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3 Title: Maintenance Hemodialysis for Undocumented Persons in Michigan
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5 Introduced by: Brent Oldham for the Medical Student Section
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8 David Lee, Jordan Lippincott, Jeremy T. Llaniguez, Michael Malian, MD, Sara Teising,
9 and Jason Wasserman, PhD
10
11 Referred to: Reference Committee E
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13 House Action: **APPROVED AS AMENDED**
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15
16 Whereas, there are 11.3 million undocumented persons living in the United States and about 6,480
17 of these persons have end-stage renal disease (ESRD) for which undergoing routine hemodialysis or
18 transplant are life-sustaining treatments^{1,2}, and
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20 Whereas, in 2016, there were an estimated 100,000 undocumented immigrants living in Michigan³
21 that paid approximately \$87.6M in state and local taxes and \$15 billion in Social Security payroll taxes
22 annually, and have added \$300 billion to the \$2.7 trillion Social Security Trust Fund⁴, and
23

24 Whereas, despite this substantial financial contribution to the American economy, undocumented
25 immigrants are considered "not qualified" by the United States Department of Health and Human Services
26 for 31 programs, resulting in denial of Medicaid, Medicare and CHIP⁵, and
27

28 Whereas, undocumented individuals are unable to access federal subsidization for renal transplant,
29 therefore hemodialysis is the only treatment option for these patients^{6,7,8}, and
30

31 Whereas, due to ineligibility for federal programs, most undocumented persons must pay out-of-
32 pocket for hemodialysis, which is cost prohibitive. This renders hospital emergency services as the only
33 option for care⁹, and
34

35 Whereas, while emergency departments are mandated to provide coverage through the 1986
36 Emergency Medical Treatment and Active Labor Act (EMTALA) for emergent dialysis^{10,11}, they can only
37 provide one to two sessions per week (rather than the recommended three sessions per week) and even
38 then, high demand compromises the availability of dialysis chairs^{1,9}, and
39

40 Whereas, with a lack of consistent access to dialysis, many patients have experienced multiple
41 cardiac arrests and resuscitations and severe psychosocial distress leading to significant, debilitating, and
42 long-term health consequences that add further cost and burden to the health care system⁹, and
43

44 Whereas, emergency-only hemodialysis patients experienced a five-year mortality rate greater than
45 14-fold higher than patients undergoing scheduled maintenance dialysis, more ICU admissions, and an
46 almost 10-fold greater use of acute-care days^{12,13}, and
47

48 Whereas, emergency-only dialysis annually costs approximately \$285,000 per patient versus \$77,000
49 per patient for scheduled maintenance dialysis¹³, and
50

51 Whereas, H.R.2644 Chronic Kidney Disease Improvement in Research and Treatment Act of 2017 was
52 proposed "to understand the progression of kidney disease and the treatment of kidney failure in minority
53 populations and improve access to kidney disease treatment for those in underserved rural and urban
54 areas,"^{14,15} and

55 Whereas, 11 states and the District of Columbia are currently using state funding to provide
56 undocumented persons with some maintenance dialysis coverage, including California which has changed
57 its Medicaid policy to include “acute, ongoing, and maintenance renal hemodialysis” in its coverage of
58 emergency services^{9,16,17}, and
59

60 Whereas, the Renal Physicians Association’s position on dialysis of undocumented individuals is as
61 follows: “The federal government has a responsibility to provide care for all patients within the borders of
62 the United States, and the financial burden of care provided to citizens and noncitizens is both a federal and
63 state responsibility...difficult access to or denial of dialysis services will invariably hasten the patient’s
64 demise and ultimate death;” therefore be it
65

66 RESOLVED: That MSMS work with relevant stakeholders to identify and advocate for opportunities
67 to provide scheduled maintenance hemodialysis to undocumented persons in Michigan with End-Stage
68 Renal Disease, including but not limited to current programs that provide reimbursement for the health care
69 of undocumented immigrants, expansion of emergency Medicaid services, or programs implemented in
70 other states; and be it further
71

72 RESOLVED: That our Michigan Delegation to the American Medical Association (AMA) ask our AMA
73 to work with relevant stakeholders to identify and advocate for state and federal programs (i.e., Centers for
74 Medicare and Medicaid Services) to find equitable health care options to provide scheduled maintenance
75 hemodialysis for undocumented immigrants.
76

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78 WAYS AND MEANS COMMITTEE FISCAL NOTE: \$25,000 or more as this resolution directs MSMS to engage in
79 governmental advocacy.

Relevant MSMS Policy: None

Relevant AMA Policy:

Increasing Access to Healthcare Insurance for Refugee Populations H-350.956

Our AMA supports state, local, and community programs that remove language barriers and promote education about low-cost health-care plans, to minimize gaps in health-care for refugees.

Addressing Immigrant Health Disparities H-350.957

1. Our American Medical Association recognizes the unique health needs of refugees, and encourages the exploration of issues related to refugee health and support legislation and policies that address the unique health needs of refugees.
2. Our AMA: (A) urges federal and state government agencies to ensure standard public health screening and indicated prevention and treatment for immigrant children, regardless of legal status, based on medical evidence and disease epidemiology; (B) advocates for and publicizes medically accurate information to reduce anxiety, fear, and marginalization of specific populations; and (C) advocates for policies to make available and effectively deploy resources needed to eliminate health disparities affecting immigrants, refugees or asylees.

Health Care Payment for Undocumented Persons D-440.985

Our AMA shall assist states on the issue of the lack of reimbursement for care given to undocumented immigrants in an attempt to solve this problem on a national level

Federal Funding for Safety Net Care for Undocumented Aliens H-160.956

Our AMA will lobby Congress to adequately appropriate and dispense funds for the current programs that provide reimbursement for the health care of undocumented aliens.

Federation Payment for Emergency Services for Undocumented Immigrants H-160.917

Our American Medical Association supports federal legislation to extend Section 1011 of the Medicare Modernization Act (MMA, P.L. 108-173), which provides for federal funding to the states for emergency services provided to undocumented immigrants.

Protecting Equity in Access to Kidney Dialysis and Transplant and Advocating for Patients' best Interest in End Stage Renal Disease: 370.018MSS

AMA-MSS support evidence-based patient education and counseling regarding the relative risks and benefits of all treatment options for end-stage renal disease, including various types of dialysis and organ transplantation.

Advancing Quality Coordinated Care for Patients with End Stage Renal Disease H-370.957

Our AMA will work with Members of Congress and their staffs to ensure that any legislation which promotes integrated and patient-centered care for End Stage Renal Disease (ESRD) patients does not inappropriately impinge on the patient-physician relationship and is in the best interest of ESRD patients.

¹ Radford J, Buidman. Statistical portrait of the foreign-born population in the United States. Pew Hispanic Center. Posted April 19, 2016. <http://www.pewhispanic.org/2016/04/19/statistical-portrait-of-the-foreign-born-population-in-the-united-states-key-charts/#2013-fb-unauthorized-line>.

² Rodriguez, Rudolph A. "Dialysis for undocumented immigrants in the United States." *Advances in chronic kidney disease* 22.1 (2015): 60-65.

³ Pew Research Center. U.S. unauthorized immigrant population estimates by state, 2016. Updated Feb 5, 2019. <http://www.pewhispanic.org/interactives/u-s-unauthorized-immigrants-by-state/>

⁴ Institute on Taxation & Economic Policy (ITEP). Undocumented Immigrants' State & Local Tax Contributions. Washington, DC: March 2017. <https://itep.org/undocumented-immigrants-state-local-tax-contributions-2/>.

⁵ Broder T, Moussavian A, Blazer J. Overview of Immigrant Eligibility for Federal Programs. National Immigration Law Center. Published December 2015. <https://www.nilc.org/issues/economic-support/overview-immeligfedprograms/>.

⁶ United States Renal Data System. 2016 USRDS Annual Data Report: Epidemiology of Kidney Disease in the United States. *Am J Kidney Dis.* 2016;66(1):S1-S10.

⁷ Linden EA, Cano J, Coritsidis GN. Kidney transplantation in undocumented immigrants with ESRD: a policy whose time has come? *Am J Kidney Dis.* 2012;60(3):354-359.

⁸ Sommers BD. Stuck between health and immigration reform—care for undocumented immigrants. *N Engl J Med.* 2013;369(7):593-595

⁹ Cervantes L, Fischer S, Berlinger N, et al. The Illness Experience of Undocumented Immigrants With End-stage Renal Disease. *JAMA Intern Med.* 2017;177(4):529-535. doi:10.1001/jamainternmed.2016.8865

¹⁰ Johnson TL, Rinehart DJ, Durfee J, et al. For many patients who use large amounts of health care services, the need is intense yet temporary. *Health Aff.* 2015;34(8):1312-1319.

Rettig RA. Special treatment—the story of Medicare's ESRD entitlement. *N Engl J Med.* 2011;364(7):596-598.

¹¹ Cervantes L, Tuot D, Raghavan R, et al. Association of Emergency-Only vs Standard Hemodialysis With Mortality and Health Care Use Among Undocumented Immigrants With End-stage Renal Disease. *JAMA Intern Med.* 2018;178(2):188-195.

¹² Sheikh-Hamad D1, Paiuk E, Wright AJ, Kleinmann C, Khosla U, Shandera WX. Care for immigrants with end-stage renal disease in Houston: a comparison of two practices. *Tex Med.* 2007 Apr;103(4):54-8, 53.

¹³ Office of the Clerk, U.S. House of Representatives. Marino T, Lewis J. Reps. Marino, Lewis Reintroduce Kidney Disease Bill. Published 2017. <https://marino.house.gov/media-center/press-releases/reps-marino-lewis-reintroduce-kidney-disease-bi>.

¹⁴ Marino T, Lewis J. H.R.2644 - Chronic Kidney Disease Improvement in Research and Treatment Act of 2017.

¹⁵ Ruth L. Ackah, MD, Rohini R. Sigireddi, and Bhamidipati V. R. Murthy MD. Is Organ Retransplantation Among Undocumented Immigrants in the United States Just?

AMA Journal of Ethics. January 2019 Volume 21, Number 1: E1-118. <https://journalofethics.ama-assn.org/sites/journalofethics.ama-assn.org/files/2019-01/joe-1901.pdf>

¹⁶ California Department of Health Care Services. Criteria for emergency and pregnancy-related services for persons entitled to restricted benefits only. Page 4.1, Section R-15-98E. http://www.dhcs.ca.gov/services/medi-cal/Documents/ManCriteria_06_EmergPreg.htm.

¹⁷ Renal Physicians Association. Uncompensated Kidney Care for Citizens and Non-Citizens, Position Paper. *RenalMed.Org.*

<https://www.renalmd.org/store/download.aspx?id=A4F484DB-FA91-43AF-BC5C-7BF3444D293A>