

September 25, 2017

The Honorable Mitch McConnell
Majority Leader
U.S. Senate
U.S. Capitol Building
Washington, DC 20510

The Honorable Charles E. Schumer
Minority Leader
U.S. Senate
U.S. Capitol Building
Washington, DC 20510

Dear Majority Leader McConnell and Minority Leader Schumer:

On behalf of the American Society of Nephrology (ASN), we appreciate your efforts to design and implement healthcare reforms that benefit all Americans and their families. ASN leads the fight to prevent, treat, and cure kidney diseases throughout the world by educating health professionals and scientists, advancing research and innovation, communicating new knowledge, and advocating for the highest quality care for patients. ASN represents nearly 17,000 physicians, scientists, nurses, and other health professionals, including approximately 90 percent of the nephrologists in the United States.

More than 40 million Americans have kidney diseases and nearly 680,000 have complete kidney failure, a condition that disproportionately affects minority communities. In support of its mission to prevent, treat, and cure kidney diseases, ASN developed a set of guiding principles for healthcare reform (**see appendix**). These principles focus on the belief that people with kidney diseases deserve access to a high-quality, patient-centered healthcare system, regardless of socioeconomic status, geographic location, or demographic characteristics.

As currently drafted, however, the Graham-Cassidy proposal does not achieve the goals embodied in ASN's guiding principles, and ASN believes the bill's passage would negatively impact millions of patients, particularly those with kidney failure, advanced kidney diseases, and other chronic illnesses. We strongly believe the Graham-Cassidy proposal would result in millions of Americans losing their health insurance coverage, destabilize health insurance markets, and decrease access to affordable coverage and care.

For example, the proposed cuts to the Medicaid program undermine access to affordable, quality care—directly conflicting with ASN's principles for health reform. Today, Medicaid covers one in five Americans, ensuring access to care for the most vulnerable citizens in our society. The proposed Medicaid cuts are particularly concerning to ASN given that Medicaid beneficiaries experience disproportionately

higher rates of kidney diseases. Moreover, nearly one-half of Medicare beneficiaries with kidney failure also rely on Medicaid for coverage.

As another example, waivers could allow insurers to charge people with pre-existing conditions—such as kidney patients—higher premiums. ASN is concerned that Americans with pre-existing conditions would experience significant barriers in accessing affordable, high-quality care. They would once again be forced to delay treatment, only accessing healthcare services in high-cost settings, such as emergency departments, when treatment deferral is no longer possible. For people with advanced kidney diseases or who have received a kidney transplant or donated a kidney as a living donor, such barriers would be nothing short of life-threatening.

ASN respects your commitment to improving America's healthcare system and stands ready to offer more detailed recommendations. ASN's leadership and staff are available to discuss these comments and to provide any additional information. To discuss this letter, please contact ASN Director of Policy and Government Affairs Rachel Meyer at (202) 640-4659 or at rmeyer@asn-online.org.

Sincerely,

A handwritten signature in cursive script, appearing to read "Eleanor D. Lederer".

Eleanor D. Lederer, MD, FASN
President

Appendix: ASN Guiding Principles for Healthcare Reform

1) 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 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.

Available: <https://www.asn-online.org/policy/webdocs/AmericanSocietyofNephrologyGuidingPrinciples.pdf>