



November 3, 2017

The Honorable Jason Smith
1118 Longworth House Office Building
Washington, DC 20515

The Honorable Earl Blumenauer
1111 Longworth House Office Building
Washington, DC 20515

The Honorable Cathy McMorris Rodgers
1314 Longworth House Office Building
Washington, DC 20515

The Honorable Tony Cardenas
1510 Longworth House Office Building
Washington, DC 20515

Dear Representatives Smith, Blumenauer, McMorris Rodgers, and Cardenas:

On behalf of the Nonprofit Kidney Care Alliance (NKCA), I want to thank you for providing us the opportunity to offer feedback on the prior versions of H.R. 4143 over the past few years. While we genuinely appreciate your commitment to improving care for end stage renal disease (ESRD) patients, we do not believe that this bill does so for all patients. Although the bill includes some improvements, most of the issues which we raised on prior versions of the bill continue with H.R. 4143. Therefore, we unfortunately have to oppose H.R. 4143, the Dialysis PATIENTS Demonstration Act of 2017 at this time.

NKCA represents five nonprofit dialysis providers: Centers for Dialysis Care; Dialysis Clinic, Inc.; Independent Dialysis Foundation, Inc.; Northwest Kidney Centers; and The Rogosin Institute. Collectively, NKCA members serve approximately 20,000 end stage renal disease (ESRD) patients at more than 280 facilities in 30 states. Consistent with our belief that we can do more to keep patients *off dialysis*, we also serve more than 5,400 patients with chronic kidney disease (CKD), with the goals of avoiding or delaying the onset of ESRD and increasing the number of patients who can benefit from kidney transplants. Approximately 85 percent of our patients are covered by Medicare, including Medicare Advantage. Four of our five members also participate in the Comprehensive ESRD Care (CEC) Model through the Centers for Medicare and Medicaid Innovation (CMMI). Collectively, we are responsible for nine ESRD Seamless Care Organizations (ESCOs) across the country in both one-sided and two-sided risk models.

We strongly believe, as providers caring for individuals with ESRD, that all patients have a choice in their dialysis provider so that they can benefit from the different and often innovative approaches developed by each provider. We see *no reason* for beneficiaries to be involuntarily enrolled in a plan and then be required to opt-out, in order to preserve their freedom of choice. This puts an unnecessary burden on the patient. Patients, working with their physicians and family members should continue to have the choice of plan and/or provider that all Medicare beneficiaries enjoy.

Moreover, while we appreciate your intent to make H.R. 4143 broadly inclusive, the bill falls short of that objective and runs the risk of creating further concentration in a sector that is already highly consolidated. To participate in this demonstration, providers must be able to bear capitation risk or partner with an entity who can. Very few, if any, small and medium dialysis providers could do this, with leaving just a handful of large entities participating in this model. Additionally, the bill continues

to provide participating entities unfettered ability to market to beneficiaries, while at the same time lacking fiscal soundness requirements other than meeting any state's licensing requirements.

Lastly, we believe that any new ESRD demonstration model should not be separate from the rest of care received throughout a kidney patient's health journey. An innovative, integrated kidney model should include CKD care, palliative (which is normally performed in conjunction with providing dialysis to a patient), transplantation, medical management, and hospice. Creating silos of care is not best for the patient and will never show the overall savings one can achieve by "going up stream" to work with a patient in their early stages of chronic kidney disease.

We truly do appreciate your leadership on this issue and share with you the belief that we can make a difference in the care of all individuals with kidney disease. We look forward to working with you on future legislation that can better serve our country's kidney disease population. If you have any questions, please feel free to contact me at 202-580-7707 or mccorry@health-law.com or Kelly Delmore at 202-580-7704 or kdelmore@health-law.com.

Sincerely,

A handwritten signature in blue ink that reads "Martin Corry". The signature is written in a cursive style.

Martin Corry
Executive Director