



May 23, 2017

The Honorable Orrin Hatch Chair Senate Committee on Finance 219 Dirksen Senate Office Building Washington, DC 20510

Dear Chairman Hatch:

On behalf of the American Society of Nephrology (ASN), thank you for your interest in seeking input as the Senate embarks on its efforts to implement health reforms that benefit Americans and their families, providing greater flexibility and patient-focused policies.

ASN represents nearly 17,000 physicians, scientists, nurses, and other health professionals dedicated to improving the lives of people with kidney diseases through treatment and research, including approximately 90 percent of the nephrologists in the United States. ASN is a not-for-profit organization dedicated to promoting excellence in kidney care. Foremost among the society's concerns is the preservation of equitable patient access to optimal quality care for chronic kidney disease (CKD) and end-stage renal disease (ESRD) and the integrity of the relationship between patients and their caregivers.

This spring, ASN developed a set of "guiding principles" regarding health reform. These principles are included below in this correspondence, and the society hopes they are helpful as you work to produce legislation.

Nearly 680,000 Americans have kidney failure and require either dialysis or a kidney transplant to remain alive, and approximately 40 million Americans are affected by kidney diseases.^{i,ii} Patients with kidney diseases, especially kidney failure, are among the most vulnerable populations, with high prevalence rates of multiple other medical co-morbidities, cognitive impairment, and depression and they, along with their families, face tremendous social, financial, and medical challenges. Because of our nation's unique commitment since 1972 to provide lifesaving access to care for people with ESRD, Medicare is the primary payer for approximately 75% of people with kidney failure, and nearly half of people with kidney failure rely on Medicaid.^{iii,iv} Many other people with kidney failure, and with advanced kidney diseases, have private insurance coverage.

As you consider the American Health Care Act and identify additional opportunities for policy change, the society encourages you to ensure access to medical care for patients at risk for chronic kidney diseases and patients with chronic kidney disease, including those with kidney failure treated with dialysis and kidney transplantation.

ASN Health Care Reform Guiding Principles

- Provide access to affordable care for all Americans
 Patients with kidney diseases are some of the most vulnerable members of society with a high
 likelihood of co-morbidities and limited access to care.
- 2) Protect the integrity of the patient-physician relationship

Patients should have the freedom to choose their physician; ensuring that patients have choices among health insurance providers is, for many patients, an important aspect of that goal, and it is an important aspect of patient-centered care.

- 3) Emphasize access to evidence-based screening, detection, and preventive care Early detection and treatment is cost-effective. These services lead to saving and improving the lives of millions of Americans at risk for kidney failure and, ultimately, save Medicare billions of dollars in costly dialysis.
- 4) Guarantee access to care for Americans with pre-existing conditions Nephrology health professionals have committed their lives to keeping patients healthy and to restoring them to health when they become ill; insurers should not be permitted to limit care only to the healthiest Americans.
- 5) Encourage development of innovative, cost-efficient, physician-driven care delivery models

Support physician-led efforts to test models that promote collaboration and provide comprehensive patient-centered care, especially for patients with costly chronic conditions like advanced kidney disease.

6) Ensure predictable, continuous access to immunosuppressant drugs for transplant recipients

Guarantee that every transplant patient will have uninterrupted lifelong access to the medications critical to preserving function of their transplanted kidney.

7) Support policies to facilitate kidney transplantation and organ donation

Kidney transplantation is the optimal and most cost-effective therapy for many kidney failure patients; use all measures to promote organ donation and transplantation; protect living donors must be from discrimination by insurers; and allow patients under 26 years of age to remain on their parents' insurance.

Again, ASN appreciates your interest in receiving comments on this critically important topic. The society and its nearly 17,000 members stand ready to work with you and the Senate Finance Committee to improve care for the millions of Americans with kidney diseases. ASN would be pleased to discuss these comments and stands ready to provide any additional information, if helpful; please contact ASN Director of Policy and Government Affairs Rachel Meyer at (202) 640-4659 or at <u>rmeyer@asn-online.org</u>.

Sincerely,

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Tod Ibrahim Executive Vice President

GAO-17-121 Kidney Disease Research Funding. January 18, 2017.

^{III} United States Renal Data System. 2016 USRDS annual data report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2016.

¹ United States Renal Data System. 2016 USRDS annual data report: Epidemiology of kidney disease in the United States. National Institutes of Health, National Institute of Diabetes and Digestive and Kidney Diseases, Bethesda, MD, 2016.

^W Medicaid. Dialysis Patient Citizens. http://www.dialysispatients.org/advocacy/key-issues/medicaid