

**Prop 23: Establishes State Requirements For Kidney Dialysis Clinics.
Requires On-site Medical Professional. Initiative Statute.**



Prop 23 The Way It Is

- **Approx. 600 licensed Clinical Dialysis Centers (CDCs) operate in California serving about 80,000 patients/month**
- **Under federal rules, the patient's doctor must visit the patient during dialysis treatment at the CDC at least once per month.**
- **DaVita, Inc. and Fresenius Medical own or operate nearly three-quarters of licensed CDCs in California.**
- **Estimated that CDCs have revenues exceeding \$3 Billion. Most dialysis is paid for by Medicare and Medi-Cal and private insurance.**

What Prop 23 Will Do

- **Proposes several additional regulations to be overseen by the California Department of Public Health**
 - **Physician, Nurse Practitioner, or Physician Assistant on premises during treatment hours**
 - **CDCs must report infection information to CDPH every 3 months**
 - **CDCs must notify CDPH and get consent if decreasing service or closing**
 - **Prohibits CDCs from refusing care to a patient based on who is paying for the patient's treatment.**

Prop 23 Fiscal Impact

- **Would increase costs (\$~100,000) for each CDCs to have on-site physician**
- **If increased rates are negotiated with payers, could increase State costs ~\$10 M/year**
- **New oversight responsibilities for CDPH would cost low millions/year**

Prop 23: Arguments

Supporters say:

- Makes improvements to dialysis patient care
- Prevents arbitrary closures of clinics in rural areas
- Prevents discrimination against patients

Opponents say:

- Increases costs, forcing closures
- Dialysis clinics are well-regulated by the Feds
- Adversely impacts ER and hospital doctor shortages

Prop 23: Financial Support

Supporters: \$6.4 Million

- **Yes on 23 - Californians for Kidney Dialysis Patient Protection: United Healthcare Workers West (\$5.6 M)**

Opponents: \$93.1 Million

- **No on 23 - Stop the Dangerous & Costly Dialysis Proposition:
DaVita, Inc, (\$59.8 M), Fresenius Medical Care (\$26 M), US Renal Care (\$6.7 M)**

Prop 23: Yes or No

- A **“YES”** vote would require chronic dialysis clinics to: have an on-site physician while patients are being treated; report data on dialysis-related infections; obtain consent from the state health department before closing a clinic; and not discriminate against patients based on the source of payment for care.
- A **“No”** vote opposes requirements for chronic dialysis clinics to: have an on-site physician while patients are being treated; report data on dialysis-related infections; obtain consent from the state health department before closing a clinic; and not discriminate against patients based on the source of payment for care.