

April 14, 2020 Seema Verma Administrator Centers for Medicare and Medicaid Services U.S. Department of Health and Human Services 200 Independence Avenue SW Washington, DC 20201

Dear Administrator Verma:

On behalf of the American Society of Nephrology (ASN), we greatly appreciate the aggressive actions taken by the Centers for Medicare and Medicaid Services (CMS) in providing regulatory flexibilities to help health care providers contain the spread of 2019 Novel Coronavirus Disease (COVID-19) during this unprecedented public health emergency (PHE). ASN's more than 21,000 members thank you and everyone at CMS and the broader Department of Health and Human Services (HHS) who have worked to protect all patients while also addressing the unique needs of patients with kidney diseases – especially those with kidney failure.

During the COVID-19 PHE, our entire health care system is working to keep patients safe by avoiding contact – in addition to prevailing social distancing efforts – with other patients and health professionals to minimize the spread of the virus and flatten the curve. As CMS is well aware, people with kidney failure often have multiple comorbidities and are extremely vulnerable to the effects of COVID-19. Increasingly, with the waivers provided by CMS and with encouragement from ASN, nephrologists are conducting their evaluations of stable patients with kidney failure and kidney disease via telehealth to minimize the risk of spreading the virus among both patients and the health professionals who treat them.

To further reduce exposure to the virus for patients with kidney failure and their care teams, ASN urges CMS to immediately halt all in-person infection control surveys/inspections for the duration of the PHE, including those referred to ask "desktop" surveys or any other names.

Under normal conditions, unannounced inspections are an established part of a facility's operations and an important mechanism to ensure patient safety. Under the current conditions, the conduct of surveys/inspections in units that are actively caring for dialysis patients with COVID-19 is undermining virus control efforts and compromising patient and care team safety. When surveyors are present, there is often no way to ensure proper distancing standards in the facility. Their presence is contradictory the

current "no visitor" policies being observed in most, if not all, facilities. In addition, surveyors use vitally needed personal protective equipment (PPE) that is already in short supply.

The nurses, technicians, nephrologists, and other members of the care team in dialysis facilities with COVID-19 positive patients are operating under inordinately high levels of stress to provide the life-saving dialysis their patients require to live. Requiring them to participate in the detailed survey process adds a level of sheer complexity that is, in the context of COVID-19, problematic and ultimately not in the best interest of patients.

ASN appreciates CMS' dedication to providing the highest quality care and safety possible to patients with kidney failure. However, at this time, these activities undermine efforts to suppress the spread of the virus to patients under the care of these facilities and unnecessarily jeopardizes the health of patients and caregivers. ASN stands ready to work with CMS in any way necessary to ensure the safety of these patients but believes that the ongoing survey process in dialysis facilities caring for patients with COVID-19 is not the solution.

Thank you for everything CMS is doing in this PHE. If you would like to discuss this further, please contact David White, ASN Regulatory and Quality officer at dwhite@asn-online.org.

Sincerely,

Anupam Agarwal, MD, FASN

President