

CO-SPONSOR S. 2730 / H.R. 6214 –THE KIDNEY CARE ACCESS PROTECTION ACT (KCAPA)

IMPROVE ACCESS TO INNOVATION AND QUALITY CARE FOR DIALYSIS PATIENTS



Guarantees Patients' Access to New, Innovative Treatments

New therapies for dialysis patients are currently paid for in a bundled system that does not ensure patient access. KCAPA reforms the existing, but inadequate Transitional Drug Add-On Payment Adjustment (TDAPA) and Transitional Add-On Payment Adjustment for New and Innovative Equipment and Supplies (TPNIES) to foster permanent adoption of novel drugs, biologicals, and devices within the ESRD Prospective Payment System. This will allow kidney patients to enjoy the same unrestricted access to new treatments that prevails for Part B drugs (e.g., new cancer treatments) and Part D drugs (e.g., new cardiovascular drugs), improving quality of life, preventing complications, and extending survival. It will also reassure researchers and venture capital that kidney care is open to investment from those who want to improve patient outcomes.

By allowing products with FDA Breakthrough Device designation to qualify for TPNIES and permitting payment for capital-related assets, the bill will speed adoption of new dialysis technology, common in other countries, that reduces mortality. KCAPA also requires CMS to make direct payments to facilities for TDAPA/TPNIES products on behalf of MA beneficiaries, assuring that MA plans will not stint on new treatments.



Ensures a Viable Kidney Care Workforce

Due to years of accumulated under-forecasting of inflation and health sector wage increases, Medicare updates for dialysis facilities lag input costs. In particular, CMS has woefully under-reimbursed labor costs, subjecting dialysis nurses and technicians to poaching from employers who can pay market wages. By correcting past labor forecast errors and ensuring parity in future rate updates, KCAPA takes an important step toward addressing looming health workforce shortages as the baby boom retires.



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Dialysis patients are needlessly suffering from conditions that could be mitigated by drugs that are approved but not being dispensed, while facilities face unprecedented labor shortages and inflationary pressures. KCAPA provides Congress with a bipartisan opportunity to stabilize the system now while longer-term reforms continue to be developed.