

February 24, 2010

The Honorable Barack Obama
President of The United States of America
United States Senate
United States House of Representatives

Re: Support for Kidney Patient Immunosuppressive Drug Coverage Provision in Final Health Care Reform Package

Dear President Obama, Members of the U.S. Senate and House of Representatives:

As the national stakeholder organizations representing professionals engaged in the field of organ donation and transplantation, as well as patients and candidates for transplant, we urge you to include the extension of Medicare immunosuppressive drug coverage in the final health care reform package. The provision lifts the current 36-month limit for Medicare immunosuppressive drug coverage and was included in the House-passed health care reform bill, H.R. 3962, the Affordable Health Care for America Act. Plain and simple....this policy preserves and protects patient lives and the Federal Government's investment in transplantation.

One of the biggest challenges that transplant recipients face is the lack of lifetime immunosuppressive drug coverage after receiving a transplant. Currently, patients often find themselves unable to afford their medications once Medicare drug coverage lapses after 36-months. Due to financial reasons, these patients are often forced to begin reducing their medications or forego them altogether, eventually resulting in a completely unnecessary failure of the transplanted kidney.

If the transplant fails, Medicare incurs an average first year cost of more than \$100,000 and will pay for both dialysis and re-transplantation. Medicare spends an average of \$77,000 per year dialyzing patients with kidney failure, and Medicare covers dialysis treatments indefinitely. The cost of immunosuppressive drug coverage to maintain the transplant would be far lower. Removal of the arbitrary time limit on immunosuppressive drug coverage makes financial sense, for sure, but the unnecessary human toll as a result of the current policy is tragic and unconscionable.

Correcting the current irrational immunosuppressive coverage policy will save lives -- many of them. It will save transplanted kidneys so that others on the transplant candidate wait list can receive one of the scarce organs available. And it will save Medicare the unnecessary costs of returning to dialysis and re-transplanting patients with kidney failure who have lost their graft as a result of their inability to pay for their immunosuppressive drugs. Nearly 100 members of Congress have cosponsored pending legislation to extend immunosuppressive drug coverage as provided in this provision. We strongly urge the White House, Senate and House of Representatives to take the next step and include this provision in the final health care reform bill.

Thank you again for your leadership and support of transplant patients and the nation's investment in organ transplantation.

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Sincerely,

American Society of Transplantation
American Society of Transplant Surgeons
American Society of Nephrology
National Kidney Foundation
American Society of Pediatric Nephrology
United Network for Organ Sharing
Transplant Recipients International Organization
PKD Foundation
American Association of Tissue Banks
Eye Bank Association of America
NATCO, The Organization for Transplant Professionals
American Association for the Study of Liver Diseases
Renal Support Network
Association of Organ Procurement Organizations
Renal Physicians Association