



This column informs members of important legislative issues and health care policy, and encourages political activism. Write to nsna@nsna.org attn: Leg/Ed to contribute ideas.

By Jenna Sanders, NSNA Vice-president, and Chair, Leg/Ed Committee

Each year at our Annual Convention, the hard work of a number of students is brought forth in the form of resolutions to the House of Delegates. The topics vary, but the common theme of improving the practice, image and goals of nursing is strong. NSNA's 55th Annual Convention in Anaheim, CA, was no exception – we've followed up with Legislative Alerts since then to our entire membership base

urging them to support this legislation by calling their Congressperson. Angela Bookout made a difference, and so can any other member of NSNA. I encourage you to read her story and be inspired. Is there an issue that you feel strongly about? Consult our *Guidelines for Planning a Resolution* online at www.nсна.org under Publications, and start making a difference today!

Changing Lives through Political Action as a Nursing Student

By Kristin Paulson



Imagine if you were told you won the lottery! Now imagine being told that you would have to take part in another lottery, one in which you'd have to stake your life. This is how many kidney transplant patients feel. Under current Medicare regulations, patients with end-stage renal disease who qualify for and receive a donor kidney get a lifeline to necessary medication for three years. Although one of the many qualification criteria is that these patients must be able to afford the costs of their medications, the future can be uncertain as some insurance companies will not cover the medications related to kidney transplants because the condition is classified as pre-existing.

People of all ages with end-stage renal disease

(permanent kidney failure requiring dialysis or a kidney transplant) qualify for Medicare (see www.cms.hhs.gov for complete eligibility information). They need to go to dialysis approximately three times a week, for four hours at a time (www.kidney.org). End-stage renal disease patients go through a rigorous process to qualify for a kidney transplant, including consideration of medical and financial situations. Once patients qualify for a kidney transplant, they wait on a list until a match is found and if that happens, they need to take special care of themselves so their bodies do not reject the transplant. Immunosuppressant drugs are key to ensuring that the body does not reject the kidney and that recipients can resume a fairly regular life, attend school, go to work and be productive members of society. The challenge that faces many kidney transplant patients is that immunosuppressant medications are only covered by Medicare for 36 months after the transplant. Afterwards, they no longer qualify for Medicare as they are no longer in end stage renal failure.

Immunosuppressant drugs cost approximately \$14,000 - \$26,000 annually; without these drugs, patients are likely to reject a transplanted kidney and end up reverting to end stage renal disease. They must then return to dialysis three times a week with an estimated annual cost of \$67,500 annually per patient, covered by Medicare (Yen, Hardinger, Brennan,



Woodward, Desai, Crippin, Gage & Schnitzler, 2004). You can see the ironic and painful “Catch 22” aspect to this cycle.

Angela Bookout, former NSNA member, was a kidney transplant recipient at age three and again in 2003. When she began nursing school, she worked to reeducate other nursing students about the dilemma faced by transplant recipients. Angela attended school full time while working part-time as a nurse’s aide at a local hospital. While in school, Angela worried about what was going to happen once her 36 months were up. Even with Medicare, Angela had to pay 20% of the medication costs, about \$300 a month. Angela was lucky enough to have a pharmacy that let her carry a balance forward when she did not have the entire payment amount she owed.

Rather than worrying about what would happen when her 36 months were up, Angela decided to do something about it. She discovered that there was a federal bill about extending the coverage for immunosuppressant drugs for the life of the transplant recipient. Angela discussed this bill at her school’s student nurses’ association and with their support drafted a resolution about supporting uninsured kidney transplant patients and presented it at the Michigan Nursing Student Association Convention in February 2007. Further refinements to the resolu-

tion were made focusing on life time coverage of immunosuppressant medications for kidney transplant patients. She presented this resolution at the NSNA Convention in April 2007 where it was passed by the House of Delegates.

Angela has now graduated and is a staff nurse on a renal unit. She is relieved she has insurance that covers most of the costs of her lifeline so she can continue to live her life to its fullest. Angela is currently working with her U.S. Congressman to raise awareness about the current House Bill 3282, Comprehensive Immunosuppressive Drug Coverage for Kidney Transplant Patients Act of 2007.

Angela is a wonderful example of a nurse being an advocate and turning passion into action. Angela can speak from her personal experiences as well as from the knowledge she has gained becoming a nurse. She knows that it is her job, along with all nurses and nursing students, to advocate for policies that can make a positive difference in people’s lives. Please take the time to read the resolution Angela presented at the NSNA Convention and then write to your United States Congressman and encourage him/her to support HB 3283. ☺

references

- National Kidney Foundation: Fact Sheets. (2005). Retrieved February 22, 2007 from <http://www.kidney.org/news/newsroom/fsitem.cfm?id=30>
- U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services. (2007). Retrieved January 24, 2008 from <http://www.cms.hhs.gov>
- Yen, E.F., Hardinger, K., Brennan, D.C., Woodward, R.S., Desai, N.M., Crippin, J.S., Gage, B.F. & Schnitzler, M.A. (2004). Cost-effectiveness of extending Medicare coverage of immunosuppressive medications to the life of a kidney transplant. *American Journal of Transplantation* 4(10), p. 1703-1708.