

Republican Leader Michael C. Burgess, M.D.
Energy and Commerce Subcommittee on Health
“Legislation to Improve Americans’ Health Care Coverage and Outcomes”
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As Prepared for Delivery

Thank you, Madame Chair. Today we are considering seven bills that will help provide access to medical services or medicines for different American patients. I am most appreciative of the inclusion of H.R. 5534, the Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2019, a policy that I have championed for nearly a decade.

Congress enacted legislation in 1972 to allow certain individuals with end-stage renal disease (ESRD) in Medicare, which was the first time that individuals under age 65 became eligible to enroll in Medicare because of a medical condition. Medicare beneficiaries with ESRD account for roughly seven percent of Medicare fee-for-service spending, but only make up one percent of total Medicare enrollment. These patients are incredibly ill and often have numerous other costly chronic conditions.

A kidney transplant is an investment that the government makes into the patient’s future. Medicare pays for the patient’s kidney transplant if they have the ESRD benefit, and that transplant should be a

solid investment in the future health of that patient. Unfortunately, that investment is lost and the patient's health takes a turn for the worse if they cannot get their immunosuppressive drugs and reject their kidney transplant. We should protect that investment.

Currently, Medicare only covers immunosuppressive drugs for 36 months; however, these patients require these drugs for the rest of their lives. H.R. 5534 directly addresses that problem by extending Medicare coverage of immunosuppressive drugs past 36 months for patients that do not obtain health care coverage elsewhere.

This is a policy that has the support from everyone from patients to transplant surgeons, and it is something that the kidney community has coalesced behind for years. In July, I attended the launch of President Trump's "Advancing American Kidney Health" Initiative, which aims to improve care and foster innovation to benefit kidney patients across the country. My policy, H.R. 5534, aligns with the goals of the Administration. In fact, both the CMS Office of the Actuary and the Office of the Assistant Secretary for Planning and Evaluation at HHS have published reports on the benefits of extending Medicare coverage of immunosuppressive drugs, which include financial savings for the Medicare program.

There is momentum to make a difference in the lives of kidney patients, and H.R. 5534 is a critical component of this effort as it will improve patient adherence to immunosuppressive drugs and help to ensure that patients can maintain their transplant and hopefully avoid future kidney-related health care complications.

The other bills that are part of this hearing include efforts to improve patient access to different types of care. For example, Rep. Buddy Carter's bill, H.R. 3935, would continue the requirement that state Medicaid programs provide coverage of nonemergency transportation to medically necessary services. Other bills, such as H.R. 2477, the BENES Act, are well intentioned and we want our health care system to work better for individuals, but we know from the Congressional Budget Office that this particular bill has a cost. People may avoid late enrollment penalties, but we want to make sure that in trying to ease enrollment we do not harm the integrity of the enrollment process.

H.R. 2271, the Scarlett's Sunshine on Sudden Unexpected Death Act, aims to improve the investigation of sudden unexpected deaths among infants and children.

This bill has a goal similar to that of the Preventing Maternal Deaths Act, which was signed into law in December 2018, and would help states equip themselves to identify and address the causes of these tragedies. H.R. 4801, which would reauthorize the Healthy Start program at the Health Resources and Services Administration is also imperative in improving health care outcomes for American mothers and children.

On the topic of children's health, H.R. 2468, the School-Based Allergies and Asthma Management Program Act, would equip schools to better handle asthma and allergies among students. According to the Centers for Disease Control and Prevention, 10 percent of children have asthma. Our schools must be prepared to handle that growing population so that children will be safe in school.

I am glad that we are looking at these bills today, as we had an agreement to consider them all before the subcommittee, but I do hope that the other bills we requested be a part of this hearing are considered soon. Thank you for all our witnesses for being here today, and I look forward to the discussion.