



IMMEDIATE RELEASE

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Kidney Patient Organizations, Kidney Community Come Out in Support of Medicare Secondary Payer (MSP) Extension

Patient organizations support extending MSP and using savings for improving Medicare program; National Kidney Foundation, Renal Support Network, American Kidney Fund and DaVita Patient Citizens submit letters to Capitol Hill in favor of ESRD provisions

Washington, D.C. (November 13, 2007)—Kidney Care Partners – a coalition of patient advocates, dialysis professionals, care providers and manufacturers working together to improve quality of care for individuals with chronic kidney disease – and many of its individual member organizations continue to voice their support in the debate over the Medicare Secondary Payer (MSP) provisions to extend the period for end stage renal disease (ESRD) from 30 to 42 months.

“The 12 month extension will generate savings to the Medicare program which can then be used to educate people who have kidney disease and ensure their continued access to high quality care,” said Dr. Edward Jones, Chairman of Kidney Care Partners and a practicing nephrologist. “Four leading kidney patient advocacy organizations – members of KCP— endorse the MSP extension as being in the best interest of patients, the Medicare program, taxpayers and the renal community. The MSP extension assures access and quality of life sustaining care required by kidney patients.”

Kidney failure is the only disease condition where private insurers can deny coverage. Even if patients want to remain in their private health insurance plan, they are required after 30 months of coverage to go onto Medicare. This may mean that some patients and their families are confronted with higher out-of-pocket costs and less comprehensive health coverage.

While improving quality of care and access for kidney failure patients, the MSP extension would have a negligible cost impact for private employers. The proposal would affect fewer than 10,000 patients nationwide.

In a letter to the Senate Finance Committee, KCP expressed a number of reasons to grant the extension, including: 1) the positive impact on patient care when private payers are incentivized to keep beneficiaries healthy; 2) that having an added year of responsibility for CKD patients would encourage private payers to develop protocols that address patient wellness, prevent hospitalizations and make dialysis safer and more efficient; 3) and that dialysis patients should be afforded the same rights as other patients in choosing how their care is financed.

The Renal Support Network, a patient organization of thousands of people with kidney disease, issued a letter to Senator Debbie Stabenow and the entire Senate Finance committee:

RSN supports the MSP Extension, citing its potential positive benefits to patients. These include extending patient choice and accessing the best quality of care possible, selecting the most comprehensive coverage and having the lowest out-of-pocket costs. It can also allow patients to maintain dependent family coverage and offer some patients access to disease management services that may improve outcomes and reduce overall costs.

In a letter sent to the Senate Finance Committee, the National Kidney Foundation (NKF) writes:

H.R. 3162, the Children's Health and Medicare Protection Act (CHAMP), as passed by the House, contained enhanced benefits for kidney patients. NKF understands the need for an offset in the current Pay-Go environment. Therefore, we reiterate NKF's longstanding decision to support extension of Medicare Secondary Payer, to 42 months, as proposed by the House, provided that the savings are dedicated to improvements to the Medicare ESRD program.

The American Kidney Fund writes in a letter to the Senate Finance Committee:

We understand the difficult budgetary challenges you and your colleagues face and recognize that new spending must be offset by cuts in other areas. We support an additional 12 month extension of Medicare secondary payer (MSP) as a means to generate savings to help offset the costs of other improvements for patients in the ESRD program.

An excerpt of a letter from DaVita Patient Citizens, the largest dialysis patient organization with over 20,000 members – pre-dialysis and dialysis patients as well as their family members – reads:

Besides restricting patients' right to choose to keep their private insurance coverage longer, not extending the MSP period will prevent many of the needed reforms within the ESRD program. One of the most important steps is to provide those individuals at risk of kidney failure with education about the factors associated with kidney disease in the hopes of preventing them from reaching kidney failure. Consistently our members state that they were not aware of the risk factors that cause much of kidney disease—diabetes and hypertension. Prior knowledge could have reduced their risk of kidney failure and possibly dialysis, and the savings that MSP extension would achieve will help fund much-needed education and prevention programs.

“Our community voices strong support for reform in the ESRD program, which includes reforming the current MSP provision,” said Jones. “Early identification, prevention and

disease management are good for Medicare, taxpayers and patients who depend on quality kidney care.”

Kidney Care Partners and its members are dedicated to working together to improve the quality of care for individuals with Chronic Kidney Disease (CKD). For more information, please go to www.kidneycarepartners.com.

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