[Take out fact sheet on medical research].

- Since the ESRD program's inception in 1972, there have been too few advances in improving the cost-effectiveness of kidney care and clinical outcomes of Americans with kidney disease. There have been advances in access, equipment and modality choice. But patients with kidney disease have not seen transformative innovation since dialysis was made more accessible in the 1970s.
- The lack of innovation is reflected in the cost of the Medicare ESRD Program: it accounts for nearly 7% of Medicare costs but covers fewer than 1% of Medicare patients

 a total of nearly \$35 billion annually. That's more than the *entire* annual NIH budget.
- Most people with ESRD rely on thrice-weekly, in-center dialysis—a draining and timeconsuming process. Dialysis keeps patients/people with kidney failure like me alive but does not replace normal kidney function by returning full health.
- If you are a health professional this would be an ideal point to share the experiences/stories of your patients/patients affected by the conditions you research, and how better therapies would improve their lives
- Research is the only way to eliminate the staggering cost of kidney disease on patients and society.
- But historically, kidney research has been underfunded compared to other diseases and compared to the public health burden. [Show funding comparison chart on fact sheet]. It's no wonder we haven't seen as much innovation and progress in kidney care compared to these other areas.
- We thank the Appropriations Committee's recommendation for a funding increase for the National Institutes of Health, and for the National Institute of Diabetes, and Digestive, and Kidney Diseases in particular.
- We recognize that this recommendation being put into law is contingent on a broader budget deal that involves other moving parts. We hope that Congress approves a budget deal that ensures what we care about most—the <u>recommended</u> investments in kidney research—become a reality.
- Enactment of the Appropriations Committees' NIH funding recommendations is crucial to developing the kind of breakthroughs for kidney patients that now give hope to people with cancer, heart disease, and HIV/AIDs.
- Ask if staff person has any questions about kidney research or what you just discussed.

Transition to second message: Living Donor Act (see Living Donor talking points) [Take out fact sheet on Living Donor Act].