

The American Society of Transplantation would like to call your attention to an emerging and alarming need in our country, access to kidney transplantation for patients with end stage kidney disease (ESKD).

### Why is this a problem?

People with end stage kidney disease (ESKD) have kidney disease that has progressed to the point that, without treatment, they would die from complications of kidney failure. The ESKD population continues to increase, with total Medicare expenditures approaching \$35 billion in 2016 (Fig 1)<sup>1</sup>. Despite these expenditures, patients with ESKD have significantly increased mortality compared to those without kidney disease. In the 1960's, two treatment options emerged that could significantly prolong the lives of people with ESKD: dialysis and kidney transplantation. It is now well established that kidney transplant offers both significant quantity and quality of life improvements over dialysis.

### A Way to Prolong and Improve Quality of Life for Reduced Cost

While mortality rates have fallen for all people with ESKD (Fig 2)<sup>1</sup>, the deaths after transplant are still far lower than with dialysis:

- Kidney transplantation is associated with lower hospitalization rates, improved quality of life, and better chance of joining the work force and starting a family.
- The cost of maintaining a person on dialysis is nearly three times as much per year, as maintaining a healthy kidney transplant (Fig 3)<sup>1</sup>.

For these reasons, increasing transplant rates and ensuring long-term success of transplanted kidneys is critical to improving the lives of people with ESKD and managing associated costs.

### Why Aren't More Kidneys Being Transplanted?

People with ESKD face several significant hurdles on their path to successful kidney transplantation. Timely referral for evaluation and listing for a kidney transplant is critical. Once listed for a transplant, candidates face an acute shortage of donor organs. This means long waits, all the while on dialysis, with poor quality of life, increased risk of death and increased cost. One option is a living kidney donor, either direct or through a kidney paired exchange that offers markedly shorter waiting time and improved outcomes.

### How Can We Solve This Problem?

Support legislation that promotes living donation and protects living donors from discrimination, removes disincentives for individuals considering living donation, ensures long-term access to needed immunosuppressive therapies and supports innovative research, including:

- **Encourage referral to transplant**
  - The **Living Donor Protection Act** prohibits denial of coverage or increase in premiums of life or disability insurance for living organ donors and clarifies that living organ donation is covered under FMLA
- Support the **Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2019 and Medicare Program's Part D Six Protected Classes Category to ensure lifelong access to necessary medications for kidney recipients.**
  - Ensures that organ transplant recipients can afford immunosuppressive medications to prevent losing their donor organ to rejection

Figure 1. Total Medicare ESRD Expenditures, by modality<sup>1</sup>

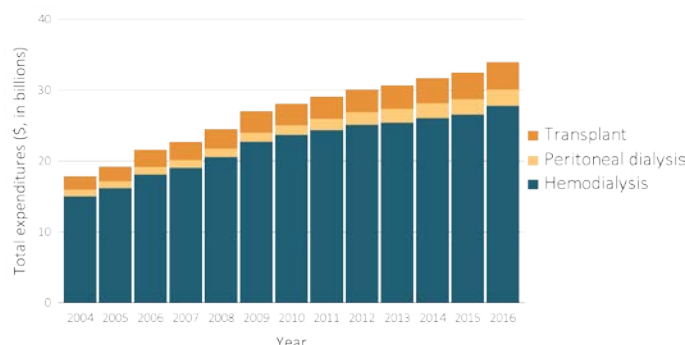


Figure 2. Adjusted all-cause mortality<sup>1</sup>

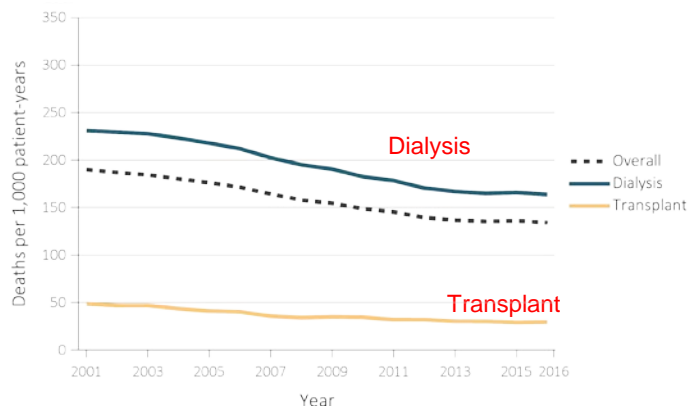
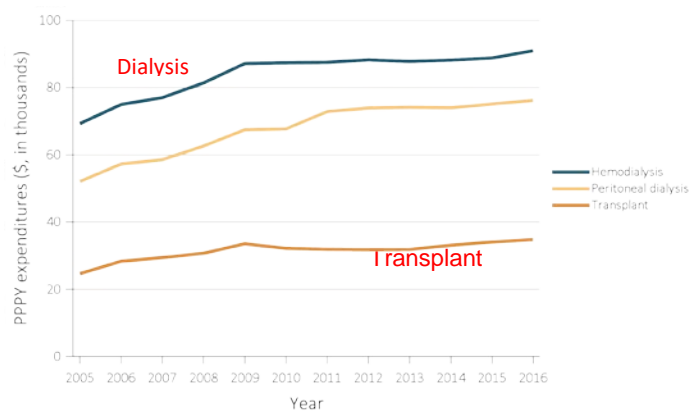


Figure 3. Total Medicare ESRD Expenditures per person per year<sup>1</sup>



<sup>1</sup> United States Renal Data System (USRDS) 2018 Annual Data Report

- Avoids rising Medicare costs by preventing people from returning to dialysis due to failed allograft
- Continued funding for **National Living Donor Assistance Center (NLDAC)**, which reduces financial disincentives to living organ donation for those who could not otherwise afford to donate (e.g. travel reimbursement and subsistence expenses for those being evaluated for and/or undergoing living organ donation).
- **Increase the percentage of research dollars from the NIH spent on kidney disease and transplantation** to match the percentage of the Medicare spent on ESKD care. More research will improve outcomes of patients with chronic kidney disease and those with transplants.

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