

★ ARGUMENT IN FAVOR OF PROPOSITION 23 ★

Life-Saving Changes for Dialysis Patients

Three times each and every week, 80,000 Californians with End Stage Renal Disease go to one of more than 600 commercial dialysis centers in the state where they spend three to four hours connected to a machine that removes their blood, cleans it, and returns it to their bodies. Dialysis literally is what keeps them alive, and they must continue the treatment for the rest of their lives or until they receive a kidney transplant.

Because the lives of these fellow Californians are so dependent on dialysis that is done both safely and effectively, we give our absolute support to the *Protect the Lives of Dialysis Patients Act*, an initiative appearing on the Nov. 3 ballot. This initiative will make common-sense improvements to dialysis treatment that will protect some of the most medically vulnerable people in our society.

The initiative does four major things:

First, it requires a physician or nurse practitioner to be in the clinic any time patients are being treated, which is not currently required. Dialysis is a dangerous procedure, and if something goes wrong, a doctor or highly trained nurse should be nearby.

Second, dialysis patients are prone to infections from their treatments that can lead to more serious illnesses or even death. This initiative requires clinics to report accurate data on infections to the state and federal governments so problems can be identified and solved to protect patients.

Third, like all other life-saving health care facilities, the initiative says the dialysis corporations cannot close clinics or

reduce their services unless approved by the state. This also is designed to protect patients, particularly in rural communities, to make sure they have access to dialysis treatment, and to stop the dialysis corporations from using closures to pad their bottom line.

Fourth, it prohibits clinics from discriminating against patients because of the type of insurance they have, and it protects patients in every clinic. No matter if they are located in a wealthy neighborhood or a poor, rural, Black or Brown community, all clinics will be required to have a doctor or nurse practitioner on site, all clinics will be required to report their infection rates to the state and federal governments, and all dialysis corporations will be prohibited from discriminating against patients because of the type of insurance they have.

Don't listen when the dialysis industry claims the initiative will create huge new costs or say patients will be harmed or claim that it will create a shortage of doctors—those fake arguments are just designed to use patients and the coronavirus pandemic as scare tactics in their dishonest public relations campaign. The fact is, these corporations can easily make these changes and still make hundreds of millions of dollars a year without disrupting our healthcare system.

Proposition 23 will make the changes we need to truly protect dialysis patients. We urge you to vote YES!

MEGALLAN HANDFORD, Dialysis Registered Nurse

PASTOR WILLIAM D. SMART, JR.

Southern Christian Leadership Conference of Southern California

CARMEN CARTAGENA, Dialysis Patient

★ REBUTTAL TO ARGUMENT IN FAVOR OF PROPOSITION 23 ★

Proposition 23 is a DANGEROUS, COSTLY MEASURE funded by one special interest group with no expertise in dialysis. More than 100 leading organizations strongly urge: NO on 23.

• **AMERICAN NURSES ASSOCIATION\CALIFORNIA WARNS PROP. 23 IS DANGEROUS:** “Nearly 80,000 Californians with kidney failure rely on dialysis to survive. Prop. 23 adds unnecessary, costly requirements that could shut down hundreds of dialysis clinics—dangerously reducing access to care and putting tens of thousands of vulnerable patients at serious risk.”

• **CALIFORNIA MEDICAL ASSOCIATION URGES NO ON PROP. 23:** “Proposition 23 would take thousands of doctors away from hospitals and clinics—where they’re needed—and place them into bureaucratic jobs at dialysis clinics where they aren’t. Prop. 23 worsens our physician shortage and would make us all wait longer to see our doctors.”

• **DIALYSIS PATIENT CITIZENS, A PATIENT ADVOCACY ORGANIZATION REPRESENTING 28,000 PATIENTS:** “Prop. 23 threatens access to care, putting dialysis patients at greater risk of death for missed treatments.”

• **NAACP CALIFORNIA:** “Kidney disease disproportionately affects people of color. Prop. 23 hurts minority patients and those in disadvantaged communities the most.”

• **CALIFORNIA TAXPAYER PROTECTION COMMITTEE:**

“Prop. 23 would increase health care costs by \$320,000,000 annually. This massive increase would hurt Californians already struggling financially.”

PROP. 23 MAKES NO SENSE

Each dialysis patient is already under the care of their own kidney doctor. And dialysis treatments are administered by specially-trained dialysis nurses and technicians. Furthermore, the federal and state governments extensively regulate dialysis clinics and California clinics outperform other states in clinical quality.

JOIN DOCTORS, NURSES, SOCIAL JUSTICE & PATIENT ADVOCATES: NO ON 23!

www.NoProposition23.com

MARKETA HOUSKOVA, DNP, RN, Executive Director
American Nurses Association\California

DEWAYNE COX, Kidney Dialysis Patient

PETER N. BRETAN, MD, President
California Medical Association

★ **ARGUMENT AGAINST PROPOSITION 23** ★

NURSES, DOCTORS AND PATIENTS URGE NO ON 23—THE DANGEROUS AND COSTLY DIALYSIS PROPOSITION

Nearly 80,000 Californians with failed kidneys receive dialysis treatment three days a week to stay alive. Dialysis treatment does the job of the kidneys by removing toxins from the body. Missing a single treatment increases patient risk of death by 30%.

Prop. 23 seriously jeopardizes access to care for tens of thousands of Californians who need dialysis to stay alive. That's why the American Nurses Association\California, California Medical Association and patient advocates OPPOSE Prop. 23.

PROP. 23 WOULD FORCE COMMUNITY DIALYSIS CLINICS TO CUT SERVICES AND CLOSE—PUTTING LIVES AT RISK

Proposition 23 would force dialysis clinics to have a physician administrator on-site at all times, even though they would not care for patients. Each dialysis patient is already under the care of their personal kidney physician and dialysis treatments are administered by specially trained and experienced dialysis nurses and technicians.

This useless bureaucratic mandate would increase clinic costs by hundreds of millions annually, putting half of all clinics at risk of closure.

"Prop. 23 dangerously reduces access to care, putting vulnerable dialysis patients at serious risk."

—Marketa Houskova, Doctor of Nursing Practice, RN, American Nurses Association\California

PROP. 23 WOULD MAKE OUR PHYSICIAN SHORTAGE WORSE AND LEAD TO MORE EMERGENCY ROOM OVERCROWDING

"Proposition 23 would take thousands of doctors away from hospitals and clinics—where they're needed—and place them into bureaucratic jobs at dialysis clinics where they aren't. This is not the time to make our physician shortage worse."

—Dr. Peter N. Bretan, MD, President, California Medical Association

Emergency room doctors strongly oppose Prop. 23. It would

force dialysis clinics to close—sending tens of thousands of vulnerable patients to emergency rooms, creating longer ER waits and reducing capacity to deal with serious emergencies. **PROP. 23 WOULD INCREASE HEALTH CARE COSTS BY HUNDREDS OF MILLIONS**

According to a study by the Berkeley Research Group, Prop. 23 would increase health care costs by \$320 million annually. This massive increase would be especially damaging when so many Californians struggle financially.

DIALYSIS CLINICS ARE STRICTLY REGULATED AND PROVIDE HIGH QUALITY CARE

The federal and state governments extensively regulate dialysis clinics. According to the federal Centers for Medicare & Medicaid Services, California dialysis clinics outperform other states in clinical quality and patient satisfaction.

"Every dialysis patient is under the care of a physician kidney specialist, and dialysis treatments are administered by specially-trained nurses and technicians. It makes no sense to require physician administrators on-site full-time."

—Dr. Jeffrey A. Perlmutter, MD, President, Renal Physicians Association, representing 3,500 kidney doctors

ANOTHER SPECIAL INTEREST ABUSE OF OUR INITIATIVE SYSTEM

The same group promoting Prop. 23 spent \$20,000,000 last election pushing a similar measure voters rejected. They're at it again, pushing another dangerous dialysis proposition.

DOCTORS, NURSES AND PATIENT ADVOCATES: NO ON 23!

- American Nurses Association\California • California Medical Association • Chronic Disease Coalition • NAACP California
- Latino Diabetes Association • Women Veterans Alliance
- Minority Health Institute

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MARKETA HOUSKOVA, DNP, RN, Executive Director
American Nurses Association\California

LETICIA PEREZ, Kidney Dialysis Patient

PETER N. BRETAN, MD, President
California Medical Association

★ **REBUTTAL TO ARGUMENT AGAINST PROPOSITION 23** ★

DIALYSIS CORPORATIONS WANT TO PROTECT THEIR PROFITS

In 2018, the California dialysis industry spent a record \$110 million to defeat an initiative to improve conditions in dialysis clinics and protect patients from inflated billing.

Why did they spend so much? *To protect their massive \$468 million in profits in California in 2018.*

To patients, dialysis is lifesaving. But to industry executives, it's a huge money-maker, so they're at it again, stoking fear by threatening to close clinics if Prop. 23 passes and they're held accountable to higher standards. Once again they are using gravely ill dialysis patients to shield their perks and million-dollar salaries.

They claim, falsely, that the initiative will cost them huge sums of money, *based on a highly dubious "study" that THEY paid for.*

They claim doctors are against it, *but many of those doctors are on their payroll.*

They say it will cause doctor shortages and overcrowded emergency rooms, *but kidney doctors do not staff ERs.*

They say dialysis clinics are already highly regulated, *but they face far fewer inspections than other health facilities, and even so deficiencies are often uncovered.*

Prop. 23 makes commonsense improvements to protect patients' lives, like having a doctor onsite to deal with emergencies, requiring the centers to report infection data, ending discrimination against some patients based on the type of insurance they have, and requiring the state to approve any clinic closures so patients aren't left without treatment.

Once and for all, Californians can protect fragile dialysis patients by voting YesOnProp23.com.

EMANUEL GONZALES, Dialysis Technician

PASTOR WILLIAM D. SMART, JR.

Southern Christian Leadership Conference of Southern California

ROBERT VILLANUEVA, Dialysis Patient