



Please Support Efforts to Improve Care Coordination for Patients with End Stage Renal Disease (ESRD)

H.R. 8254/S. 4574 - The BETTER Kidney Care Act

Background:

Coordinated care means that each health care provider serving a patient shares information with one another in a timely manner about the patient's health, treatments prescribed, and care delivered to him or her. Research has shown that coordinated care is helpful in improving the health of people with chronic conditions and in lowering their overall health care costs. Care coordination is most effective when patients are empowered to be active participants in managing their disease along with their care providers.

Improving coordination among health care providers is necessary to improve the quality of care patients with chronic kidney disease (CKD) receive. Most people with CKD also suffer from other chronic conditions like diabetes, high blood pressure, and cardiovascular disease, making their care more complicated. CKD patients often need to see multiple health care providers and take many medications, particularly in the later stages of the disease. Care coordination reduces duplicative services, allows for the whole patient to be cared for and treated rather than just the specific disease, and can improve patients' overall health and quality of life.

- ESRD specific ACOs (Accountable Care Organizations), also known as the ESRD Seamless Care Organizations (ESCOs), reduced hospitalizations by 6%, while lowering Medicare expenditures by about \$1,300 per patient each year.
- A recent study published in Health Affairs found that dialysis patients enrolled in ESRD Special Needs Plans (SNPs) – another care coordination model – had lower mortality and spent eight fewer days in the hospital each year than patients in Medicare fee-for-service. These plans were also found to provide more efficient care at a lower cost to the health care system.

An estimated 650,000 Americans undergo dialysis to treat ESRD. These patients represent approximately 1.2 percent of the Medicare population but account for 6.3 percent of Medicare spending, which totals more than \$30 billion. By giving providers better tools to coordinate care for treatment of kidney disease, patients would see better outcomes and the overall cost of care to Medicare will decline.

Solution:

Cosponsor the BETTER Kidney Care Act (H.R. 8254/S. 4574).

H.R. 4143/S. 2065 (in the 115th Congress) - The Dialysis PATIENTS Demonstration Act – was introduced by Rep. Jason Smith (R-MO), Rep. Cathy McMorris Rodgers (R-WA), Rep. Earl Blumenauer (D-OR), and Rep. Tony Cardenas (D-CA) and Senators Young, Nelson, Bennet, and Heller. It gathered 198 bipartisan cosponsors in the House –79 Republicans and 81 Democrats. It also had 9 bipartisan cosponsors in the Senate – 5 Republicans and 4 Democrats. *This information is current as of 9/10/20

In the 114th Congress, similar legislation was marked up and passed by Unanimous Consent by the House Ways and Means Committee.