

# **WEST VIRGINIA LEGISLATURE**

## **2026 REGULAR SESSION**

**Introduced**

### **Senate Bill 649**

**FISCAL  
NOTE**

By Senator Grady

[Introduced January 28, 2026; referred

to the Committee on Health and Human Resources;  
and then to the Committee on Finance]

1 A BILL to amend and reenact §9-5-20 of the Code of West Virginia, 1931, as amended, relating to  
2 Medicaid coverage for blood pressure monitoring devices to be offered to certain persons  
3 who have been diagnosed with hypertension; requiring benefits be provided; and requiring  
4 reimbursement for related costs.

*Be it enacted by the Legislature of West Virginia:*

**ARTICLE 5. MISCELLANEOUS PROVISIONS.**

**§9-5-20. Medicaid program; chronic kidney disease and hypertension; evaluation and**

<b>classification;</b>	<b>blood</b>	<b>pressure</b>	<b>monitors.</b>
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1 (a) Any enrollee in Medicaid who is eligible for services and who has a diagnosis of  
2 diabetes or hypertension or who has a family history of kidney disease, shall receive coverage for  
3 an evaluation for chronic kidney disease through routine clinical laboratory assessments of kidney  
4 function.

5 (b) Any enrollee in Medicaid who is eligible for services and who has been diagnosed with  
6 diabetes or hypertension or who has a family history of kidney disease and who has received a  
7 diagnosis of kidney disease shall be classified as a chronic kidney patient.

8 (c) The diagnostic criteria used to define chronic kidney disease should be those generally  
9 recognized through clinical practice guidelines which identify chronic kidney disease or its  
10 complications, based on the presence of kidney damage and level of kidney function.

11 (d) Medicaid providers shall be educated by the Bureau for Public Health in an effort to  
12 increase the rate of evaluation and treatment for chronic kidney disease. Providers should be  
13 made aware of:

14 (i) (1) Managing risk factors, which prolong kidney function or delay progression to kidney  
15 replacement therapy;

16 (ii) (2) Managing risk factors for bone disease and cardiovascular disease associated with  
17 chronic kidney disease;

18 (iii) (3) Improving nutritional status of chronic kidney disease patients; and

19                   (iv) (4) Correcting anemia associated with chronic kidney disease.

20                   (e) A Medicaid enrollee who is eligible for services shall receive a self-measured blood  
21 pressure validated device: *Provided, That the enrollee is pregnant or within the 12-month post-*  
22 partum pregnancy time frame and has been diagnosed with uncontrolled hypertension.

23                   (f) The Bureau for Medical Services shall draft a state plan amendment to include coverage  
24 for home blood pressure monitoring which shall have specific requirements for the following:

25                   (1) Providing coverage for a self-measured blood pressure device validated by the United  
26 States Blood Pressure Validated Listing;

27                   (2) Providing coverage for an extra blood pressure cuff; and

28                   (3) Providing reimbursement for a self-measured blood pressure validated device and  
29 related services; including but not limited to, training patients, interpretation of readings, and the  
30 costs of delivering co-interventions.

NOTE: The purpose of this bill is to require Medicaid coverage for blood pressure monitoring devices to be offered to certain persons who have been diagnosed with hypertension.

Strike-throughs indicate language that would be stricken from a heading or the present law and underscoring indicates new language that would be added.