The following op-ed was published on September 13, 2019, in The Hill, which is distributed to all congressional offices.

The ‘Advancing American Kidney Health’ Initiative Lives Up to Its Name

By Kevin Longino and Tod Ibrahim, Opinion Contributors

Let’s start with a simple, sobering fact: an estimated 37 million Americans live with the burden of kidney disease. Worse, 90 percent of those affected by kidney disease don’t even know they have it. Approximately 700,000 Americans have kidney failure and require dialysis or a transplant to survive.

Each patient navigating the difficult path of kidney disease or kidney failure has a name and, behind every name, a story. For us at the National Kidney Foundation (NKF) and the American Society of Nephrology (ASN), these are our friends, our family members, our colleagues, our patients and, in some cases, ourselves.

We know that more attention and resources must be devoted to this underreported public health crisis. Nephrologists and grassroots advocates across the country are dedicated to creating a brighter future for those with kidney disease and kidney failure. For years, we have urged Washington to do its part by fundamentally reimagining kidney care to better align incentives for earlier clinical interventions that delay the progression of, or even prevent, kidney disease and failure.

This July, President Donald Trump and his administration issued an executive order to launch “Advancing American Kidney Health.” It represents a bold, comprehensive, and long overdue overhaul of the way we treat kidney disease.

The executive order signifies a rejection of the status quo under which hundreds of thousands of our most vulnerable Americans are shuttled back and forth to dialysis centers to receive treatment. Instead, it strives to double the number of kidneys available for transplant while also accelerating the race toward creation of the first artificial kidney and boosting the use of home dialysis when a preemptive transplant is not possible. This is the kind of aspirational change our patients deserve.

To accomplish this vision, Advancing American Kidney Health launches a set of five payment models that will spur improved management of kidney disease with an eye toward incentivizing the prevention of kidney failure, increasing the uptake of kidney transplants and, when this is not doable, encouraging the use of home dialysis—where patients often enjoy better quality of life—as opposed to in-center treatment. NKF and ASN vigorously support this goal, which is based in part on our organizations’ years of collective efforts, and we are...
committed to working together with the administration to perfect the finer points of this directive.

For example, our organizations are making recommendations for improvement to the administration’s proposed mandatory payment model—the ESRD Treatment Choice model—such as ensuring patients are empowered in evaluating the range of treatment options and providing enough capital for fundamental practice transformation. We appreciate the administration’s ongoing engagement as we seek to ensure that the incentives in this proposal make good on our shared aim of increasing patient choice and transforming kidney care. HHS Secretary Alex Azar and his team are doing yeo-

man’s work to bring relief to the millions afflicted by kidney disease and kidney failure nationwide, but they need willing partners in Washington. Congress should complement the administration’s efforts by appropriating robust increases in kidney disease research funding at the National Institutes of Health, investing in innovation through KidneyX—a public-private partnership dedicated to advancing new and cutting-edge solutions to kidney disease, removing barriers for living kidney donors by passing the “Living Donor Protection Act,” and extending coverage for immunosuppressant drugs for patients who received a transplant through the Medicare End-Stage Renal Disease (ESRD) program. With lawmakers having just reconvened from the annual August recess, the stage is set for them to do exactly that.

We recognize that, in these times, new investments in public health are a tall order. But consider that Medicare spent a staggering $114 billion trying to manage kidney disease and failure in 2016 alone. The price of inaction is far more expensive—both in terms of taxpayer dollars and, more important, precious human lives—than the cost associated with making smart increases in kidney care funding today. For example, a government report released this summer shows that extending Medicare coverage of lifesaving medications for kidney transplant recipients could save taxpayers $165 million a year.

Washington must send a clear signal to the investment community that, at long last, it is serious about innovating kidney care and is committed to partnering with disruptors in the field to bring new products to market and expedite federal review of the latest treatment options.

According to the Organ Procurement and Transplantation Network, more than 5,900 Americans died while languishing on kidney transplant waitlists in 2018 alone. This is not a time to stay idle. Fighting kidney disease and ending kidney failure deserves an all-hands-on-deck effort: from the highest levels of power in Washington to doctors, care partners, and advocates in all 50 states.

The Advancing American Kidney Health initiative has started us down the right track and—on behalf of the 37 million Americans we are privileged to serve and champion—we will ensure these efforts reach the finish line.

Kevin Longino is the CEO of the National Kidney Foundation and a kidney transplant recipient. Tod Ibrahim is the Executive Vice President of the American Society of Nephrology.

—

He has her eyes.
And maybe her Alport syndrome.
When you see patients with abnormal kidney function, think Alport syndrome.
It can filter through the family.

• Alport syndrome is a rare disease and is the second leading cause of inherited chronic kidney disease after polycystic kidney disease.

• Alport syndrome is a progressive, genetic kidney disease that can lead to dialysis, transplant, and/or death.

Reata is focused on targeting novel molecular pathways to treat life-threatening diseases that have few or no FDA-approved therapies, including Alport syndrome.

Abnormal kidney function could be Alport syndrome.
It’s time to start making the family connection.

Want to learn even more about how changes in health care policy, the kidney workforce, and new research will affect you?

Check out Kidney News Online at www.kidneynews.org


© 2018 Reata Pharmaceuticals, Inc. All Rights Reserved.