



Dialysis Patient Citizens

Improving Life Through Empowerment

Ensure ALL Medicare ESRD Patients Receive Access to Medigap Plans

Cosponsor H.R. 8181 – The Jack Reynolds Memorial Medigap Expansion Act – Rep. Axne (IA-03)

Background:

- Medigap policies (also known as Medicare Supplemental Insurance) are standardized, private insurance plans that help patients pay for expenses not covered by Medicare, such as the 20% coinsurance payments and deductibles.
- Under Federal law, Medicare beneficiaries age 65 and older are guaranteed access to Medigap policies, but beneficiaries under age 65, including many with End-Stage Renal Disease (ESRD), are not.
- Currently, only about half of all states enable Medicare beneficiaries under age 65 to purchase Medigap policies (see map on back).
- Therefore, while approximately 61% of dialysis patients who are enrolled in Medicare are under age 65, only about 11% have Medigap coverage.

Facts:

- ESRD patients require either dialysis or kidney transplants to survive. Many dialysis patients also have multiple comorbidities, while taking multiple medications. Without supplemental coverage, Medicare patients bear significant out-of-pocket expenses.
- In 2016, Medicare spending for beneficiaries on hemodialysis averaged over \$90,000 annually. While Medicare covers approximately 80% of these expenses, dialysis patients are generally on the hook for the remaining 20%.
- In addition, Medicare beneficiaries have to pay an inpatient deductible of \$1,364 per benefit period following a hospital admission. The outpatient deductible last year was \$185, with beneficiaries again paying 20% of the cost of care with no out-of-pocket maximum.
- Most transplant centers also require dialysis patients to secure supplemental coverage as a condition of receiving a kidney transplant – making Medigap coverage a lifesaver for many

Solution:

- Cosponsor – H.R. 8181 The Jack Reynolds Memorial Medigap Expansion Act – which would amend current law to ensure ESRD patients under the age of 65 have access to Medigap coverage.
- This provision was part of the broader Kidney Community Bill (H.R. 3912/S. 1676), also known as The Chronic Kidney Disease Improvement in Research and Treatment Act of 2020. This bipartisan, bicameral legislation was championed by late Rep. John Lewis (GA-05) and Rep. Buchanan (FL-16) as well as Sen. Cardin (MD) and Sen. Blunt (MO).
- To honor the memory of her constituent Jack Reynolds, and to elevate this critical issue for all dialysis patients, Rep. Axne decided to pull this provision out of the much bigger Kidney Community Bill after multiple discussions with Jack’s family, her congressional colleagues, and DPC.
- Jack Reynolds was a founding Board Member of DPC and our longest serving President. He was injured in a farm accident at the age of 4, which ultimately led to his kidney failure at age 22, when he began his journey on dialysis. Jack spent 45 years, 4 months and 3 days on dialysis, until his passing on May 7, 2020. He often talked about how his Medigap coverage kept him focused on his health and not worried about his finances. Jack wanted all dialysis patients to have that financial security, and made this provision of the “kidney bill” a top priority for DPC when he served as Board President.
- To learn more about Jack Reynolds, please click [here](#) for his obituary. You may find a video celebrating Jack’s lifetime of service to the kidney community, prepared by DaVita, by clicking [here](#), and a video honoring Jack as the recipient of the DPC Education Center’s award for Patient Education and Public Service by clicking [here](#).

