



FRESENIUS MEDICAL CARE

April 9, 2018

House Health, Insurance and Environment Committee
Colorado General Assembly
200 E Colfax Avenue
Denver, CO 80203

Dear Chairperson Ginal and Committee Members,

We appreciate the opportunity to support HB 1321, which would create and implement a method for meeting urgent transportation needs within the existing Non-Emergency Medical Transportation (NEMT) benefit under the medical assistance program. Fresenius Medical Care North America serves approximately 1,500 people with kidney failure in our 26 outpatient dialysis facilities in Colorado. Approximately 45% of our dialysis patients have Medicaid and qualify for the NEMT transportation benefit. Transportation is especially important for our patients because dialysis is a life-sustaining treatment. Research shows that even missing one dialysis treatment causes a 30% increased risk in mortality.

For the past several years, our company has worked with the various transportation brokers in Colorado, most recently Veyo, and the Department of Health Care Policy and Financing (DHCPF) in an effort to solve ongoing transportation issues. Although we have seen a few improvements in their services, some issues still remain. We are having ongoing issues with the processing of standing orders for our dialysis patients. Patients are dropped from the rosters without notice. We also continue to have some issues with patients arriving late for their dialysis treatments. Sometimes their treatments have to be shortened to stay on their schedule to get their rides home. Shortened treatments can be detrimental to dialysis patients' health. If the treatment is not cut short, then their rides home must be rescheduled which can result in patients waiting for a long time for their return rides home. We have even had some instances where it was so difficult to find transportation home after the dialysis treatment that our facilities had to stay open beyond operating hours with staff who are unable to go home until the patient is able to leave after treatment. Dialysis patients are often also tired and weak after their treatments. It is not good for them to have to be at the facility so long after their treatments are done when they should be able to go home, rest and eat something to recover faster from their treatment.

HB 1321 would assist with this last problem by creating a program to help with urgent transportation needs in order to obtain transportation for people who are being discharged from a hospital or having issues getting home following a medical procedure. We hope you will support this legislation, and we will continue to offer our assistance in developing the program and working with the DHCPF to implement it.

Thank you for taking our comments and questions into consideration.

Sincerely,

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