

Improving Life Through Empowerment

August 22, 2011

The Honorable Michael C. Burgess, MD 2241 Rayburn House Office Building Washington, DC 20515

The Honorable Ron Kind 1406 Longworth House Office Building Washington, D.C. 20515

Dear Representatives Burgess and Kind:

On behalf of Dialysis Patient Citizens, a national, non-profit organization representing more than 23,000 dialysis and predialysis patients and their family members, I am writing to thank you for your leadership on *The Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2011.* This cost-effective, common-sense legislation will improve the lives of countless kidney transplant patients, while using our limited federal resources more effectively and in the best interests of your constituents.

As you know, the Medicare End Stage Renal Disease (ESRD) Program pays for the majority of dialysis and transplantation costs for eligible ESRD patients. Thanks to this vital program, thousands of individuals with ESRD live productive and high-quality lives.

While Medicare does not place a time limit on dialysis coverage, after patients receive a kidney transplant, anti-rejection drugs are only covered by Medicare for 36 months. After this 3-year period, recipients who do not already qualify for Medicare due to age or disability are no longer eligible for the benefit and are forced to find alternative coverage for their required daily medications.

Without the extension of immunosuppressant coverage in Medicare, many dialysis patients will either forgo a kidney transplant or potentially lose their transplant prematurely because of the financial hardship faced in paying for the necessary medication. If patients lose their transplanted kidney, they will end up back on dialysis and back on Medicare. While Medicare spends on average \$77,500 annually for a dialysis patient's health care, the cost of immunosuppressive drugs average \$19,000 per year for a patient with a functioning kidney transplant.

Extending the current benefit beyond 36 months will result in a net savings to Medicare, provide transplantation as an affordable option to more patients and improve patient quality of life by reducing the back and forth from transplant to dialysis. We thank you again for your efforts on this important issue.

Sincerely,

Hrant Jamgochian Executive Director

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