Virtual Kidney Action Summit - 2021

March 10, 2021
Agenda

• Thank you!
• Quick Background on Congress and the Legislative Process
• Explanation of Advocacy
• Legislative Issues
• Format of Meeting
• Questions
Quick Background on Congress & Legislative Process

- There are two chambers in the U.S. Congress:
  - House of Representatives
  - Senate
- For enactment of Legislation:
  - Both chambers must pass the legislation.
  - The legislation goes to a conference committee to work out differences and create a new bill.
  - The new bill must be passed by both chambers before going to the president for signing.
Congressional profile, 117th congress

United States House of Representatives

• 221 Democrats / 211 Republicans / 3 Vacancies

Leadership

• Speaker of the House: Nancy Pelosi (D), CA

• Majority Leader: Steny Hoyer (D), MD
• Majority Whip: Jim Clyburn, (D), SC

• Minority Leader: Kevin McCarthy (R), CA
• Minority Whip: Steve Scalise (R), LA
Congressional profile, 117th congress

United States Senate

- Senate: 48 Democrats / 2 Independents who Caucus with the Democrats / 50 Republicans
  - Vice President Kamala Harris Breaks Tie

Leadership

- Majority Leader: Chuck Schumer (D), NY
- Majority Whip: Dick Durbin (D), IL
- Minority Leader: Mitch McConnell (R), KY
- Minority Whip: John Thune (R), SD
Legislative Process – In Theory

1. **Idea**
   - Can come from the Executive Branch, interest groups, a constituent or any other entity.

2. **Legislative Research**
   - Introduced by Rep/Sen.

3. **Referral to Committee**

4. **Subcommittee Review**
   - Public Hearing

5. **House or Senate Floor Schedule**

6. **Full Committee**
   - House Approves Conference Report

7. **Conference Committee**
   - President Signs/Vetoes/"Pocket Vetoes"

8. **Adopted and/or Amended w/Substitute**

9. **House or Senate Vote**
   - 3 Calendar Days

10. **Goes to Other Chamber**
Legislative Process – In The Real World

There are many opportunities to influence the process.
What is Advocacy?

- **Organized activity** with the purpose of **influencing the formulation of public policy**.

- Communications and activities that **educate** Congress, policy makers and the public.

- Communications and activities that **build public support**.
What is Advocacy?

• Influencing people, policy, structures and systems;
• Lobbying, mobilizing, educating and networking;
• Alone/with a group of people/with coalition of organizations;
• Aimed at immediate results or a long term objective;
• Holds those in power accountable;
• Empowers individuals to speak up for themselves.
Why Advocate?

- Develop individuals as agents of change;
- Generate more resources for kidney patients;
- Change power structures and systems to enhance support for those with chronic kidney disease and those on dialysis;
- Representative democracy relies on the bond between citizens and their legislators.
Why Should You Advocate?

• Decisions will be made regardless of who participates in the process.

• Your personal experience and expertise can enhance policy decisions made at the local, state, and national levels.

• Legislators make their decisions based on your experiences. They need to hear from you.

• Affect policy outcomes--enact needed changes in the law that improve kidney health.
Advocate Further with AKF

- In-District Meetings
- Social Media
- State Advocacy
- Action Alerts
- Ambassador Monthly Zoom Briefings
- Letters to the Editor
Thank you for your advocacy!

Goals of Your Meeting on March 17th

• Goal 1: To introduce yourself and the issue of kidney disease to your elected officials.

• Goal 2: To give the congressional staffer the opportunity to hear your story - the constituent’s story - and understand how kidney disease impacts a person’s life.

• Goal 3: Build a relationship between with the congressional staffer.
Format of Meeting

The meeting format is as follows:

1) AKF Staffer will introduce herself/himself

2) Give background on the American Kidney Fund

3) AKF Staffer will introduce Ambassador

4) **Ambassador tells their story**

5) AKF staff will quickly discuss two bills:
   - A. Living Donor Protection Act
   - B. Ensuring ESRD patients under 65 can get Medigap

6) AKF staffer will ask congressional office to sponsor these bills

7) Thank the staff for the meeting, say goodbye and hang up.
AKF’s Virtual Kidney Action Summit Legislation

• S. 377/H.R. 1255, the Living Donor Protection Act
  o Introduced in the House and Senate – Request cosponsorship

• H.R. 1676, the Jack Reynolds Memorial Medigap Expansion Act
  o Only introduced in the House of Representatives – Request cosponsorship
  o We expect introduction in the Senate soon – Request cosponsorship when it is introduced
Legislative Issues – Issue 1

S. 377/H.R. 1255, the Living Donor Protection Act

• Prohibit insurers from declining coverage, limiting coverage or charging higher premiums to living organ donors under any life insurance, disability insurance or long-term care insurance policy
• Prohibit insurers from precluding a person from donating all or part of an organ as a condition of receiving a life insurance, disability insurance or long-term care insurance policy
• Prohibit insurers from considering the status of a person as a living organ donor in determining the premium rate for insurance
• Codify an opinion letter from the Department of Labor that states FMLA includes organ donation surgery as a qualifying medical condition that would allow living donors to take the leave afforded to others under FMLA
• Require the Department of Health and Human Services to update their website, brochures and other media regarding live donation and access to insurance for living donors
H.R. 1676, the Jack Reynolds Memorial Medigap Expansion Act

• This bill would require insurers nationwide to offer the same Medigap plans to Medicare ESRD beneficiaries under age 65 that all Medicare beneficiaries over age 65 have.

• Almost all Americans who have ESRD are eligible for Medicare regardless of age. But Medicare only covers 80% of the costs of outpatient procedures like dialysis, and the patient must pay a 20 percent coinsurance, with no annual out-of-pocket maximum.

• ESRD patients on Medicare face upwards of $10,000 in out of pocket costs every year so they need supplemental Medigap insurance or risk bankruptcy. But in 20 states, Medicare beneficiaries with ESRD under age 65 cannot get Medigap insurance.

• Even more dire, however, is that most transplant centers will not accept Medicare beneficiaries onto their transplant list if they do not have secondary insurance. For most Medicare beneficiaries, Medigap is their secondary insurance. Without a Medigap plan, ESRD patients can be denied a kidney transplant.
Logistics

- AKF staff member pairings
- Day-of meeting logistics:
  - Type of meeting: AUDIO ONLY! Unless you will be meeting with the Member
  - If you are meeting with the Member, we will reach out to you separately to let you know
- Landing page with materials
- Web portal with schedules
  - Schedules will be emailed on Friday
  - Even after you receive your schedule, it is possible some of your meetings will change
- Day-of contact: with any issues, text or call Kate at (425) 785-8671 or email at ktremont@kidneyfund.org
  - We will email this info out on the morning of 3/17 as well
Questions?