



July 15, 2015

The Honorable Mike Thompson
231 Cannon House Office Building
Washington, DC 20515

The Honorable Gregg Harper
307 Cannon House Office Building
Washington, DC 20515

Dear Representatives Thompson and Harper:

The Alliance for Home Dialysis (Alliance) thanks you for your leadership to expand access to telehealth services for Medicare beneficiaries by introducing the Medicare Telehealth Parity Act of 2015 (H.R. 2948). We support the bill and specifically note the benefits of policy changes that would increase opportunities for patients to dialyze at home, in this case through innovative telehealth services.

By way of background, the Alliance is a coalition of kidney dialysis stakeholders, representing patients, clinicians, providers, and industry which works to promote federal policies that facilitate treatment choice in dialysis care while addressing systemic barriers that limit access for patients and their families to the many benefits of home dialysis.

Today, more than 600,000 Americans are living with end-stage renal disease (ESRD), a ten-fold increase compared to 1980.¹ Due to the limited number of kidneys available for transplantation, the vast majority of ESRD patients – approximately 70 percent – depend on dialysis to replace kidney function.² Home dialysis—which takes the form of either peritoneal dialysis (PD) or home hemodialysis (HHD)—is a vital treatment option that offers patients significant quality of life advantages, including clinically meaningful improvements in physical and mental health. Telehealth has the potential to not only improve access to home dialysis, but we believe it can also lead to improvements in the care provided to these patients. The Alliance is pleased and encouraged that CMS recommended in its recently-released CY 2016 Physician Fee Schedule proposed rule that the home dialysis codes for physicians – 90963, 90964, 90965, and 90966 – be added to the Medicare telehealth list.

However, several current Medicare policies still act as barriers to home dialysis patients who might otherwise realize the full potential of telehealth and remote monitoring and management services. The Medicare Telehealth Parity Act of 2015 would address these barriers in two important ways.

¹ U.S. Renal Data System. 2013 USRDS Annual data Report: Volume 2, "Atlas of End-Stage Renal Disease in the United States." Washington, D.C.: National Institute of Diabetes and Digestive and Kidney Diseases, May 2014. Web.

² The Medicare Payment Advisory Commission. Report to the Congress: Medicare Payment Policy, Chapter 6, "Outpatient Dialysis Services". Washington, DC: MedPAC, March, 2014. Web.

First, the bill makes the home an originating site for the provision of home dialysis services. Patients would no longer have to travel to a hospital or facility-qualifying site to interface with an approved practitioner. This task is oftentimes difficult for dialysis patients, and may act as a disincentive to adopt home dialysis as a treatment option. The Alliance believes that allowing a patient's home to be a qualifying site for the provision of home dialysis would increase access to this important treatment option for ESRD patients.

Second, the legislation allows a telehealth visit to meet the CMS required monthly physician face-to-face visit requirement in some situations. This provision includes proper protections to ensure that a patient visits with his or her nephrologist in-person at least once every three consecutive months, and to ensure patient choice.

The Alliance also supports several other changes to Medicare policies to expand access to telehealth services for home patients, including making a dialysis facility an originating site. We urge you to add dialysis facilities to the list of originating sites.

We appreciate your leadership on this important issue and we look forward to continuing to work with your offices to advance policies that foster the utilization of technology for home dialysis patients through appropriate telehealth services.

Sincerely,

A handwritten signature in black ink that reads "Stephanie Silverman". The signature is written in a cursive style with a long horizontal flourish extending to the right.

Stephanie Silverman
Executive Director



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