



Extend Medicare Coverage for Immunosuppressive Drugs For Kidney Transplant Patients

It is estimated that more than 37 million Americans suffer from chronic kidney disease, including 400,000 individuals who are undergoing treatment for end-stage renal disease (ESRD), or kidney failure. Most commonly caused by diabetes or high blood pressure, kidney failure is expected to claim more than 2 million lives by 2030. Without dialysis or a kidney transplant, patients suffering from kidney failure will not survive. Since transplant organs are in short supply, most patients must undergo dialysis treatment, a process that substitutes for healthy kidneys by mechanically filtering body wastes and excess fluids from the bloodstream, provided three or more times per week, but does not provide the physiologic equivalent of the native kidneys.

When coupled with anti-rejection agents known as immunosuppressive drugs, kidney transplants are safe, cost-effective procedures that can extend and significantly improve the lives of patients suffering from ESRD, allowing them the freedom to forgo time-consuming and costly dialysis treatments three or more times per week. However, the only Medicare beneficiaries eligible for lifetime coverage for immunosuppressive drugs are those individuals: (1) that are eligible because they are aged or disabled, and (2) those whose transplant was paid for by Medicare. Other ESRD patients have a limited benefit or no benefit at all.

If an individual has Medicare coverage only because of kidney failure or ESRD, Medicare will pay for immunosuppressive drug therapy for only 36 months, leaving the patient to pay for expensive drugs out-of-pocket after that time period. If the patient cannot afford the drugs after the 36 month time period, the transplanted kidney will stop working and the patient will either return to more costly dialysis treatment, or will die.

To help ensure the long-term viability of kidney transplants and avoid costly dialysis treatments, Congress should enact H.R. 5534/S. 3353, legislation that would extend coverage for immunosuppressive drugs furnished to those who have received a kidney transplant under the Medicare program, and whose entitlement to coverage would otherwise expire.

Recommendation:

To improve the quality of life for kidney transplant patients and the efficiency of Medicare spending, Congress should enact H.R. 5534/S. 3353, the Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act.

The Renal Physicians Association (RPA) is the professional organization of nephrologists whose goal is to ensure quality care under the highest standards of medical practice for patients with kidney disease and related disorders. For further information, please contact Robert Blaser, RPA's Director of Public Policy, at 301-468-3515 or rblaser@renalmd.org