Today, people who develop kidney disease are faced with a health care approach and system that typically leads to in-center dialysis treatment. However, this treatment is associated with suboptimal health outcomes and higher medical costs compared to home dialysis treatment options.

It’s time we all work together to change the system and simplify the process so the needs and health outcomes of patients are at the center of all we do. This means moving to a home-first approach, which requires supporting patients through a very challenging move from CKD to end-stage kidney disease (ESKD). A multidisciplinary care team that addresses both the clinical and emotional needs of patients as well as provides care that is equitable for all — regardless of their race, ethnicity or living situation — is critical.

As a nephrologist who has worked in private practice and as a medical director at a large dialysis services company, I have witnessed the challenges that patients and nephrologists face in tackling CKD and ESKD.

I saw the shortcomings of the current system. When I learned that CVS Kidney Care® is putting patients first to focus on kidney health and optimal home treatments, I wanted to be part of the team and part of the solution.

Let’s take a look at where things are now and how you can join us as we work to improve kidney health for patients, their caregivers and nephrologists.
Kidney Dialysis: Making home dialysis the first choice

In-center dialysis is currently the first choice

Often the progression to ESKD is fast and without symptoms. This leaves little time for nephrologists to adequately discuss all options for treatment of ESKD. Sometimes, patients crash into dialysis, making in-center dialysis the quickest and easiest solution. And while a kidney transplant is the best treatment, there is typically a three-to-five-year wait for a donor kidney.

At the end of 2018, there were nearly 69,000 patients performing dialysis in the home, or 12.5% of all patients undergoing dialysis.

But in-center dialysis that provides conventional dialysis, consisting of three relatively short sessions per week, may not necessarily be the best path. In fact, it is based on the minimally adequate dialysis needed for life — instead of what is optimal for living a high-quality life.

Home dialysis is the better choice

We know that patients receiving longer, gentler, more frequent dialysis treatments have a better quality of life. They have shorter dialysis recovery times, and both better blood pressure and phosphorus control. This allows them to take less medications. More importantly this treatment approach has been shown to prevent the long-term heart injury associated with conventional in-center dialysis.

In addition, patients report more satisfaction with home therapy than in-center hemodialysis and improved quality of life with longer hemodialysis treatments. And in a survey of nephrologists, most say they would choose in-home therapy (peritoneal and home hemodialysis) for themselves and their family. With conventional in-center therapy, patients typically go two days every week without dialysis. This is known as the “killer gap” because it raises the risk of hospital admissions and death. Home therapies give patients the flexibility to eliminate that gap.

With home dialysis, patients can more easily opt for longer, more frequent dialysis sessions or overnight dialysis, all in the comfort of their homes. No scheduling appointments. No traveling back and forth to the dialysis center. No waiting for staff to put you on the machine. Patients can do dialysis when they want, which allows flexibility for their work schedule. This approach gives patients more control so they can live their best life possible.

Even though at-home dialysis may be better for patients, there are obstacles to overcome. Many patients may find it hard to understand home dialysis or they may feel uncomfortable doing dialysis at home even with the help of a dialysis partner. And nephrologists may not have the capacity in their practices to take on the added duties of education, training and monitoring of patients on home dialysis.

I am proud to work for a company who is dedicated to make home dialysis a more viable option not just for patients and their caregivers, but for nephrologists and their practice staff as well.
Using data and technology to support more planned starts

The key for patients is choosing an optimal treatment modality as well as coordination and emotional support for both them and their families. By working with patients and their providers, we can help patients feel empowered and prepared to make the best decisions for their own health, lifestyle and well-being.

Typically, patients are interacted with based on their stage of CKD. At CVS Kidney Care, we go well beyond a patient’s CKD stage by using more variables, richer data sets and machine-learning models to identify those whose condition is progressing fastest. This allows us to prioritize patient outreach with the goal of stabilizing kidney function. We actively work to engage those who are predicted to need dialysis treatment within three years or less and we help prepare them for transition to their dialysis treatment of choice. This gives the kidney care team enough time to educate patients on all available dialysis options, including peritoneal dialysis, home hemodialysis, preemptive transplant and conservative care.

With earlier identification of higher risk patients, the health advantages of longer, more frequent treatments plus the convenience and flexibility of at-home dialysis can be weighed versus in-center treatments. This also allows more time for the necessary training of the patient and their dialysis partner to make them more comfortable with the at-home procedure and have a planned start date for dialysis. And we’re already making progress on this goal. Our early engagement and education programs have driven a 24% increase in planned starts with our members.¹⁰

Some patients may decide that at-home dialysis is not for them — but they will at least have the chance to consider it.

Making it easier for nephrologists

Nephrologists and their teams work exhaustive hours. The added burden of educating patients on the pros and cons of the different treatment options and helping them make the right decision for their needs can be overwhelming. Add to that the concern about patient safety. What if something goes wrong with at-home dialysis? How can I be confident that my patients will be safe?

Through our programs, patients will have the information and support they need to make the decision that best fits their lifestyle. And working with partners, such as Satellite Healthcare, CVS Kidney Care provides the necessary training to alleviate concerns about patient safety.
Patient-centric innovation

Working with our parent company, CVS Health®, we are testing other programs at select locations to help support nephrologists as they care for their patients. This includes offering lab draws at CVS® HealthHUB™ locations for convenient patient access within their community, scalable solutions to meet the needs of diverse populations and address health disparities in kidney disease, a CKD-specific prescription management program and multiple new machine-learning models to better identify dialysis patients who may be at higher risk of hospitalization.

Very importantly, we are building programs to alleviate the administrative burdens that nephrology practices face as they move to a home-first approach to kidney care. Patients require extra education, training and monitoring to ensure success at home, and we are committed to working with nephrologists to relieve them of those burdens and make home-first care the preferred option.

Innovative new technology

To further the push to home dialysis, CVS Kidney Care has a new technology in clinical trials — the HemoCare Hemodialysis System. This innovative device includes patient safety features and is designed to make home hemodialysis simpler with an easy-to-set-up, easy-to-use device. It offers advanced monitoring capabilities that allow a patient’s nephrologist and care team to track key health data and communicate more effectively with patients as they undergo at-home dialysis.
Join the home revolution

Through our joint venture partnership with Satellite Healthcare, CVS Kidney Care is already making a difference. **Our centers have a 40% greater penetration of home dialysis versus the national average**¹⁰ and our hospital readmission rate is **10% lower than local comparisons**.⁹

Our goal is to make at-home dialysis the easier path and the number one choice for kidney care patients and nephrologists. It creates better health outcomes and quality of life, and it can also lower medical costs over the long term by minimizing the need for hospitalizations.

We believe all patients, regardless of their individual circumstance, deserve the opportunity for care at home, where they are at their best. We invite you to join us to change the course of kidney care in America, so each and every one of your patients can enjoy their best possible health outcome.

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⁹ Includes centers within a 25-mile radius of Austin that were scored in current star ratings released by the Centers for Medicare & Medicaid Services (CMS) on October 30, 2019 (based on 2018 performance data).

¹⁰ CVS Kidney Care analytics, 2021. P1006070720.


¹³ HemoCare Hemodialysis System: Currently under development. Anticipated upon clearance from the U.S. Food and Drug Administration. CAUTION – Investigational device. Limited by Federal (or United States) law to investigational use.