The Honorable Laurie Monnes Anderson Chair, Senate Committee on Health Care State Capitol, Room 453 Salem, Oregon 97301 NAACP PROBES OF THE ADVANCE OF THE PROPERTY OF

RE: NAACP Opposes Senate Bill 900

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

For over 104 years, the NAACP Portland branch has remained committed to eliminating racial hatred and discrimination by working to ensure equitable access to political, social, economic and educational opportunities. Systemic practices and infrastructure in health care have introduced inequities that disproportionately affect African Americans and other minority populations. While African Americans represent less than 15 percent of the U.S. population, more than 35 percent of all U.S. patients who receive dialysis treatment are indeed African American<sup>1</sup>. Due to the devastating impact this disease has on our community, we urge you to oppose SB 900 – a bill that overtly discriminates against low-income, minority patients who rely on charitable financial assistance.

Kidney disease is on the rise, and studies show that disparities in end-stage renal disease (ESRD) are often related to factors including socioeconomic status, gender and ethnicity<sup>2</sup>. More recently, researchers have begun citing social environment as the key contributing factor to poor health outcomes for minority ESRD patients who represent minority populations. In fact, many determinants of ESRD, including diabetes and hypertension, have been linked to a suboptimal socioeconomic foundation that includes residential segregation, poor living conditions, lack of health literacy, chronic stress and lack of insurance or inadequate coverage<sup>2</sup>.

Many patients who are on dialysis are unable to work, which only compounds the financial burden a chronic disease places on the family. Charitable organizations such as the American Kidney Fund (AKF) help to alleviate this burden. According to AKF, the majority of assistance they provide is for patients representing minority populations and those who make less than \$25,000 annually.

SB 900 would build a foundation for insurance companies to discriminate against and deprive patients of the ability to choose their own health plan. ESRD patients have access to commercial insurance for less than three years before they are transitioned on to Medicare, as determined by federal policy. While an overwhelming majority are already on Medicare, the small patient population on private insurance has a right to choose and access some of the benefits not provided by Medicare, such as improved chances of receiving an organ transplant, health coverage for their family and more.

The NAACP urges you to say "No" to SB 900 and protect minority communities from blatant insurance discrimination that would introduce further disparities into our health system.

Sincerely,

E.D. Mondainé, President, Portland NAACP

<sup>2</sup> https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4291541/