



BROWN
Alpert Medical School

May 14, 2024

Dear Members of the House Committee on Finance:

I am writing in favor of H7398.

In my daily role as a family physician, I regularly witness the public health outcomes created by vague policy language. Medicaid eligibility rules that work for the general population can create inadvertent gaps in the safety net for special populations. Undocumented Rhode Islanders who develop end-stage renal failure not only fall through the safety net, they end up in a very expensive, unjust, and never-ending state of policy limbo.

For most Rhode Islanders with end-stage kidney disease, the journey to dialysis begins at a hospital. They are soon covered by Medicaid and their dialysis care is transferred to a community-based facility with care coordination and wrap-around services. Many of these patients are considered for a kidney transplant – potentially liberating them from the need for dialysis and allowing them to return to work and have near normal lives.

Undocumented Rhode Islanders, however, become stranded in administrative limbo – undergoing “emergency” dialysis at the hospital indefinitely for years. They are not eligible for Medicaid, leaving the hospitals to absorb the six-figure cost per year for each uninsured person, and chronically adding to their operating deficits. Additionally, the undocumented persons are ineligible for consideration of kidney transplantation - creating a very expensive medical limbo that forces them to use emergency dialysis at the hospital for the rest of their lives.

H7398 would allow the state Medicaid program to cover any patients on dialysis who are without insurance regardless of their immigration status. This bill would allow these patients to shift their care to community facilities and be eligible for potential near-curative kidney transplantation. **Twenty other states including Massachusetts, Connecticut, Arizona, and California now allow Medicaid coverage for this population that is quite literally caught in the system.**

Allowing Medicaid coverage would not only free up hospital-based resources, it would allow many of these patients to receive kidney transplants and resume near-normal lives in the community. Such a decision is not only ethical and just, but fiscally responsible as well. I encourage the members of the House to vote in favor of H7398.

Sincerely,

Andrew Saal, MD MPH FAAFP
Clinical Assistant Professor of Family Medicine
Warren Alpert Medical School of Brown University

Additional Resources:

- Persaud N. "More States Providing Outpatient Hemodialysis for Undocumented Immigrants." Renal and Urology News. 25 April, 2023
<https://www.renalandurologynews.com/news/nephrology/hemodialysis/more-states-providing-outpatient-hemodialysis-for-undocumented-immigrants/>
- Kluesner et. al. [Ethical issues and obligations with undocumented immigrants relying on emergency department for dialysis.](#) *Journal of the American College of Emergency Physicians Open*. 27 August 2021; DOI:10.1002/emp2.12590.
- Goldstein. [Why Undocumented Immigrants Struggle to Receive Organ Transplants.](#) *New York Times*. May 21 2023.