



Your Views Friday, Feb. 3



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Safety net

Health insurance companies have been working to convince government agencies to prevent low-income kidney patients from using charitable assistance to keep their medical coverage – all in the name of bigger profits for their CEOs. But government leaders must remember charitable assistance provides a vital safety net for many kidney patients. My story is no different.

Diagnosed with kidney disease in 1987, I went on dialysis starting in 2013. During a gap of unemployment after my job was outsourced, I needed medical insurance to cover my dialysis treatment and get a kidney transplant. The American Kidney Fund, a nonprofit that has served patients for decades, helped cover my insurance premiums – close to \$11,000 total – when I needed help.

Charitable premium assistance ensured I could access the care I needed to stay alive and healthy. Insurance companies and the government shouldn't be able to dictate what plans a patient can choose, let alone how they pay for their insurance premiums. That's a fundamental patient right, and health insurers should know better. Instead of helping insurance companies make more money, our government should help its citizens get the care and treatment we rightly deserve.

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