



WINTER 2020 | VOL. 5.1

AKF in *Action*

Fighting kidney disease and helping people live healthier lives.

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FOOD SAFETY AND KIDNEY DISEASE:

4 things to remember

People living with kidney disease know that nutritious, kidney-friendly foods can help keep them healthy. But did you know that food safety can be just as important to staying healthy?

Foodborne illness is a serious problem in the United States. According to the CDC, 1 in 6 Americans will get foodborne illness each year, causing nearly 128,000 hospitalizations and 3,000 deaths. Unfortunately, having kidney disease can put you at a greater risk—kidney disease, diabetes and a transplant can all lower your immune system’s ability to fight off infection. That can lead to more serious foodborne illnesses. And as you get older, you are also more likely to get sick from contaminated food.

But have no fear! Here are four simple steps that can help

CHECK YOUR STEPS: FOUR SIMPLE STEPS TO FOOD SAFETY



protect you and your family from foodborne illness:

1. Clean

Always wash your hands well before preparing and eating food, and after handling raw meat, poultry, seafood or eggs. Wash your hands with soap and water for 20 seconds. Then rinse and dry your hands with a clean towel. Also, clean and sanitize any sinks, counters and kitchen utensils that touch raw foods.

2. Separate

Keep raw meat, poultry, seafood and eggs separate from fruits, vegetables and ready-to-eat foods. Apply this tip at the grocery store,

in your fridge, and as you cook. Use separate grocery bags for meat and fresh produce at the store. Keep cutting boards for raw meats and produce separate. Also, don’t use the same plates or utensils for raw and cooked foods.

3. Cook

Cook all meat, poultry, seafood and egg dishes to a safe internal temperature. Always use a food thermometer to make sure that your food is safe to eat. Don’t rely on color, texture, or cooking experience to “know” if it’s done! Even leftovers must be reheated to a safe temperature of 165°F.

4. Chill

Keep your food safe in the refrigerator or freezer. Never leave groceries or leftovers out at room temperature for more than 2 hours. Leftovers are only safe in the fridge for 3 to 4 days. After that, put them in the freezer for longer, safe storage or throw them away. When in doubt, throw it out!

Special considerations for people with kidney disease

If you have kidney disease, diabetes or a transplant, you are more likely to get foodborne illness than others. This may be because of where the food comes from or how it is processed. It may also be because of how you prepare the food at home. While some foods are healthy and can be a good source of nutrients for people with kidney disease, take extra care to be safe when making or eating them.

1. Uncooked fresh fruits and vegetables

Make sure to always rinse raw produce before peeling, cutting or eating to wash away any dirt or germs. Scrub firm fruits and vegetables with a brush. When possible, it is safer to cook produce because heat can kill bacteria that causes foodborne illness.

2. Raw and/or undercooked foods, especially:

- Unpasteurized (raw) milk or juices
- Soft cheeses made with raw milk
- Raw or undercooked eggs
- Raw meat, poultry, seafood, and their juices

These raw foods can contain bacteria that cause foodborne illness. Check the label to avoid milk, cheese or juices that are raw or unpasteurized. Raw meat,

USDA United States Department of Agriculture

“Is it done yet?”

You can't tell by looking. Use a food thermometer to be sure.

USDA-Recommended Safe Minimum Internal Temperatures

145°F	145°F	160°F	160°F	165°F
with a 3-minute rest time				
Beef, Pork, Veal & Lamb Steaks, Roasts & Chops	Fish	Beef, Pork, Veal & Lamb Ground	Egg Dishes	Turkey, Chicken & Duck Whole, Pieces & Ground

www.FoodSafety.gov

USDA Meat & Poultry Hotline
1-888-MPHotline (1-888-674-6854)

Food Safety and Inspection Service

USDA is an equal opportunity provider, employer, and lender.
July 2005
Slightly Revised November 2017

CLEAN SEPARATE COOK CHILL

poultry, fish and egg dishes must be cooked to a safe internal temperature and checked with a food thermometer for safety. Cook whole cuts of meat to a 145°F internal temperature (with a 3-minute rest time). Prepare ground meat, egg dishes and casseroles to 160°F. Seafood is ready at 145°F. All poultry products must be cooked to 165°F.

Luncheon meats and deli salads

In addition to high sodium levels, deli salads and meat can also contain bacteria that can make you very sick. To kill any dangerous germs, reheat hot dogs and lunch meats to 165°F or until they are steaming hot. Avoid deli salads like tuna, chicken, egg or macaroni salads.

For more information:

- Visit FoodSafety.gov to learn more about how to safely handle and prepare food and view food safety fact sheets.
- Call the United States Department of Agriculture (USDA) Meat and Poultry Hotline at 1-888-MPHotline

(1-888-674-6854) to talk to a food safety expert.

- Chat live with a food safety expert at ask.usda.gov from 10 a.m. to 6 p.m. ET, Monday through Friday.
- Follow USDA Food Safety on Twitter at [@USDAFoodSafety](https://twitter.com/USDAFoodSafety) or on Facebook at [Facebook.com/FoodSafety.gov](https://www.facebook.com/FoodSafety.gov).
- Email fsis.outreach@usda.gov or call the USDA Meat and Poultry Hotline at 1-888-674-6854 to order educational materials about food safety.

Chrystal Okonta, MSPH, CHES, is a technical information specialist with the USDA Food Safety and Inspection Service. In her role, she seeks to protect public health and prevent foodborne illness. She leads educational efforts to improve the public's knowledge and awareness of food safety. She also engages consumers by answering questions about food safety via email, chat and USDA's hotline.

How to submit a HIPP grant request in GMS

- ❑ Upload a health insurance bill or statement from within the past 90 days.
- ❑ The billing address on your bill or statement must match the billing address on your grant request.
 - **Payments to your insurance company:** the address is selected from the insurance section of your profile.
 - **Payments to the patient:** your home address or your dialysis center's address.
 - **Payments to an alternate address:** alternate address on the documentation submitted with your grant request.
- ❑ The requested coverage dates must either be printed or written onto the documentation you submit.
 - If the bill you are submitting has the correct coverage period printed on it, no additional dates need to be added.
 - If the bill has a different coverage period printed on it, draw a line through those dates and write or type the new dates onto the bill (please do not white out the old dates).
 - Please write or type the coverage dates on the bill if the dates are not already listed.
- ❑ The requested grant amount must be either printed or written on the documentation.
 - If your bill clearly shows the requested grant amount for the selected coverage period, you do not need to submit any additional information.
 - If your bill has a balance due, is an employer group health plan (EGHP) policy, or only shows the amount for one month when the request is for multiple months, you will need a written explanation that shows AKF where the requested amount comes from.
 - Bills that show an overall credit balance are not accepted. Please wait to submit until you have a bill with a balance due.
- ❑ The insurance policy ID (on your bill) on your grant request must match what you entered into your Grants Management System (GMS) patient profile.
 - If a payment is going directly to you only, you may list your last name as the policy ID.
- ❑ EGHP requests payable to you need to be accompanied by a paystub dated within 30 days of your grant request, and either a letter from your employer or a rate sheet dated within the last year.
 - If you are not the primary insurance holder, this information must be included on your documentation.
 - Please use the following breakdown to find the requested amount if the rate sheet or employer letter does not already clearly state your monthly premium amount:
$$(\text{Amount deducted} \times \text{number of deductions per year} \div 12 \text{ months of the year}) \times \text{number of months being requested.}$$
- ❑ EGHP requests payable to your employer need to be accompanied by a bill or statement from your employer clearly showing the amount owed.
- ❑ Annuity statements must have identifying information to show you are an annuitant/retiree.
 - The request will be returned if not included.
- ❑ If your insurance plan year does not start on January 1, include documentation that clearly states the coverage plan year start date. This applies to the following insurance types only: Medigap, Cobra, EGHP, Annuity, Commercial-Other
 - **Examples of documentation:** rate increase letters stating the specific day of the increase, renewal letters, applications with the coverage start date listed.
- ❑ For one-time grants replacing voided, expired or unconfirmed payments, include a note on the documentation that the previous payment was such.
 - Expired or voided checks will be replaced if notice is provided within 30 days in GMS.
 - Unconfirmed payments can be replaced if documentation can be provided that payment is still needed for that coverage period.
- ❑ Please be sure to check that your insurance coverage plan year matches the documentation submitted and that the requested coverage period is within the coverage plan year. AKF will not approve a grant outside the coverage plan year.

! Important update for California patients

On December 30, a federal judge granted our request for an emergency injunction to temporarily stop AB 290 from becoming law. What this means for you:

- HIPP has re-opened to all patients in California for 2020.
- If you have been receiving HIPP assistance from AKF, you may immediately resume submitting requests for 2020 grant assistance.
- New applicants from California may once again submit applications for assistance.

This is a huge step in the right direction but not the last step. We will continue to keep you informed in the coming months, as we work in the court system to defeat AB 290 permanently. You can find the latest updates on our efforts at KidneyFund.org/California.



Staff spotlight

Name: Melanie

Hometown: Glen Rock,
New Jersey

What do you do at the American Kidney Fund (AKF)?

I'm the director of state policy and advocacy at AKF. I lead AKF's legislative efforts in the states to help pass laws that will better the lives of people with kidney disease and prevent bills that would harm kidney patients from becoming law.

Why are you passionate about fighting kidney disease?

I have always been passionate about helping people, especially those who are vulnerable.

What is the best part of your job?

Passing legislation that improves lives and/or gives hope to those fighting kidney disease. In 2019 we led the introduction of Living Donor Protection Act bills in 14 states and those bills have been signed into law in nine states! I'm looking forward to continuing this in 2020 and expanding the number of states that protect living organ donors.

What are your favorite hobbies outside of work?

I'm a certified fitness instructor and licensed sommelier. I enjoy teaching spinning classes and wine tasting.

Take action to help kidney patients!



Surprise bills are a growing problem that can lead to financial hardship or even ruin for vulnerable kidney patients. In less than a minute, you can urge Congress to take a stand against surprise medical bills. KidneyFund.org/surprisebills



After a transplant, kidney patients should not have to worry about how they're going to afford the medications needed to keep their transplanted kidney healthy. Take action and urge your elected officials to support immunosuppressive drug legislation today. It only takes a minute! KidneyFund.org/antirejection-meds



VELPHORO

On dialysis,
trying to manage phosphorus?

lighten your day

THE VELPHORO WAY

- Velphoro® (sucroferric oxyhydroxide) is a stronger phosphate binder. Because it's stronger, you can take fewer pills...and lighten up your whole day
- Velphoro is easy to take. Most people were able to maintain phosphorus control with only 3 or 4 tablets per day*—not 3 or 4 per meal as with some other binders

Find out more at www.velphoro.com, and ask your doctor if Velphoro is right for you

*The recommended starting dose of Velphoro is 3 tablets (1,500 mg) per day.

INDICATION

Velphoro® (sucroferric oxyhydroxide) is a phosphate binder indicated for the control of serum phosphorus levels in patients with chronic kidney disease on dialysis.

IMPORTANT SAFETY INFORMATION

Velphoro chewable tablets must be taken with meals. Velphoro should be chewed or crushed. Do not swallow whole. Tell your healthcare provider about all the medicines you take, including prescription and nonprescription medicines, vitamins, and other supplements. Velphoro can interact with other medicines.

Tell your healthcare provider if you have any of the following: peritonitis (an infection) during peritoneal dialysis, significant gastric or liver disorder, recent major gastrointestinal (GI) surgery, a history of hemochromatosis or other disease that results in iron build-up in the body. People with these conditions were not included in clinical

studies with Velphoro, and your healthcare provider will monitor your iron levels while you are taking Velphoro.

Velphoro can cause side effects. The most common side effects are discolored feces, diarrhea, and nausea. Tell your healthcare provider if you have any side effect that bothers you or that does not go away. To report negative side effects associated with taking Velphoro, contact Fresenius Medical Care North America (FMCNA) at 1-800-323-5188. You are encouraged to report negative side effects of prescription drugs to the FDA at 1-800-FDA-1088 or visit www.fda.gov/medwatch.

Before taking Velphoro, tell your doctor if you are pregnant, plan to become pregnant, or breast-feeding.

For more information please see accompanying brief summary of full Prescribing Information, or visit www.velphoro.com.



Velphoro is a registered trademark of Vifor Fresenius Medical Care Renal Pharma Ltd.

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PN103781-02 Rev. A 09/2019

 **VELPHORO®**
(sucroferric oxyhydroxide)
chewable tablets

Brief Summary:

Please see Full Prescribing Information for additional information

**What is Velphoro and how should it be used?**

Velphoro (sucroferric oxyhydroxide) is a phosphate binder used to control phosphorus levels in adult patients with chronic kidney disease on dialysis.

How should Velphoro be taken?

Velphoro tablets can be chewed and not swallowed whole. Tablets may also be crushed to help with chewing and swallowing.

The recommended starting dose of Velphoro is 3 tablets (1,500 mg) per day, taken as 1 tablet (500 mg) 3 times daily with meals.

Follow all directions on your prescription label. Your physician may adjust your dose, as often as weekly, by 1 tablet per day until you meet your phosphorus goal.

How is Velphoro available?

Velphoro (sucroferric oxyhydroxide) is available as a 500 mg chewable tablet.

Is there any reason that you cannot take Velphoro after being prescribed by your doctor?

No.

Important note

Velphoro has not been studied in patients with peritonitis while on peritoneal dialysis, or those who have stomach or liver disorders, iron diseases, or those who have had abdominal surgeries. Tell your doctor if you have or had any of these.

What are some possible side effects?

The most common adverse drug reactions to Velphoro chewable tablets in hemodialysis patients included discolored feces (12%) and diarrhea (6%).

The following adverse reactions were identified after had been on the market by some patients and were reported voluntarily.

Tooth discoloration

Skin rash

The risk information provided here is not comprehensive. To learn more, talk about Velphoro with your healthcare provider or pharmacist. The FDA approved product labeling can be found at www.velphoro.us/ or 1-800-323-5188.

To report SUSPECTED ADVERSE REACTIONS, contact Fresenius Medical Care North America at 1-800-323-5188 or FDA at 1-800-FDA-1088 or www.fda.gov/medwatch.

What should you discuss with your physician when taking Velphoro?

Some drugs may interact with Velphoro. Tell your health care provider(s) about all medicines you use now and any medicine you start or stop using.

Tell your doctor if:

You are pregnant or nursing

What happens if you take more than prescribed?

There are no reports of overdosage with Velphoro in patients. Low phosphorus levels should be treated by standard clinical practice.

Velphoro has been studied in doses up to 6 tablets per day.

HOW SUPPLIED/STORAGE AND HANDLING

Velphoro is a chewable tablet supplied as brown, circular, bi-planar tablets, embossed with "PA 500" on 1 side. Each tablet of Velphoro contains 500 mg iron as sucroferric oxyhydroxide. Velphoro tablets are packaged as follows:

NDC 49230-645-51 Bottle of 90 chewable tablets

Storage

Keep the bottle tightly closed in order to protect from moisture.

Store at 25°C (77°F) with excursions permitted to 15 to 30°C (59 to 86°F).

Distributed by:

Fresenius Medical Care North America
920 Winter Street
Waltham, MA 02451

Patents apply, visit www.fmcna.com/patents

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Real participant reviews of some of AKF's recent webinars:

"I loved this webinar! The information was well organized with clear and useful visuals."

"Very informative. Being newly diagnosed with CKD, I appreciate learning different things to discuss with my doctor."

"I gained useful information through this webinar. Thank you."

"The webinar was one of the best, informative, helpful, thoughtful, clear/concise, up-to-date, humble, present, empathetic and enlightening ones I've experienced. Keep it up!"



WATCH AND LEARN:

AKF webinars available on demand

AKF hosts free monthly webinars on many important topics relating to kidney disease. These webinars—and many more—can be watched at your convenience at [KidneyFund.org/webinars](https://www.kidneyfund.org/webinars). Just look for these titles in our list of webinars to watch on-demand.

Food safety and kidney disease

One in 6 Americans get foodborne illness each year, and people with kidney disease, transplants and diabetes are at a higher risk. **What you'll learn:** four steps to food safety, how to safely prepare meals for groups and special considerations to keep in mind if you have kidney disease.

Kidney chat: Ask a social worker

Every person on dialysis is assigned a social worker to support you and help you through your journey

with kidney disease. **What you'll learn:** the role of the social worker and emotional, financial and other support resources available to people with kidney disease.

Balancing kidney disease: Teenage perspective

Most teens are already juggling many changes, responsibilities and activities, and kidney disease can feel like a balancing act of its own. **What you'll learn:** answers to common questions from teens with kidney disease and resources available to teens with kidney disease.



Change of address?

Please make sure your GMS profile is always up to date.

[GMS.KidneyFund.org](https://www.kidneyfund.org)



11921 Rockville Pike
Suite 300
Rockville, MD 20852
800.638.8299

KidneyFund.org

AKF is fighting on all fronts as the nation's leading kidney nonprofit.
Learn more about what we do at **KidneyFund.org/fight**.

WHAT'S INSIDE:

- Food safety and kidney disease
- Take action to help kidney patients
- Share your story
- AKF's on-demand webinars

A large circular graphic with a white background and a blue border. The text "happy NEW year" is written in a mix of blue and green fonts. "happy" is in a light blue script, "NEW" is in large, bold, blue block letters, and "year" is in a green script. Below "year" is the text "from AKF!" in a blue script font. The background of the graphic is decorated with blue snowflakes and starburst patterns.

happy
NEW
year
from AKF!

AKF wants to hear from

you!

Why do you stay strong in the fight against kidney disease?

Grab a marker, flip this page over and write down your answer.

Take a photo of yourself holding up your sign.

Please make sure we can clearly see your face and what you've written.

Post your photo on your social media pages.

Please make sure to include these hashtags in your social media posts:

#WhyIFight

#KnowYourKidneys

Please tag AKF:

 @KidneyFund

 @AmericanKidneyFund

 @AmericanKidneyFund

Don't have social media?

Email us your photo at info@KidneyFund.org.

By posting or emailing your photo, you are giving AKF permission to reshare it on our social media for educational or marketing purposes.

I'm fighting for...



American Kidney Fund[®]
FIGHTING ON ALL FRONTS