

For Immediate Release  
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May 21, 2013

## **CARDIN LEADS BIPARTISAN EFFORT TO PROTECT LIFE-SAVING TREATMENTS FOR END-STAGE RENAL DISEASE**

Washington, DC – A bipartisan group of senators, led by **Ben Cardin (D-MD) and Michael Crapo (R-ID)**, are urging the Centers for Medicare and Medicaid Services (CMS) not to endanger the lifesaving treatments of Americans undergoing treatment for End-Stage Renal Disease (ESRD) by essentially gutting a crucial service for vulnerable beneficiaries.

“These are real people living with a very difficult disease. We want patients to concentrate on their treatments and improving the quality of their life, not whether or not they can afford proper treatment. CMS has within its authority to protect the program for Medicare beneficiaries receiving life-saving treatment for ESRD and it should do so without hesitation,” **said Senator Cardin.**

“Medicare provides insurance coverage for nearly 80 percent of individuals with ESRD on dialysis. ... While Congress has asked for an adjustment to the payment to account for lower utilization of certain ESA drugs, we do not intend for this adjustment to undercut the vital progress that has been made in stabilizing and improving the ESRD system. ... CMS must remain accountable to beneficiaries who depend on Medicare coverage to receive life-saving dialysis care,” **the Senators wrote.**

**In addition to Senators Cardin and Crapo, the letter to Administrator Tavenner was signed by Senators Michael F. Bennet (D-CO), John Thune (R-SD), Bill Nelson (D-FL), Richard Burr (R-NC), Ron Wyden (D-OR), John Cornyn (R-TX), Robert P. Casey (D-PA), Johnny Isakson (R-GA), Debbie Stabenow (D-MI), Mike Enzi (R-WY), Robert Menendez (D-NJ), Pat Roberts (R-KS), Maria Cantwell (D-WA), Charles Schumer (D-NY), and Patty Murray (D-WA).**

*The text of the letter follows:*

Marilyn Tavenner  
Administrator  
Centers for Medicare & Medicaid Services  
U.S. Department of Health & Human Services  
200 Independence Avenue, SW  
Washington, DC 20201

Dear Administrator Tavenner:

We are writing to you today to make sure that the recently enacted provisions in the American Taxpayer Relief Act requiring adjustments to the End-Stage Renal Disease (ESRD) bundle do not negatively impact the sustainability of this vital program.

Medicare provides insurance coverage for nearly 80 percent of individuals with ESRD on dialysis. The Congress and the Agency have worked collaboratively for many years to create a viable ESRD payment system to improve quality, to decrease mortality, and to align payment with the appropriate incentives. While Congress has asked for an adjustment to the payment to account for lower utilization of certain ESA drugs, we do not intend for this adjustment to undercut the vital progress that has been made in stabilizing and improving the ESRD system. CMS has been a partner with Congress and the community in this joint effort in which we can all take some pride. We must now work together to assure that appropriate payment adjustments are made in a manner that does not gut this crucial service for vulnerable beneficiaries. Unlike other Medicare providers, the ESRD community has little ability to shift costs around the system.

We are concerned that if the Agency does not exercise caution (which it has the statutory authority to do), the adjustment could threaten the improvements made to the Medicare ESRD program and jeopardize beneficiary access to care. The adjustment should not reduce payments to a level less than the cost of providing care. CMS must remain accountable to beneficiaries who depend on Medicare coverage to receive life-saving dialysis care.

We appreciate your attention to these concerns. Please feel free to contact us with any questions.

Sincerely,

Benjamin L. Cardin  
Michael Crapo  
Michael F. Bennet  
John Thune  
Bill Nelson  
Richard Burr  
Ron Wyden  
John Cornyn  
Robert P. Casey  
Johnny Isakson  
Debbie Stabenow  
Mike Enzi  
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