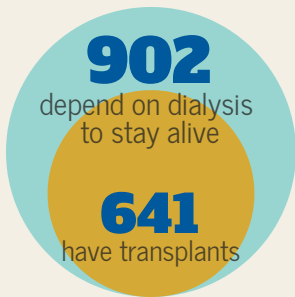


Kidney failure (ESRD) in Montana

2021

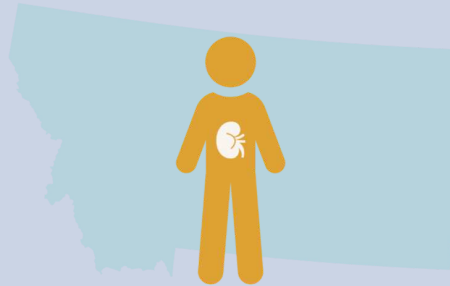
1,543
Montana residents

are living with end-stage renal disease (ESRD, or kidney failure). Without treatment—dialysis or a transplant—ESRD is fatal.



SOURCE: U.S. Renal Data System 2020 Annual Data Report

Montana has no transplant centers

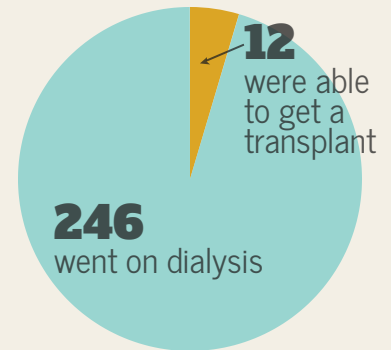


Montana residents who need a kidney transplant must travel to other states for the procedure.

SOURCE: Organ Procurement and Transplantation Network

258
New cases of kidney failure

were diagnosed in Montana in 2018 (the most recent data available).



SOURCE: U.S. Renal Data System 2020 Annual Data Report

Montanans are at risk for kidney disease

Leading causes of kidney failure



Diabetes

High blood pressure

MT AT RISK:

7.6% diagnosed with diabetes

29.5% have high blood pressure

28.3% self-report obese

SOURCE: Centers for Disease Control and Prevention Behavioral Risk Factor Surveillance System

Why dialysis patients depend on charitable assistance

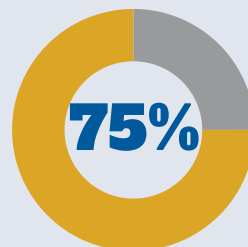
143 Montana residents

on dialysis and with transplants received grants from AKF in 2017 to pay for insurance premiums and other health care-related costs not covered by insurance.

\$593,000

in charitable assistance from AKF ensured that low-income Montana dialysis and transplant patients could afford their lifesaving health care.

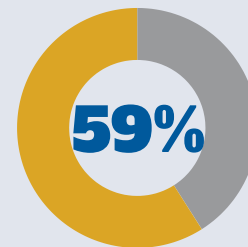
Most dialysis patients too sick to work



ESRD IS A DISABILITY

Dialysis is life support. Treating kidney failure and its comorbidities is more consuming than a full-time job: more than 75% of patients cannot work

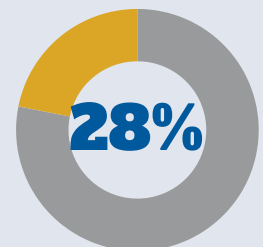
Most patients AKF helps are minorities



MINORITIES ARE MORE AFFECTED BY ESRD

Of the patients AKF helps, 36% African-American 20% Hispanic/Latino 3% Asian

Ratio of out-of-pocket to income is stunning



FINANCIAL HARDSHIP COMES WITH ESRD

Average income of patients AKF helps is < \$25,000, yet average out-of-pocket costs for dialysis patients is > \$7,000/yr

9th leading cause of death in the U.S.

The facts about kidney disease

Kidneys are vital organs—just like the heart, lungs and liver. They clean the blood, help control blood pressure, help make red blood cells, and keep bones healthy.

- Chronic kidney disease is an increasingly common but usually preventable condition. **More than 37 million Americans have kidney disease** and millions more are at risk.
- According to the CDC, 9 out of 10 people with early kidney disease don't know they have it because it **usually has no symptoms until the late stages**. Simple blood and urine tests can tell how well the kidneys are working.
- Diabetes and high blood pressure are the **two leading causes of kidney disease**. Kidney disease can lead to heart attack, stroke, kidney failure and death.
- Kidney disease can be treated. If it's caught and treated early, it's often **possible to slow or stop the progress of kidney disease**.
- Besides diabetes and high blood pressure, other **common risks** for kidney disease include:
 - Having a **family history of kidney disease**
 - Being **Black, Hispanic, Asian American or Native American**
 - Being **over 60**
- Black Americans are **3.4 times more likely than whites** to develop kidney failure, and Hispanics are **1.5 times more likely than non-Hispanics** to develop kidney failure.

Kidney disease is a silent killer



- There are more than **785,000 people with kidney failure** in the United States—an **increase of more than 100% since 2000**.
 - About 555,000 are on dialysis and nearly 230,000 are living with kidney transplants.
 - Each month, **almost 11,000 new cases of kidney failure** are diagnosed.
- In 2018, Medicare spending for ESRD beneficiaries was **\$36.6 billion—7.2% of Medicare costs**—though **ESRD patients make up less than 1%** of the total Medicare population.
- A patient on hemodialysis costs Medicare **more than \$93,000 per year**.
- For each kidney disease patient who does not reach kidney failure, **Medicare saves an estimated \$250,000**.
- **One third** of people who were diagnosed with kidney failure in 2018 received **little or no pre-ESRD care**.

Costly to patients, employers and taxpayers

