Dear Speaker Pelosi, Leader McConnell, Leader McCarthy, and Leader Schumer:

The members of the American Society of Pediatric Nephrology (ASPN) and the Renal Physicians Association (RPA) appreciate the swift actions already taken by Congress and the Administration to address the COVID-19 pandemic. Our members provide care to an incredibly vulnerable patient population, children and adults with chronic kidney disease (CKD), including its most severe form, end stage renal disease (ESRD). Patients with these complex, chronic conditions require significant care and management under the best of circumstances. Our members continue to address their health needs during this time where their condition make them especially vulnerable to COVID-19 infection. We write today to urge you to take additional steps to protect their health during this public health crisis.

Our organizations are grateful that the Coronavirus Aid, Relief, and Economic Security Act currently under consideration includes provisions that protect the health and safety of both our members and the patients they treat. Specifically, we urge you to ensure that Section 4404, Increasing Medicare Flexibilities During Emergency Period, and Section 4406, Temporary Waiver of Requirement for Face-to-Face Visits Between Home Dialysis Patients and Physicians, are included in the final version of this legislation. These provisions, which eliminate the requirement for a physician to have had a face-to-face visit with a patient within the last three years before being eligible for a telemedicine visit and eliminate the need for one face-to-face visit with a home dialysis patient per quarter respectively, will help ensure that patients with all stages of CKD can be treated in their homes rather than in a setting where they could be exposed to COVID-19.

However, Congress should consider taking additional actions to protect the health of our patients. We urge you to consider the following:

- **Support the provision of greater supply of immunosuppressive drugs.** Many ESRD patients receive a kidney transplant, the only other treatment option other than dialysis. Once transplanted, patients rely on immunosuppressive drugs to prevent organ rejection. Insurers,
including Medicare and Medicaid, only cover a 30-day supply of these medications. ASPN and RPA urge Congress to direct Medicare, Medicaid, and private insurers to cover a 90-day supply of these drugs during a public health crisis to prevent these immune comprised patients from exposure to COVID-19.

- **Direct the Centers for Medicare and Medicaid Services (CMS) to Reimburse for Telephone Visits.** Our organizations appreciate the steps Congress and the Administration have taken to expand the use of telehealth services during the COVID-19 pandemic. However, physicians are not reimbursed for care delivered by phone, represented by CPT codes 99441-43, because the status indicator in the Medicare Fee Schedule indicates it is a non-covered service. Many patients live in areas without access to high-speed internet or do not have video-enable devices. *We urge Congress to direct CMS to change the status indicator for these codes so providers can bill and be reimbursed for telephone services during this public health emergency.*

- **Clarify that all outpatient dialysis care can be provided via telehealth.** CMS has taken great steps in order to ensure that face-to-face interactions between Medicare beneficiaries are minimized. However, three monthly outpatient dialysis services, CPT codes 90956, 90959, and 90962 (representing the in-center, single visit monthly dialysis services provided to young children, teenagers, and adults) are still not included on the list of Medicare-approved telehealth services. *While we believe this is an administrative oversight, ASPN and RPA urge Congress to direct CMS to correct this oversight.*

Thank you again for all that you are doing to support providers and patients during this difficult time and for considering these additional policy recommendations. Please contact Erika Miller, ASPN’s Washington Representative, at emiller@dc-crd.com or Rob Blaser, RPA’s Director of Public Policy, at rblaser@renalmd.org.

Sincerely,

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American Society of Pediatric Nephrology

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