



National Kidney Foundation™

QUESTIONS & ANSWERS: IMMUNOSUPPRESSIVE DRUGS

Who is eligible for immunosuppressive drugs under Medicare?

Over half of all kidney transplants are Medicare-eligible, and therefore have access to immunosuppressive drugs through Part B. Aged or disabled patients qualify for Medicare and have access to drug coverage for the life of the transplant. Beneficiaries with Medicare eligibility due to irreversible kidney failure, rather than age or SSDI, lose all Medicare coverage 36 months post-transplant.

What is the Medicare investment in a kidney transplant?

Medicare incurs a first year cost of more than \$100,000 and will pay for a re-transplant in the case of organ failure or a return to dialysis. Medicare spends \$71,000 per year on a dialysis patient, which Medicare covers indefinitely.

What is the average cost of immunosuppressive drugs?

Medicare spends an average of \$17,000 on a kidney transplant recipient per year after the first year of the transplant. Medicare pays 80% of the cost of the immunosuppressive medications under Medicare Part B if an individual's transplant was eligible for Medicare. This is not impacted by the Medicare Part D prescription drug benefit.

What about private insurance coverage?

Coverage by private insurance varies widely. In some cases, immunosuppressive drugs are covered adequately and they remain affordable. Under other plans, these drugs may be included in high tiers of drug coverage, requiring very high co-pays or may not be covered at all. For these patients, Medicare can help them afford the life-saving medication and maintain their kidney transplant.

Will kidney transplant recipients have access to all Medicare benefits after 36 months?

No. H.R. 1458 (Reps. Camp and Kind) and S. 565 (Sen. Durbin and Cochran) would eliminate the time limitation and extend coverage for transplant recipients *for the purpose of immunosuppressive drugs only*. Beneficiaries would pay the Part B premium. All other Medicare coverage would end 36 months after the transplant, but access to affordable immunosuppressive drugs would continue.

How has immunosuppressive drug coverage changed over time?

Prior to 2000, immunosuppressive drug coverage was limited to 36 months following a transplant for all kidney transplant recipients. In the Beneficiary Improvement and Protection Act of 2000, Congress eliminated the 36-month limit for transplant recipients who had a Medicare transplant, if they are eligible for Medicare based on age or disability.