

What is Dialysis?

Why should we urgently take a look at what's happening in Dialysis care? It was touted as a miracle cure in the 70's and has become the most shocking example of America's broken medical system. It affects more patients than any other, while corporate America reaps the profits. Invisible for decades, it's the leading cause of the unnecessary death of countless patients, many of whom are vulnerable, disenfranchised Americans. It is also a place where we can affect change by shining a light on what has gone off the rails.

1. DISPROPORTIONATE HEALTHCARE. *Kidney failure disproportionately affects minority populations. Nearly 600,000 Americans suffer kidney failure, and need dialysis -- mechanical filtration of their blood -- to stay alive.* African-Americans are hardest hit: they make up only 13.6% of the US population, yet constitute 35% percent of kidney failure victims. Hispanics, Native Americans and Pacific Islanders are also high-risk.

2. YOUR TAX DOLLARS AT WORK. *Dialysis is America's only major "Medicare for All" program.* In 1972, Congress promised to pay for the treatment of nearly every American with kidney failure, via Medicare, Medicaid or another government program.

3. ONLY IN AMERICA: *The per capita costs of dialysis in the US is the highest in the industrialized world (about \$35 billion per year), yet the survival rate among US patients is the lowest.* Dialysis patients in Canada, Germany and France live 2-3x longer than in the US. In Japan, they live 3-4x longer.

4. THE URGENCY *Kidney failure patients need at least 3 treatments per week, of 3-4 hours per treatment, or they die in weeks or even days.* Nephrologists (kidney doctors) agree this is the minimum amount of treatment most patients require, and that longer, more frequent dialysis vastly improves patient survival and wellbeing. Over-medicating and high-speed dialysis (high ultrafiltration rate) can also harm and kill patients.

The Big Two

5. CORPORATIZING HEALTHCARE. *US dialysis is dominated by Fresenius and DaVita, two multi-billion-dollar corporations. Each year they extract billions of dollars in profit from the industry.* They control about 80% of free-standing dialysis units, run many dialysis treatment units in hospitals and nursing homes, and have a strong presence in medical research. The Big Two exert duopoly control over US dialysis; in many regional markets, one of these two firms has a monopoly.

6. DANGEROUS DIALYSIS *Big Dialysis puts profits before patient health.* **Corporate Dialysis:** Their clinics typically provide treatments that are **faster, shorter, and use more**

drugs than is safe for patients to bring in as many patients as possible in the shortest amount of time.. Understaffing is a common problem, stressing their health workers and putting patients at risk. Inexperienced dialysis technicians are often tasked with high-risk medical procedures, such as inserting 15-gauge needles into major arteries and veins. (In other countries, registered nurses perform these procedures.)

7. **QUALITY OF CARE.** Workers under **extreme pressure from corporate managers to "hit their numbers"** can come into conflict with patients who question their quality of care. *These patients are often singled out as troublemakers, and threatened, isolated, even involuntarily discharged -- excluded from their clinics.* Anecdotal evidence suggests this is particularly true of Medicare and Medicaid patients, who are less profitable than privately-insured patients, and of minority patients.

8. **BLACKBALLED TO DEATH.** *Nearly all discharged patients are subsequently **blackballed**, i.e. refused treatment by other dialysis units in their area, even those run by competitors.* They can only receive treatment in a hospital ER, but only receive treatment when their vital signs reach **emergency -- life-threatening --** levels. Such patients typically die within 6 to 12 months.

The Crime

9. **CORPORATE CRIMINALS.** *DaVita and Fresenius have been **repeatedly accused by prosecutors and whistleblowers of Medicare fraud, kickbacks, patient harm and death, bribery under the Foreign Corrupt Practices Act, and other wrongdoing.*** They routinely pay settlements in the hundreds of millions of dollars to resolve these lawsuits, which allows them to deny wrongdoing and liability. Nevertheless, the US government continues to entrust some of the nation's most vulnerable patients to their care, handing them billions of Medicare and other healthcare dollars every year.

10. **GOVERNMENT CORRUPTION.** *State and national regulators who oversee the dialysis industry are staffed predominantly by former, current or future employees of the Big Two.* Patients who inform these "regulators" of mistreatment at their dialysis clinics often report that the regulators take the side of Big Dialysis, not the patients. As the saying goes, the fox has been left in charge of the hen house.

11. **UPHILL BATTLE.** Many workers in the dialysis industry are also victims of the Big Two business model. *Big Dialysis has spent **hundreds of millions of dollars to fight these new laws and initiatives, thereby protecting their profits, not their patients.*** SEIU-UHW, a major healthcare workers' union in California, is fighting to improve treatment times, increase staff and medical expertise at clinics, cap Big Dialysis profits, and other steps to improve patient outcomes and also to make workers' lives more bearable -- to allow them to take proper care of patients.