



The Honorable Laurie Monnes Anderson
Chair, Senate Committee on Health Care
State Capitol, Room 453
Salem, Oregon 97301

RE: Chronic Disease Coalition Opposes Senate Bill 900

Dear Chair Monnes Anderson and members of the Senate Committee on Health Care,

The Chronic Disease Coalition is a nonprofit organization that advocates for patients with a wide range of chronic health conditions, including diabetes, multiple sclerosis, rheumatoid arthritis and kidney disease, to name just a few. Because of the need for regular and often expensive treatment, these patients frequently face disease-based discrimination from large health insurers and other related interest groups. On behalf of our members and allies in Oregon, we urge you to reject Senate Bill 900, which directly targets low-income patients who rely on charitable premium assistance, jeopardizing access to quality dialysis care for all Oregon patients.

Patients with end-stage renal disease (ESRD), or kidney failure, are physically attached to dialysis machines for multiple hours three to five times a week. Dialysis is a lifesaving treatment, filtering toxins from the patient's blood because their kidneys no longer can. The severity of this condition led federal policymakers to grant ESRD patients access to Medicare before the age of 65, as going without treatment would lead to death.

It's no secret that Medicare and Medicaid programs only cover a portion of the actual cost of providing health care for ESRD patients and others¹. As a result, all health care providers must treat enough commercially insured patients to subsidize care for the rest of their populations, or simply not accept patients who utilize Medicare or Medicaid. Although this is an imperfect system, all patients benefit from quality care.

SB 900 would disrupt this system by targeting 293 Oregon dialysis patients who rely on private insurance. This small patient population utilizes private health plans to provide coverage for their families, to experience continuity of care over a short time before switching to Medicare or to increase their access to programs that allow them to remain eligible for a transplant – the only real cure for ESRD. Not only do commercially insured patients experience these benefits, but they also subsidize care for the majority of Oregonians who are on Medicare or Medicaid.

If passed, SB 900 would:

- Introduce loopholes that will allow insurance providers to deny third-party payments and transition expensive dialysis patients onto public health plans funded by Oregon taxpayers, allowing insurers, not patients, to choose their health plan

- Place a large administrative burden on charitable organizations who provide financial support to patients in need of lifesaving care and infringe on patient privacy
- Further restrict access to kidney transplants – the recommended long-term treatment option for dialysis patients
- Aid insurance industry profiteering by directly targeting low-income, vulnerable patients, who also disproportionately represent minority populations
- Allow insurers to reimburse providers at the Medicare rate – below the actual cost of care – regardless of a patient’s commercially insured status and contractual agreements
- Disrupt the operation of public and private health care systems mandated by federal policymakers to protect and ensure access to care for all dialysis patients

While a small number of ESRD patients are utilizing commercial insurance now, Medicare will automatically become their primary payer after a 30-month period as required by federal regulation.

The insurance industry and similar interests are targeting 293 of Oregon’s sickest, most vulnerable patients who depend on charitable assistance to afford rising insurance premiums. Nearly 60 percent of these patients represent minority populations and make less than \$25,000 annually. Access to this assistance ensures they don’t have to choose between skipping or abandoning treatment and paying for food or rent.

Last week we testified in front of you on SB 796, the Living Donor Protection Act, which will be good for kidney (and other) patients. SB 900, in stark contrast, will be disastrous for kidney patients. We urge you to prioritize the well-being of Oregon’s most vulnerable patients over insurance industry profits. Say “NO” to SB 900.

Sincerely,



Scott Bruun, Executive Director
Chronic Disease Coalition

¹ <https://www.forbes.com/sites/peterubel/2013/11/07/why-many-physicians-are-reluctant-to-see-medicaid-patients/#1c0f35071045>