Module 18

Paying for Dialysis or Transplant
Please Note
Use of Kidney School does not replace the need to talk with your health care team about your care and your options.

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Dialysis and transplant are costly, and you may worry about how to pay for them. This section will help you to see what your options may be.

**Most U.S. citizens can get Medicare when their kidneys fail—at any age.** Medicare covers, but does not pay the full cost of dialysis or transplant. This is one reason it can make sense for you to keep a job. Learn more in Module 17: Kidney Failure and Your Work Life.

**How Do I Get Medicare?**
To get Medicare, you need to have enough Social Security (or Railroad Retirement) work credits. When you work, you can earn up to four work credits each year. How much you must earn to get one credit changes with time.

**Choose Work, Not Disability**
When you are tired or don’t feel well, disability can sound good, but think hard before you give up your job. Social Security Disability Income (SSDI) may pay as little as 40% of what you earn from work. The more you earn, the less it will replace. Wages from work and health insurance can help pay costs not covered by Medicare.

**How Many Work Credits Do I Have?**

Call Social Security at (800) 772-1213 to find out your work credits. Or, start a Social Security account at https://secure.ssa.gov/.

If you do not have the credits you need, you have some options:

- **Did you miss income from freelance or contract work?** Check back through your tax forms to see if there were years when you did not earn all four credits. Did you earn more in those years than you said? Or, did you take deductions that made your income less? If so, you may be able to file an amended tax form. You may owe more taxes or penalties—but it may be worth it.

- **Are you married—or divorced after 10+ years of marriage?** If so, you may qualify under a spouse’s work record.

- **Those under age 22 with ESRD** can use a parent’s work credits and those 22-26 can use a parent’s work credits if their parent provides at least half their support.

In any of these cases, you may need a lawyer to help you.

If you cannot get Medicare, you may be able to get Medicaid in your state or get a Qualified Health Plan under the Affordable Care Act.
People with kidney failure need fewer work credits to get Medicare. You may use your own work credits or a spouse’s or a parent’s to qualify. Learn more from: www.medicare.gov/Pubs/pdf/10128-Medicare-Coverage-ESRD.pdf

How Do I Apply for Medicare?
You apply for Medicare through Social Security. Your clinic will send a form (CMS 2728) that says when you started treatment and which option you use. You must apply during your initial enrollment period, or wait until the next general enrollment period.

**Medicare Enrollment Periods**

- **Initial:** Ends after 3 months of dialysis
- **General:** January – March (yearly)

Parts of Medicare and Coverage

Medicare can be a primary or secondary payer. When you have a job-based health plan, it will be your primary payer for your first 30 months from when you were eligible for Medicare. After that Medicare will pay first.

Find Out When Medicare Could Start For You

Once you qualify, **when Medicare starts depends on which treatment you do.** Whether you take Medicare as soon as you can will also affect when it starts:

- For **home dialysis** (PD or HD) — Medicare can start in the 1st month of dialysis. You need to start training before the start of your 4th month of dialysis no matter where you had your first dialysis treatment.
- For **in-center HD** — Medicare will start on day 1 of your 4th month of dialysis.
- For **transplant** — Medicare Part A and/or B can start the month of a transplant. Part A can be backdated up to 12 months. You need to have Part A in place your transplant month if you ever want Part B to cover the transplant drugs, now or in the future.

See When Medicare Would Start for You - https://homedialysis.org/home-dialysis-basics/calculator
Medicare has four parts:

1. Part A covers hospital care, such as transplant costs for you and a donor.
   - Part A is free for most people. You do not have to pay a deductible for each hospital stay.
   - For the first 60 days of a hospital stay, Part A will pay 100% after the deductible. (While Medicare pays first.)
   - For the next 30 days—of the same stay—you will have a co-pay for each day.
   - After 90 days, there is an even higher co-pay. And, you start to use up your 60 “lifetime reserve” days. When those days are gone, you do not get them back.
   - If you leave a hospital or a skilled nursing home and stay out of it for 60 + days, your hospital days will start over. Any “lifetime reserve” days you used do not start over.

2. Part B covers outpatient care, like dialysis, transplant meds, and doctor fees.
   - Part B has a monthly premium that is based on how much you earn. There is a deductible each year, too.
   - When Part B is primary, it pays 80%.

3. Part C, or Medicare Advantage (MA) are plans sold by health insurance companies.
   - MA plans include your Part A and Part B coverage. And, they may add extras like glasses, hearing aids, and exercise programs. Be sure a plan will cover your doctors, hospital, transplant center, and all the drugs you take.
   - MA plans may require you to get care in a plan network, except in an emergency. You may need a referral to see a specialist. It may let you choose to pay more and go out of network. Or, it may let you see any doctor you want who will take the plan as payment.
   - MA plans must pay 80% of the cost of dialysis for out of area travel.
   - MA plans out-of-pocket costs can be as high as $7,550 a year—PLUS premiums and drug costs.

Your dialysis or transplant social worker can help answer your payment questions.
4. Part D is a drug plan you can buy from an insurance company when you have Medicare.

- **Part D has a monthly premium** and you will have out-of-pocket costs.

- **Part D plans have lists of the drugs that they will cover.** Your doctor may have to say why you need a certain drug. You may have a limit on how many pills you can get a month. And, you may have to try a less costly drug to see if it works before a more costly one will be covered.

- If you have limited income and assets, **you can apply for Part D “extra help” through Social Security.** This can pay all or part of your Part D premiums and some (or most) of your out-of-pocket costs for drugs.

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### Medicare Savings Program

When your income and assets are low, a Medicare Savings Program can help pay Part A and Part B premiums. Some of these plans pay deductibles and coinsurance, too. [Apply at your state Medicaid office.](https://www.kidneyschool.org)

<table>
<thead>
<tr>
<th>Medicare Savings Program</th>
<th>What Your State Will Pay for if You Qualify</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qualified Medicare Beneficiary (QMB)</td>
<td>• Part A and B premiums&lt;br&gt;• Deductibles&lt;br&gt;• Coinsurance&lt;br&gt;• Copays</td>
</tr>
<tr>
<td>Specified Low Income Medicare Beneficiary (SLMB)</td>
<td>• Part B premium</td>
</tr>
<tr>
<td>Qualifying Individual (QI)</td>
<td>• Part B premiums on a first-come, first-served basis. Those who got this help last year are first on the list.</td>
</tr>
<tr>
<td>Qualified Disabled and Working Individual (QDWI)</td>
<td>• Part A premium if you lost free Part A because you work</td>
</tr>
</tbody>
</table>

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### When Does Medicare End?

- Medicare lasts as long as you are on dialysis and pay the premiums.

- Medicare ends 36 months after transplant unless you have it due to age or disability.

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### Where Can I Get Help to Understand Insurance Options?

Each state has a state health insurance assistance program, or SHIP. Find your local SHIP for one-on-one support. [https://www.shiptacenter.org](https://www.shiptacenter.org)
Other Ways to Pay for Kidney Treatment

- **Medigap Plans (Medicare Supplements)**
  Medigap plans work with Parts A and B, but not C or D. *You* pay a premium—they pay most or all of your out-of-pocket costs. This saves you money. Whether you can buy a Medigap plan depends on your age and your state’s rules.

  Federal law makes health plans sell you a Medigap plan if you are 65+. **This law protects you for the first 6 months that you have Part B.** After that, they do not have to sell you a plan. Or, you may have to wait, since you have at least one pre-existing condition. Some states let you buy a Medigap plan if you are under 65 and disabled.

- **Medicare may cover things your EGHP does not.**

- **With two plans, you will have premiums, but should have fewer out-of-pocket costs.**

- **Part B can save you thousands of dollars more than you would pay for the premiums.** Clinics and doctors who get checks from Medicare (you can ask if they “accept Medicare assignment”) must take its allowed charge as payment in full. This means that if your EGHP pays 100% or more of the Medicare rate, a provider cannot charge you, too. Let’s say Medicare will pay $239.33 (the base rate in 2020) for one dialysis treatment. The clinic might charge your EGHP $2,000—or more! When your plan pays $1,600 (a lot more than $239.33), your clinic can’t charge you the $400 difference when you have Part B, too. With at least three treatments per week (156 per year—or more), you can see how these fees could add up without Part B to help.

- **When you have Part A and Part B the month you get a transplant, Part B will help pay for your costly meds.** If you don’t have Part A at that time, Part B will never pay for them. (Part D may pay for them, with co-pays.)

- **When you have Medicare, it saves an employer money.** This may help you to keep or find a job.

- **Having Part B protects you if you are laid off or lose your EGHP plan.** There is no “special enrollment” for Part B. If you don’t take it at the same time that you take Part A, you have to wait until January 1st to March 31st of the next year to enroll. Part B would not start until July 1st. So, you could have a gap. Always take Part A and B at the same time—or don’t take either one.
Employer Group Health Plan (EGHP)

A job may come with a health plan. You may or may not have to pay premiums. Most plans do have a deductible that you must pay each year. They may also have copays to go to a clinic, have a hospital stay, see doctors, get treatments or drugs, etc. Some plans limit where you can get care, so you need a referral to see a specialist. They may pay less if your care is from outside their “network” of doctors.

Other Health Plans

Don’t have an EGHP? There are other options to pay for all or part of your kidney and other health care. You can find links to these services at the end of this module.

Medicaid (Medi-Cal in California)

State Medicaid can help when you have very low income and few assets. It is paid for by both federal and state money. States must cover hospital stays, outpatient care, doctors, lab tests, and X-rays. And, they must cover nursing homes, home health, rides to health care, and more. States can choose to cover costs for other health care.

Do I Qualify for Medicaid?

Find out here: [www.hhs.gov/answers/medicare-and-medicaid/who-is-eligible-for-medicaid/index.html](http://www.hhs.gov/answers/medicare-and-medicaid/who-is-eligible-for-medicaid/index.html)

Children’s Health Insurance Program (CHIP)

CHIP is a state program of low-cost care for children whose families earn too much to get Medicaid. CHIP may cover pregnant women, too. You can apply at any time and if you qualify, CHIP starts right away. Well child visits are free. All states cover check-ups, vaccines, doctors, drugs, dental, vision, hospital care, lab tests, x-rays, and emergency care. There may be copays. Some states charge a premium for CHIP, but not more than 5% of your family’s yearly income.

Veterans’ Health Benefits

The VA has its own kidney disease program. It covers dialysis in VA clinics or in a community clinic the VA has a contract with. A veteran may qualify for the Veterans Transportation Service (rides) or Beneficiary Travel Benefits.
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(payment for rides). The rides must be to appointments at VA or authorized non-VA clinics. Kidney failure does not have to be service-connected. The VA may cover a paid home dialysis attendant. The VA has a transplant program, too. It covers lodging and meals as well as surgery. Find the VA transplant programs near you at: www.va.gov/health/services/transplant.

■ TRICARE

TRICARE covers health care—including kidney care. When you have kidney failure and can get Medicare, you must take it to keep TRICARE. And, you must take both Part A and Part B. There may be more than one TRICARE plan. Those who qualify are:

• Uniformed service members and their families
• Separating members and (maybe some of) their family members
• National Guard members and their families
• Survivors
• Military, Reserves, or National Guard retirees
• Young adult children of service members
• Medal of Honor recipients and their families
• Others in the Defense Enrollment Eligibility Reporting System (DEERS)

■ CHAMPVA

CHAMPVA covers health care for those who can’t get TRICARE. Are you a spouse or child of a veteran who was 100% permanently disabled? Or, one who died in the line of service or from a service-connected disability? If so, CHAMPVA may apply to you.

■ Qualified Health Plans (QHPs)

The Affordable Care Act (ACA) requires insurers to sell plans with a set of basic benefits. These are called QHPs. You can buy a QHP from an insurance broker or on the state or federal “Marketplace.” QHPs must take you with pre-existing conditions—and they can’t charge you more if you have one. They can charge you more based on:

• Your age
• If you smoke
• Your plan type and network
• Where you live
• The number of people who will be on your plan

You can buy or change your QHP only in the 6 weeks from November 1st to December 15th each year—unless you qualify for a “special enrollment period.” You cannot buy a QHP if you have Medicare.** Only QHPs through an employer (called “SHOP” on the Marketplace) work with Medicare to pay out-of-pocket costs. Learn more about short-term plans if you have a gap in coverage.
There are four levels* of qualified health plans:

1. **Bronze** - lowest premiums, highest out-of-pocket costs.
2. **Silver** - higher premiums and lower out-of-pocket costs than bronze plans. These are the only plans that have help for out-of-pocket costs.
3. **Gold** - higher premiums and lower out-of-pocket costs than silver plans.
4. **Platinum** - highest premiums, but lowest out-of-pocket costs.

* Those who are under age 30 can buy a “**Catastrophic**” plan. This has low premiums, but high costs.

**You may be able to [get help to pay out-of-pocket costs](#) on a Silver plan. You can have any plan and [get the premium tax credit](#) if your income is 400% of the [federal poverty level](#) or less.

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**Indian Health Service (IHS)**

The IHS helps Native Americans and Alaska Natives who are in one of the 573 tribes listed by the U.S. government. If you qualify for Medicare or another health plan, it’s good to still enroll in the IHS.

**State Kidney Programs**

Some states have programs to help people with kidney disease who meet their guidelines. Each program is different. See details on each program in the table on the next two pages.

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**Conclusion**

We shared lots of details about how to pay for treatment. Remember that timing is key. Watch for deadlines, penalties, and coverage gaps. Your social worker, clinic finance staff, or SHIP counselor can help answer questions. Reach out to Social Security and Medicare for more information. You can do this! Find helpful web links in the Personal Plan at the end.
# State Kidney Programs

<table>
<thead>
<tr>
<th>State Kidney Programs</th>
<th>Phone Number</th>
<th>What is Covered for Eligible Patients</th>
<th>Dialysis?</th>
<th>Transplant?</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Alabama Kidney Foundation</strong></td>
<td>(205) 934-2111</td>
<td>Help for daily living costs and rides to clinic</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Arkansas Kidney Disease Commission</strong></td>
<td>(501) 686-2806</td>
<td>Help to pay for up to three prescription drugs per month. (There is a small copay.) Some dental care.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Delaware Chronic Renal Disease Program</strong></td>
<td>(302) 424-7180, (800) 464-4357</td>
<td>Help for Part D drugs, nutrition supplements, and rides to clinic</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Illinois State Chronic Renal Disease Program</strong></td>
<td>(217) 785-2867</td>
<td>Help to pay for dialysis, in any setting</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>Maryland Kidney Disease Program</strong></td>
<td>(410) 767-5000, (866) 253-8461</td>
<td>Help for dialysis in a clinic or hospital for the first 3 months. Home dialysis equipment, supplies, services. Medicaid deductibles and coinsurance. Doctor fees. Copays for drugs on its list. Transplant meds.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Missouri Kidney Program</strong></td>
<td>(573) 882-2506, (800) 733-7345</td>
<td>Help for drugs on its list, through one pharmacy. Medicaid spenddowns. Ticket to Work Health Assurance program premiums. Some help for health plan premiums for transplant donors or recipients. Small amount of help for rides to clinic.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Nebraska Chronic Renal Disease Program</strong></td>
<td>(402) 471-0925</td>
<td>Pays a share of costs for drugs on its drug list. Help to pay for dialysis in any setting.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>New Jersey End Stage Renal Disease Patient Assistance Program</strong></td>
<td>(201)-240-0059</td>
<td>Pays clinics back for drugs on their list and nutritional supplements.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td><strong>Pennsylvania Renal Disease Program</strong></td>
<td>(800) 225-7223</td>
<td>Help for medical management. In- and outpatient services. Home dialysis supplies and equipment. Medications. Some rides to clinic.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>State Kidney Programs</td>
<td>Phone Number</td>
<td>What is Covered for Eligible Patients</td>
<td>Dialysis?</td>
<td>Transplant?</td>
</tr>
<tr>
<td>----------------------------------------------------------------</td>
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<td>-------------</td>
</tr>
<tr>
<td>South Dakota Medicaid for People with Chronic Renal Disease</td>
<td>(605) 733-3495</td>
<td>Help for dialysis in any setting. Home dialysis supplies and equipment. Prescription drugs. Transplant surgery. Rides to clinic.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Tennessee Renal Disease Program</td>
<td>(615) 741-3159</td>
<td>Help for up to $120/month of kidney drugs and nutrition supplements on list. One month of in-center dialysis during the Medicare waiting period for those without health plans. Medicare coinsurance for up to six out-of-state dialysis treatments. Part A and B premiums for those not getting Social Security. Up to $500 in dental care/year. Case management and other aid from the Renal Disease Intervention Program.</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Wisconsin Chronic Disease Program</td>
<td>(608) 266-1865</td>
<td>Help for treatments. One pre-transplant dental exam and X-rays. Kidney donor health services for a transplant. Some drugs. Some home dialysis supplies. Some lab tests and X-rays.</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>
Take the Kidney Quiz!
You’ll see how much you’re learning if you take our quick kidney quiz. It’s just 10 questions. How about it? (Answers are on page 18-3.)

1. What do you need for ESRD Medicare?
   a. U.S. citizenship or lawful permanent resident status
   b. Social Security work credits as worker or dependent
   c. Age 65 or older
   d. U.S. citizenship and work credits

2. What is the earliest you can get Medicare when you choose in-center dialysis?
   a. The 1st day or the 1st month of dialysis
   b. The 1st day of the 4th month of dialysis

3. Who cannot keep Medicare indefinitely?
   a. Anyone on dialysis
   b. Anyone with a transplant
   c. Anyone with Medicare who is age 65 or received SSDI checks 24 months for disability other than ESRD

4. What does Medicare Part B NOT cover?
   a. In-center dialysis including ESRD-related drugs and labs
   b. Home dialysis equipment, supplies, clinic visits, and ESRD-related drugs and labs
   c. Staff to do your home dialysis, called staff-assisted home dialysis
   d. Transplant anti-rejection drugs if you got your transplant at a Medicare-approved program and had Part A the transplant month

5. Which part of Medicare pays for dialysis?
   a. Part A
   b. Part B
   c. Part C (Medicare Advantage)
   d. Part D
   e. Parts B and C

6. Who can delay enrolling in Medicare without a penalty or gap in coverage?
   a. Anyone on dialysis or with a transplant
   b. Anyone who has a Qualified Health Plan
   c. Anyone whose job-based plan is paying primary

7. Which things may save you money on dialysis or transplant care if you qualify?
   a. Having Medicare and a Medigap plan or Medicaid
   b. Having a Medicare Savings Program
   c. Having Part D “extra help”
   d. Having Medicare Part A and B when your job-based plan pays first
   e. All of the above

8. Will a Medicare Advantage plan pay 80% for dialysis when you’re traveling?
   a. Yes
   b. No

9. Can anyone of any age living in any state get a Medigap plan?
   a. Yes
   b. No

10. Why might you want Medicare and not a Marketplace plan?
    a) The ACA is under threat from Congress.
    b) Medicare may give you more doctor choices.
    c) Marketplace plans are for those who can’t get other health plans.
    d) All of the above.
    e) None of the above.
Paying for Dialysis or Transplant Personal Plan

Talk to my dialysis or transplant social worker for help with payment questions. Find out when Medicare could start for me - https://homedialysis.org/home-dialysis-basics/calculator

Social Security, Medicare, and Medicaid

- What is Medicare Part D Extra Help? www.ssa.gov/benefits/medicare/prescriptionhelp
- Who can and can’t get SSI and what counts as income and resources? www.ssa.gov/ssi/text-eligibility-ussi.htm.
- Find a link to a list of services: www.medicaid.gov/medicaid/benefits/list-of-benefits/index.html
- Find your state’s SHIP for health insurance help: www.shiptacenter.org/.
- See if the Pickle Amendment might help you get Medicaid: https://www.rubinlaw.com/resources/the-pickle-rule-article/.

Other Ways to Pay for Kidney Care

- Medicare https://www.medicare.gov
- Medicare Savings Programs (MSPs) https://www.medicare.gov/Pubs/pdf/10128-Medicare-Coverage-ESRD.pdf
  - Some events let you buy a Medigap plan outside the 6-month period: https://www.medicare.gov/medigap-supplemental-insurance-plans/#/m?lang=en
- Employer Group Health Plan (EGHP)
- Other Health Plans
  - Children’s Health Insurance Program (CHIP) https://www.healthcare.gov/medicaid-chip/childrens-health-insurance-program/
  - Veterans’ Health Benefits https://www.va.gov/health/services/transplant/
  - TRICARE https://www.tricare.mil
• CHAMPVA https://www.va.gov/health-care/family-caregiver-benefits/champva/

• Qualified Health Plans (QHPs) https://www.healthcare.gov
  - Do you qualify for a Special Enrollment Period for a marketplace plan? www.healthcare.gov/coverage-outside-open-enrollment/special-enrollment-period/

• Indian Health Service (IHS) https://www.ihs.gov/locations/