

Renee Kolbeck: Medicare reimbursements are leaving patients behind

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When President Joe Biden traveled to Madison in February, he unveiled his administration's plans to revitalize communities and protect people in Wisconsin who have been left behind. Recently, he doubled down on that pledge when he [criticized](#) former President Donald Trump's "America First" agenda for failing to do just that here in the Badger State.

But now, because of how the Centers for Medicare and Medicaid Services (CMS) reimburses healthcare providers, some of the most vulnerable Wisconsinites are at risk of losing access to healthcare that they need and deserve.

According to [McKinsey/Oxford Economics](#), labor costs ballooned by 10% last year and will continue to grow above normal rates. Additionally, the US already faces immense labor shortages, especially in healthcare. Wisconsin in particular [faces](#) massive healthcare labor shortages, and nurses account for 52% of these healthcare vacancies. Since CMS hasn't properly prioritized reimbursements for healthcare providers, many providers can not hire enough nurses and technicians to provide adequate care.

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This is especially true for the dialysis community. This summer, CMS announced it only planned to increase reimbursements for dialysis providers by 1.6% – a rate far below inflation that will ultimately make staffing issues at dialysis centers worse.

In Wisconsin, kidney disease is a steadily growing health concern, and today, our state has one of the [highest](#) rates of kidney disease in the country. That means more and more people rely on dialysis centers to receive essential, life-saving healthcare. Unfortunately, CMS' proposed increase does little to improve the already worrying state of dialysis care in Wisconsin and throughout the US. A 1.6% increase is simply not enough to be able to provide kidney disease patients in Wisconsin with quality care.

The meager increase for dialysis providers is another in a long line of examples of CMS neglecting to properly fund healthcare providers, and in so doing, further worsening Wisconsin's spiraling healthcare workforce shortage.

But it goes deeper than that. CMS also shows a troubling willingness to ignore new therapies and treatments that come on the market. In the kidney community, there are many new treatments being developed that could help ease symptoms and complications from dialysis. Even though these treatments could help many patients live more comfortable lives, CMS is doing nothing to ensure patients can affordably access them. CMS has a responsibility to give healthcare providers the incentive to prescribe innovative new treatments, but they are largely failing to do so. CMS needs to overhaul its reimbursement process to ensure that healthcare providers have the resources they need and that patients can access new life-saving therapies.

We can't afford to leave Wisconsin's kidney patients behind – nor should we allow it to happen.

– Kolbeck resides in Menomonee Falls, where she leads a busy life as a single mom, hair stylist and realtor. In 2021, Renee was diagnosed with kidney cancer. She underwent surgery to remove the tumor and is now doing immunotherapy to reduce the risk of the cancer returning.