

May 15, 2022

The Honorable Xavier Becerra Secretary US Department of Health and Human Services Hubert H. Humphrey Building 200 Independence Avenue Washington, DC 20001

Dear Secretary Becerra:

On behalf of the American Society of Nephrology (ASN) and the 37 million Americans living with kidney diseases, I write to thank the Biden-Harris Administration for its efforts to ensure the health of all Americans during the COVID-19 pandemic. ASN appreciates your ongoing leadership, and we unequivocally support the May 10, 2022, request from the American Hospital Association, the American Medical Association, and 13 other national organizations—representing patients, health care professionals, the public health community, and other stakeholders—for the administration to maintain the public health emergency (PHE) until the global pandemic has receded and the capabilities authorized by the PHE are no longer necessary.

As you consider this request, ASN and its more than 21,000 members urge you and your colleagues across the federal government to consider prioritizing the needs of people living with kidney diseases, particularly the more than 800,000 Americans with kidney failure who require dialysis or a kidney transplant to live. Unfortunately, the situation for these Americans is still dire. This population remains vulnerable to infection, serious illness, and death from COVID-19 due to their immunocompromised state. For the first time in the 50-year history of the Medicare End-Stage Renal Disease program, the United States has experienced a decline in the number of patients on dialysis following two years of the COVID-19 pandemic. Without the support and protections provided through PHE, the effects of COVID-19 on kidney health in the United States will continue to get worse.

Of the more than 37 million adults with kidney diseases in the United States, a disproportionate number are Black, Latinx, Native American, Asian American, and Native Hawaiian and Other Pacific Islanders. The kidney health consequences these Americans face are particularly horrifying. For example, kidney failure prevalence is about 3.5 times greater in Black Americans, 2.7 times greater in Native Hawaiians and Pacific Islanders, 1.5 times greater in Latinx Americans, and 1.4 times greater in Native Americans than in White Americans. It is not surprising, therefore, that Black Americans comprise 13.4% of the US population but 33% of the nation's population on dialysis for kidney failure.

In an April 8, 2022, letter to White House COVID-19 Response Coordinator Ashish K. Jha, MD, MPH, we asked the administration to work with ASN and other stakeholders to prepare for future variants and the surges predicted for fall and winter by:

- Urging the US Food and Drug Administration to recognize waning immunity in vaccinated people with kidney failure and provide additional guidance for prescribing treatments and vaccines that are specific for the immunocompromised, including people on dialysis and people living with a kidney transplant.
- Supporting accelerated manufacturing and distribution of monoclonal antibodies for COVID-19 that provide additional prophylactic benefit to immunocompromised populations, including individuals with advanced kidney diseases and kidney failure.
- Prioritizing dialysis patients, staff, and kidney transplant recipients for access to novel COVID-19 therapeutics.
- Alleviating the crises at dialysis facilities due to supply chain challenges and staff shortages. This situation has varied widely by geography and by facility size; therefore, we stand ready to work with your office and dialysis providers to ensure a streamlined process easing stress points along the supply chain and at facilities.
- Ensuring dialysis facilities continue to receive high-level, government-approved face masks and other personal protective equipment.
- Encouraging state and federal governments to allow reciprocity for nurses to allow for interstate practice, regardless of whether the state is a compact state, during this acute, but ongoing crisis.
- Providing dedicated research funding to the National Institute of Diabetes and Digestive and Kidney Diseases to study the impact of COVID-19 on people with kidney diseases. Inconceivably, previous COVID-19 funding packages lacked dedicated kidney health research funding, limiting support for this important population.

Applauding your commitment to the health and safety of all Americans, ASN urges you to maintain PHE and all its "flexibilities that have proven vital in safely caring for patients and critical in enabling the country's health care system to quickly adapt and tackle COVID-19 and its variants."

Again, thank you and the Biden-Harris Administration for all your efforts on behalf of people with kidney diseases. To discuss this letter, the more than 37 million Americans with kidney diseases, or ASN's requests related to continuing to protect these Americans during the COVID-19 pandemic, please contact ASN Regulatory and Quality Officer David L. White at <u>dwhite@asn-online.org</u> or (202) 640-4635.

Sincerely,

Susan Jugs

Susan E. Quaggin, MD, FASN President