

10/23/15
ESRD

Shawn Miller says he never got
info about how to call in
G: Who did we send notice
to?

Dalita - May LaFleur

- Only State (OR) that has
discriminatory provisions
- Discrimin agst kidney failure
- Contact patients and try to
urge them to sign up for
Medicare & pointing out
pros/cons of

Jared Case - US Renal Care:

- Comments on plan doc.
- Discusses discrimination
- Please consider comments
today to allow kidney patients
full choice

FMC -

- Holly Bartelbaugh - helps
patients navigate through ESRD
and insurance & financial;
Goal is to help understand

Changing plans is difficult -
may disrupt providers, etc.

TS --- FMC - dialysis social
worker; plan provisions
cause add'l stress for
patients; plan language
must be understandable

Cory Danko, DaVita - renal
professionals; help patients
in Medicare, plans
selection from com'l.
- Regence & Providence treat
ESRD patients differently
based on - limitation on
dialysis benefits (that is
hidden in policy detail)

Jeremy Van Hoxen - daVita:
- Advocacy & policy Jorda
Vita -
- 1st state(?) the insurers trying
to do
- Q: do these plans discriminate
solely because of kidney
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- Do plans cause patients to make decision they wld not otherwise make -
- Most aggressive - removal of out-of-pocket max -

Dr. Provenzano - Representing practice + patient

- 400 patients on dialysis ^(most are waiting for trans)
- Wait time $\uparrow$ 2.8 - 5 years for transplant
- Coriolis rates for transplant greater than govt plans -

BJ Canner

- Impacts all patients who req. dialysis to stay alive - not just ESRD
- Redlining a lot more + more ~~for~~ treatment - cost shifting
- Reimbursement plans discriminatory
- Medicare coverage is NOT equal -
- ACA removal of caps critical
- Care team continuity extremely impst.

Dr. Mohendra - Salem Soc

- Extremely sick patients,
- Often have other chronic disease
- 3 days/week
- Difficult enrollment for a patient
- Legacy + OHSU do transplants; often declined for transplant if inadequate insurance

Ellen Sturmfeld - private practice; previously at DAT -

- Asked by deVita to review plans - "Dialysis Plans"
- None of materials explained that enrollment in Medicare is optional.
- Can't enroll in Medicaid. only for fee for service.
- Consumer protection violations
- Discriminatory under state & fed law;
- Only ESRD is identified in offending plans
- Out-of-pocket costs do not

count for dialysis; (no valid basis) to distinguish between ESRD and other diseases;

- ODC must answer whether plans discriminate (Y/N) question

Patients:

Andrew Finley - dialysis patient

- Concerns about discrim plans - still working;

- told he may have to go to Medicare

- Care great at daVita; able to do it home care rather than clinic

- Sending to Medicare for something he's been paying for all his life.

- Couldn't pay for 20% that Medicare won't cover;

Bob Lee (Intro by Hext. . . .)

- Annual membership survey; 77% like ins., Medicare

patients have more difficulty
in getting treatment, etc.)
- disenroll by some insurers
unfair to those who
- Social Security, ACA, -
state law, Medicare;
- Goal is to make sure
dialysis patients are not
forced into Medicare rather
than private insurers

Bob Lee -
- He shd have right to choose
- Medicare has declined
to cover other medication
necessary for him.

Patricia Hamilton, Patient &
rep. Nat'l HF and Health
care provider (nurse)
- Letter to Cali.
- Discrimination
- Compares to MHP mistakes
- Already feels guilty for
burden on family

Jennifer Labrosky (O. Asm. Htg)

- Waiting for transplant
- Has not received notice of benefit change to her (Providence)
- Shd not be allowed to push patients onto Medicare & other public
- "But & switch"
- Act to protect her and others
- Protect other state employees

Insurers:

- Dr. Richard Pezrau, Regence
- Need access to high quality care
- \$20M/year in Oregon for kidney disease; hands on personal support for ESRD
- Q is how to pay for this
- Handful (4) dialysis centers charging excess fees by charging 7-8 times more than Medicare; egregious charges; E
- Ham Emery - Regence:
- Not an issue about benefit design

- Six buckets -

- Will go through the allegations today

- Population not eligible for Medicare stop on plans.

- Negotiation of providers -

1 - ^{one} not even willing to
K w/ insurers

2 - one is 7-8 x Medicare
max.

- OMIP - investigation; 2
providers ~~to~~ agreed to same
rate as Regence currently

Jessica Potke - not on

22

- (Provider on phone)

- 100% about discrimination