



NATIONAL KIDNEY
FOUNDATION®



April 22, 2025

The Honorable Brett Guthrie
Chair, Energy and Commerce Committee
U.S. House of Representatives
Washington, DC 20515

The Honorable Frank Pallone
Ranking Member, Energy and Commerce
Committee
U.S. House of Representatives
Washington, DC 20515

RE: Medicaid is Essential for Kidney Patients

Dear Chair Guthrie, Ranking Member Pallone, and Distinguished Members of the Committee:

On behalf of the National Kidney Foundation, I am writing to strongly urge you to ensure that Medicaid remains accessible, affordable, and adequate for the more than 80 million Americans who rely on it to improve their health and lives, particularly those living with kidney disease and other chronic conditions. The National Kidney Foundation is dedicated to supporting kidney patients and advocating for policies that improve their health outcomes and quality of life. We work with diverse stakeholders including patients, healthcare providers, researchers, and policymakers to advance patient-centered health policies and practices that increase access to affordable, high-value, and sustainable health care.

We see firsthand the critical role Medicaid plays in the lives of Americans with kidney disease. For many kidney patients, Medicaid is the sole source of health coverage, providing access to vital services including dialysis, transplant care, medications, and regular nephrology appointments that enable individuals to manage their complex health needs, maintain their quality of life, and live independently in their communities.

Research demonstrates the vital importance of Medicaid coverage for kidney patients. A 2022 study published in JAMA Health Forum found that Medicaid expansion under the Affordable Care Act was associated with significant decreases in Medicare-financed hospitalizations and hospital days for patients with kidney failure in the critical period after dialysis initiation.¹ The study showed an 8% reduction in hospitalizations and hospital days during the first three months after dialysis initiation for patients in Medicaid expansion states compared to non-expansion states. Additionally, Medicaid expansion was associated with a 6% increase in dual Medicare and Medicaid coverage and a 7% increase in patients starting dialysis with an arteriovenous fistula or graft, which is associated with better outcomes.

Many of the Medicaid cost-savings options under consideration would transfer costs to patients or to the states, directly reducing the availability of care and the number of people eligible for coverage. For kidney patients, these cuts could be devastating. Reduced access to regular dialysis, specialty care, and essential medications can lead to increased emergency room visits, hospitalizations, and ultimately higher healthcare costs. Additionally, disruptions in care can significantly increase mortality risks for this vulnerable population and reduce their access to lifesaving organ transplantation.

As you move forward in writing and implementing specific instructions of the budget reconciliation agreement, I urge you to reject cuts to Medicaid that would have long-term impacts and lasting harm to

people with kidney disease and other chronic conditions. The kidney patient community is particularly vulnerable to any changes in coverage or benefits, as consistent access to care is literally life-sustaining.

On behalf of the kidney patients we represent, we urge you to protect and strengthen Medicaid as a vital source of coverage for those who need it most. Any policy changes must preserve Medicaid's ability to provide affordable, high-quality, and person-centered care to Americans with kidney disease and other chronic conditions.

Thank you for your consideration and leadership on this important issue.

Sincerely,



Kevin Longino,
CEO and Transplant Recipient



Kirk Campbell, MD
President

¹ Nguyen KH, Lee Y, Thorsness R, et al. Medicaid Expansion and Medicare-Financed Hospitalizations Among Adult Patients With Incident Kidney Failure. *JAMA Health Forum*. 2022;3(11):e223878.
doi:10.1001/jamahealthforum.2022.3878