers), who are providing kidney care services to you based on your own physical, psychological, and social needs. Contact members of your DCL team if you have questions about your kidney disease and/or concerns with your overall health needs and well-being.





Newsletter

Workplace Accommodations and FMLA for People with Kidney Disease

Working while you have late-stage kidney disease, are on dialysis, or have had a kidney transplant, can be tough. But there are resources and legal protections to help you. This guide explains how to get accommodations at work or use the Family and Medical Leave Act (FMLA).

Workplace Accommodations

The Americans with Disabilities Act (ADA) ensures people with disabilities have the same opportunities as those who don't. It prevents workplace discrimination and ensures that employees get the help they need.

Reasonable accommodations include:

- Flexible Hours: Change your work schedule for dialysis or doctor appointments.
- Modified Duties: Adjust job tasks to reduce physical stress.
- Remote Work: Ask to work from home if commuting or being physically present at the workplace is challenging.

Extra Breaks: Take longer or more frequent breaks if you feel tired.

How to Request Accommodations

Kidney disease and its treatments may qualify as disabilities under the ADA, especially if they limit daily activities.

How to request accommodations from HR:

- Document Your Needs: Collect medical papers explaining your condition and how it affects your work.
- Initiate a Conversation: Speak with your HR department or supervisor. Explain your condition and the accommodations you need.

Submit a Formal Request: Provide a written request for accommodations. Include medical documentation and suggested modifications.

What to Do If Your Accommodation is Denied

If your reasonable accommodation is denied, you can:

- Understand the Reason: Ask your employer for a written explanation. All employers with fifteen or more employees must provide reasonable accommodations.
- Assess the Reasonableness: Consider if the accommodation is reasonable. Reasonable accommodations do
 not cause undue hardship to the employer.
- Communicate with your Employer: Arrange a meeting with your employer or HR department. Clarify
 your needs, provide additional documents, and suggest other accommodations. Keep records of all
 communications.
- Follow Internal Grievance Procedures: If you cannot compromise with your employer, file an internal grievance. You may go to mediation, where a neutral third party helps resolve the dispute.
- File a Complaint: If internal efforts fail, file a complaint with the Equal Employment Opportunity Commission (EEOC). The EEOC enforces the ADA. You must file a charge with the EEOC before other legal actions.
- Seek Legal Advice: Consult an employment attorney specializing in ADA cases. An attorney can help you understand your rights, evaluate your case, and advise you.



Newsletter

Workplace Accommodations and FMLA for People with Kidney Disease

Family and Medical Leave Act (FMLA)

The FMLA allows eligible employees to take up to 12 weeks of unpaid leave each year for medical reasons, including kidney disease or recovery from a transplant. Your job and health benefits are protected during this leave. Time can be taken continuously or in small blocks.

To be eligible for FMLA, you must meet the following criteria:

- Employment Duration: Worked for your employer for at least 12 months.
- Hours Worked: Worked at least 1,250 hours in the 12 months preceding your leave.

Employer Size: Your employer must have at least 50 employees within a 75-mile radius.

How to Apply for FMLA Leave

If you know you need leave, give your employer 30 days' notice. If it's an emergency, notify them as soon as you can.

How to request FMLA Leave:

- Complete Required Forms: Request, complete, and provide any necessary forms your employer requires.
- Submit Medical Certification: Submit a medical certification form. Explain the nature of your condition and the need for leave.
- Follow-up: Confirm your employer processed your FMLA request. Make sure you understand how your leave will affect benefits or job status.

What to Do if Your FMLA Leave is Denied

If your FMLA Leave is denied, there are several steps you can take.

- Verify Your Eligibility: Check that you or your employer meets the eligibility criteria for FMLA leave.
- Understand the Reason for Denial: Ask your employer for a written explanation. Incomplete or incorrect documentation can lead to denial.
- Clarify and Communicate: Discuss the denial with your HR department or manager. Provide any additional information or documentation that might support your case.
- File an Appeal: Many employers have an internal process for appealing FMLA leave decisions. Follow your company's procedures. Keep detailed records of all communications related to your FMLA request.
- Contact the U.S. Department of Labor (DOL): If internal efforts fail, file a complaint with the Wage and Hour Division of the U.S. Department of Labor. They'll explain your rights under FMLA and help you understand the next steps.
- Seek Legal Advice: If you cannot resolve the issue internally or with the DOL, consider consulting with an employment attorney specializing in FMLA cases. They can advise you on the best course of action.

Have Questions?

<u>Contact NKF Cares</u>, our patient helpline, to speak with a trained professional. Call toll-free at 855.NKF.CARES (855.653.2273) or <u>email nkfcares@kidney.org</u>