



March 25, 2019

Chair Senator Monnes Anderson and Senate Health Committee Members,

My name is Mary Carney and I work as a social worker for Fresenius Medical Care. One of the most important tasks of a dialysis social worker is to educate patients on available community resources. The American Kidney Fund (AKF) Health Insurance Premium Program (HIPP) is one such resource. In my 16 years as a nephrology social worker, I have referred patients to this program when they have problems financially. For those who qualify, charitable premium assistance can sometimes make the difference between having health insurance or not. It helps our patients not have to choose between paying their health insurance or paying their rent.

The vast majority of our patients (90%) have Medicare or Medicaid as their primary insurance, but some patients choose to maintain private health coverage instead of applying for Medicare when they are eligible. It is their legal right to do so and in fact, the updated *Frequently Asked Questions Medicare and the Marketplace* from June 2016 states, "Individuals with ESRD are not required to sign up for Medicare; it is voluntary." Patients' decisions to maintain commercial insurance are done for a variety of personal, healthcare and family reasons.

I would like to provide two brief examples of patients who have used charitable premium assistance for their specific situations.

Kathy is a 50 year old single woman who has been on dialysis for nearly 3 years. Her only source of income is Social Security Disability. She has Medicare coverage. Her income is just over the income guidelines for either Medicaid or a Medicare Savings Plan. To supplement her Medicare coverage, she enrolled in a Medigap insurance plan. Because she could not afford the premium for this plan, she applied for and was approved for charitable premium assistance through the American Kidney Fund. She appreciates the help she receives from AKF. Her goal is to have a kidney transplant and without full coverage, that would not be possible.

Linda is a married woman in her 40's. When she started dialysis, she had no insurance. She did not qualify for Medicare or Medicaid, so enrolled in a commercial insurance plan. She could not afford to pay the premium and so applied for and received charitable premium assistance from AKF. Her goal was to have a kidney transplant and she was referred for evaluation. She received that transplant nearly four years ago, and today, Linda has a full time job that she loves. This happy ending would not have been possible without the charitable premium assistance she received from the American Kidney Fund.

I am very concerned that this bill could cause these patients and others I work with to lose their health insurance coverage. Thank you for listening to my comments, and I ask you to vote no on SB 900.

Mary Carney, MSW, LCSW  
FKC Hilltop Dialysis  
328 Warner Milne Road  
Oregon City, Oregon 97045  
503-650-2357  
Mary.Carney2@fmc-na.com