

Improving Life Through Empowerment

Protect Dialysis Patients' Choice for Health Care

Preserve Patient Access to Charitable Assistance

Background:

- Although most end-stage renal disease (ESRD) patients become eligible for Medicare coverage, because of the high costs resulting from complications from multiple procedures, private insurance often is a better option to meet their medical needs and costs.
- For decades, ESRD patients have had the choice of selecting a private insurance option if they so preferred.
- Private insurance is particularly attractive to ESRD patients with families because Medicare does not provide coverage for spouses and dependents.
- Private plans may offer patients access to preferred doctors, specialists, and health care facilities that do not participate in public programs.
- Unlike Medicare, private plans have limits on out-of-pocket costs which can save money for the patient.
- Allowing ESRD patients to obtain private insurance saves taxpayer dollars and strengthens the solvency of the Medicare Trust Fund.
- ESRD patients insured by private plans also have better access to transplants than those on Medicare. Research shows that ESRD patients with private coverage are almost three times as likely to obtain a transplant as those on Medicare.
- The ability of kidney disease patients to maintain their ability to choose commercial coverage, enshrined in federal law since 1981, gives insurers an economic incentive to appropriately manage the transition to end-stage renal disease.
- Medicare does not offer dental coverage, and Medicare beneficiaries are not permitted to buy standard dental plans in ACA exchanges.

Facts:

- Dialysis patients often cannot afford private insurance premiums without assistance.
- The Department of Health and Human Services (HHS) has longstanding guidance on charitable assistance to patients with end-stage renal disease (ESRD).
- In compliance with this guidance, charities are able to provide assistance to patients to pay their insurance premiums.
- In a recent federal court case challenging a rule which would have threatened ESRD patients' ability to accept charitable assistance, The U.S. District Court for the Eastern District of Texas found:
 - "Congress has long recognized the importance of dialysis treatment for ESRD patients and has afforded patients the opportunity to elect coverage that best serves their needs."
 - "For decades, ESRD patients have had the choice of selecting private insurance options over Medicare if those options better served their treatment needs. Private insurance is particularly attractive to ESRD patients with families because Medicare does not provide coverage for spouses and dependents."
 - The court concluded that any harm that could come from charitable assistance was outweighed by the benefits to patients of retaining access to private insurance.
- It is possible the Administration could release a new rule which could potentially once again threaten a patient's ability to use charitable assistance. If so, we encourage Members to oppose these efforts.

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