

April 23, 2021

The Honorable Rosa L. DeLauro Chairwoman Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Committee on Appropriations H-307, U.S. Capitol Washington, DC 20515 The Honorable Tom Cole Ranking Member Subcommittee on Labor, Health and Human Services, Education, and Related Agencies Committee on Appropriations 1016 Longworth House Office Building Washington, DC 20515

Dear Chairwoman DeLauro and Ranking Member Cole:

As you begin consideration of the FY 2022 Labor, Health and Human Services, Education, and Related Agencies (LHHS) appropriations bill, the Coalition for Kidney Health respectfully requests that the Subcommittee increase funding to the National Institutes of Diabetes, Digestive, and Kidney Diseases (NIDDK) at the National Institutes of Health (NIH), and provide \$15 million for the Chronic Kidney Disease Initiative (CKDI) at the Centers for Disease Control and Prevention (CDC).

The Coalition for Kidney Health is a multi-stakeholder group of partners working to transform the landscape of chronic kidney disease (CKD) by generating awareness, increasing screening of at-risk patients, and driving forward high-quality, coordinated care focused on delaying CKD progression.

More than 37 million Americans have CKD, including nearly 750,000 with irreversible kidney failure. Another 80 million Americans are at risk for developing kidney disease from hypertension, diabetes, and other risk factors. Unfortunately, 90 percent of those with CKD have not been diagnosed. If we do not address kidney disease early and work to slow or stop the progression to kidney failure, the expense of treating kidney failure could bankrupt the Medicare Trust Fund. The Medicare program spends more than \$130 billion – more than 24 percent of total spending – on patients with kidney disease. Further, end stage kidney disease, which affects only 1 percent of Medicare beneficiaries, accounts for 7 percent of Medicare spending.

At a time when 15 new therapies are developed for cancer each year, it is unconscionable that treatment choices for end stage kidney disease have not meaningfully changed in more than 40 years. Even as funding for NIH rose 37% between fiscal years 2015 and 2020, kidney research funding has lagged, only increasing 19% in that same time. In 2020 NIH spent less than \$20 per kidney patient on research into kidney disease. That is not enough to make the radical change kidney patients need. It is time for an exponential investment in kidney health, and that is why we are requesting a dramatic increase in funding for NIDDK at NIH, and a funding level of \$15 million for the CKD Initiative at CDC.

Thank you for your consideration of our request and your support of kidney patients nationwide.

Sincerely,

The Coalition for Kidney Health