



NATIONAL GRANGE

Elevating rural interests since 1867

1616 H St. NW, Suite 200, Washington, DC 20006

August 23, 2024

Chiquita Brooks-LaSure, Administrator
Centers for Medicare & Medicaid Services
Department of Health and Human Services
Attention: CMS-1805-P
Mail Stop C4-26-05
7500 Security Boulevard
Baltimore, MD 21244-1850

Re: Medicare Program: End-Stage Renal Disease Prospective Payment System, Payment for Renal Dialysis Services Furnished to Individuals with Acute Kidney Injury, et. (CMS-1805-P)

Dear Administrator Brooks-LaSure:

The National Grange and many of its state chapters welcome this opportunity to comment on the intent of the Centers for Medicare and Medicaid Services (CMS) to bring Phosphate Lowering Therapies (PLTs) into the End State Renal Disease (ESRD) Prospective Payment System, or payment bundle as it is commonly known, and removing these treatments from the Medicare Part D coverage program. We believe that such a change is not in the best interest of patients struggling with chronic kidney disease, that doing so will make these vital lifesaving therapies less accessible, and that this will have a disproportionate impact on agricultural workers and rural Americans.

Since 1867, the Grange has been America's premier nonprofit, nonpartisan fraternal organization that advocates for rural America and agriculture and brings rural communities together. We advocate for health care policies that recognize the health challenges faced by those who work in the agricultural sector and in rural regions of the United States.

There have been multiple studies indicating that people who work outdoors tend to have a higher susceptibility to chronic kidney disease. [One such study by multiple universities](#) showed that inhalation of particulate matter air pollution from sources such as road dust, fossil fuel combustion, and industrial processes can lead to higher incidence rates of several chronic illnesses including kidney disease. [Another study](#) from researchers at the National Cancer Institute, Memorial Sloan Kettering Cancer Center and other institutions found a linkage between exposure to frequently used herbicides and kidney function. It is increasingly accepted that people who work in the open air have a disproportionate risk for kidney disease.

That is why, for the National Grange and its state chapters, this handling of coverage for PLTs is so important. For Medicare-eligible Americans requiring dialysis treatment, it is not an exaggeration to say these therapies can mean the difference between life and death. Excessive phosphorous levels in the

body, a byproduct of dialysis treatments, exacerbates the risk for serious health conditions for patients already vulnerable. Coverage through the Medicare Part D program has made these treatments highly accessible and, with the implementation of out-of-pocket spending caps in Part D, eminently affordable.

Moving PLTs to the ESRD payment bundle will change all of that. From a financial standpoint, including these oral treatments in a limited payment structure that already includes expensive injectable therapies will inevitably limit patient access to new, innovative treatments for high phosphate levels.

But, equally as important for rural Americans, shifting distribution of PLTs from community pharmacies to dialysis centers creates enormous logistical problems because, one, many people on farms and rural communities don't live near a dialysis center to pick up a medicine that must be taken several times a day and, two, small dialysis facilities in rural areas don't have the infrastructure to stock and distribute a large PLT inventory.

For chronic kidney disease patients and particularly for those living in rural areas, the potential harm of this change in PLT coverage far outweighs any conceivable benefits. We strongly support the Kidney PATIENT Act (H.R. 5074/S. 4510) which would delay the inclusion of oral-only PLTs in the ESRD bundle until 2027. We encourage you to pause this change in coverage and maintain the affordability and accessibility of critical therapies for kidney disease patients. Thank you for your consideration.

Respectfully,

The National Grange
Colorado State Grange
Connecticut State Grange
Delaware State Grange
Idaho State Grange
Illinois State Grange
Iowa State Grange
Maine State Grange
Maryland State Grange
Massachusetts State Grange
Montana State Grange
Nebraska State Grange
New York State Grange
North Carolina State Grange
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West Virginia State Grange
Potomac Grange #1 (DC)