



# Dialysis & Nephrology DIGEST

A monthly report by Benesch on the  
Dialysis & Nephrology Industry

## In This Issue

---

### PAGE 2

#### **Calendar of Events**

---

### PAGE 5

#### **Nephrology and Dialysis**

Blumenthal urges FTC to intensify antitrust scrutiny of dominant dialysis providers

Surgeon says gene-edited pig kidneys could one day surpass human transplants

---

### PAGE 6

Peritoneal dialysis equipment market gains momentum as home-based kidney care expands

National Kidney Registry's success draws scrutiny over profits, power, oversight in organ donation

---

### PAGE 7

Study links dietary methionine restriction to reduced kidney fibrosis through epigenetic regulation

Study finds chronic kidney disease remains a major risk factor for severe COVID-19

---

### PAGE 8

Advocacy remains central to advancing kidney care policy, reimbursement, patient access

Updated CKD guidelines emphasize early detection, adoption of advanced therapies

---

### PAGE 9

Denosumab linked to higher cardiovascular, hypocalcemia risk than bisphosphonates in dialysis patients with osteoporosis

Racial, ethnic disparities in kidney replacement therapy most pronounced among younger adults

---

### PAGE 10

Home dialysis linked to lower COVID-19 infection than in-center treatment

Smart dialysis system market projected to more than double by 2033 as home and AI-enabled platforms drive growth

Global dialysis equipment market projected to grow by \$18.78B in 10 years

---

### PAGE 11

Medicare Advantage expansion may favor large dialysis chains over independent facilities

Updated U.S. dietary guidelines raise protein targets, prompting caution from renal nutrition experts

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### PAGE 12

#### **VAC, ASC and Office-Based Labs**

ASC leaders report surge in denials, audits as payers grow more automated

## Calendar of Events

FEBRUARY 20-22, 2026

### ASDIN 22nd Annual Scientific Meetin

Lake Buena Vista, FL

For more information, please click [here](#).

MARCH 1-4, 2026

### American Venous Forum 2026

Denver, CO

For more information, please click [here](#).

MARCH 19-21, 2026

### 2026 OEIS Scientific Meeting

Las Vegas, NV

For more information, please click [here](#).

APRIL 11-15, 2026

### SIR 2026 Annual Scientific Meeting

Toronto, Canada

For more information, please click [here](#).

APRIL 16-19, 2026

### RPA 2026 Annual Meeting

Atlanta, GA

For more information, please click [here](#).

MAY 20-22, 2026

### VAVA 2025 Dialysis Access Symposium

Salt Lake City, UT

For more information, please click [here](#).

OCTOBER 21-25, 2026

### ASN: Kidney Week 2026

Denver, CO

For more information, please click [here](#).

# Dialysis & Nephrology DIGEST



Please contact us if you would like to post information regarding our upcoming events or if you'd like to guest author an article for this newsletter.

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**Join the Momentum at the 2026 RPA Annual Meeting and Be Part of What's Next**  
April 16-19, 2026 • Atlanta, GA • Hyatt Regency Atlanta

Step into the premier gathering for renal leaders nationwide. The Renal Physicians Association Annual Meeting is your chance to connect with peers, gain forward-thinking insights, and strengthen the skills that elevate both patient care and practice performance. If you're committed to shaping the future of kidney care, this is the event you can't afford to miss.

**Nate Robinson**  
Former NBA star and kidney transplant recipient *Keynote* for the *Louis Diamond Lecture* Nate brings a powerful, personal story of resilience and advocacy—an unforgettable reminder of the impact of your work.

**Joel Bervell, MD**  
Physician and nationally recognized "Medical Mythbuster" *Keynote* for the *Dale Singer Leadership and Education Foundation Lecture* Dr. Bervell exposes hidden disparities in medicine and champions equitable care, offering essential insights for today's renal community.

**REGISTER TODAY** and help shape the future of kidney care.

**Preconference Workshops**

**Starting a Clinical Research Program**  
RPA/ISGD Clinical Trials Bootcamp for Investigator Training  
An RPA 2026 Annual Meeting Preconference Workshop  
APRIL 16 • 11:00AM - 4:45PM

**2026 RPA Nephrology Coding and Billing Workshop**  
APRIL 16 • 8AM - 4PM

— **Note:** Attendees may register for **only one** workshop.—  
Don't miss your opportunity to learn and grow alongside your peers. **Register today** for the annual meeting and/or preconference workshops at [www.renalmd.org](http://www.renalmd.org).

P: 301-468-3515 • F: 301-468-3511 • Email: [rpa@renalmd.org](mailto:rpa@renalmd.org) • [www.renalmd.org](http://www.renalmd.org)

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# Benesch Healthcare+ Sixth Annual Nephrology and Dialysis Conference

**Thursday, June 25, 2026**

**8:00 A.M.-5:00 P.M.**

Cocktail reception to follow

**The Sheraton Grand Riverwalk Chicago**

301 East North Water Street | Chicago

Please join us for this full-day conference addressing business and legal issues facing nephrology and dialysis providers. Hear from industry leaders discussing current and future trends in care delivery, business and payment models, and legal and regulatory issues.

Click [HERE](#) to register.

A block of guest rooms has been reserved for attendees at the Sheraton Grand for the nights of June 24 and June 25 at a rate of \$309/night + tax. To reserve a room at the negotiated price, please click [HERE](#) by June 3.

Please contact MEGAN THOMAS, Director of Client Services ([mthomas@beneschlaw.com](mailto:mthomas@beneschlaw.com)) for more information about this event as well as exhibitor and sponsorship opportunities.

If your organization is interested in Exhibitor Hall opportunities, please click [HERE](#).

*\*No CME or CLE available.*

## AGENDA

8:00–8:45

**Registration and Breakfast in Exhibitor Hall**

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8:45–9:00

**Opening Remarks**

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9:00–9:30

**Legislative Update from Capitol Hill**

ROBERT BLASER, Director of Public Policy, *Renal Physicians Association*

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9:30–10:15

**Payor Recoupments Considerations: Playing both Offense and Defense**

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10:15–10:30 **Break**

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10:30–11:15

**Succession Planning and Practice Governance**

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11:15–12:00

**Artificial Intelligence in Kidney Care**

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12:00–1:30

**Lunch Keynote: New CMS Alternative Payment Models**

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*(continued on next page)*

1:30–2:15

**Accountable Care Organizations, Clinical Integration Networks and Independent Physician Associations: The Best Choice for My Practice**

2:15–3:00

**Advanced Valuation Topics in Dialysis and Nephrology**

3:00–3:15 **Break**

3:15–4:15

**The Next Step: Developing Multi-Specialty Endovascular ASCs**

4:15–5:00

**Lightning Round: Innovative Kidney Care Companies to Know and Targeted Legal Issues**

5:00–6:30 **Cocktail Reception**

Please contact MEGAN THOMAS, Director of Client Services ([mthomas@beneschlaw.com](mailto:mthomas@beneschlaw.com)) for more information about this event as well as exhibitor and sponsorship opportunities.

## Exhibitor and Sponsorship Opportunities

**Conference Registration** ..... \$250  
Please register and pay [HERE](#).

**Break Sponsorships**..... \$2000 (two slots)

- Logo
- Spotlight
- 4 free registrations
- List of attendees week before

To purchase a break sponsorship, please register and pay [HERE](#).

**Exhibitor Space**..... \$1000

- Logo
- Overview of company within handout
- 2 free conference registrations
- List of attendees week before

To purchase an exhibitor table, please register and pay [HERE](#).

**Breakfast Sponsor** ..... \$3500

- Logo
- Spotlight with free plug
- 8 conference registrations
- List of attendees week before

To purchase a breakfast sponsorship, please register and pay [HERE](#).

**Lunch Sponsor** ..... \$4000

- Logo
- Spotlight with free plug
- 8 conference registrations
- List of attendees week before

To purchase a lunch sponsorship, please register and pay [HERE](#).

**Cocktail Reception Sponsor**..... \$6000

- Logo
- Spotlight with free plug
- Decorate space with signage
- 8 conference registrations
- List of attendees week before

To purchase a cocktail reception sponsorship, please register and pay [HERE](#).

**For more information or to sign up for an exhibitor space or sponsorship, please contact:**

MEGAN THOMAS  
Director of Client Services  
[mthomas@beneschlaw.com](mailto:mthomas@beneschlaw.com)

## Nephrology and Dialysis

DECEMBER 8, 2025

### **Blumenthal urges FTC to intensify antitrust scrutiny of dominant dialysis providers**

U.S. Sen. Richard Blumenthal is pressing the FTC to step up enforcement against concentration in the dialysis market, where DaVita and Fresenius control more than 75% of services relied on by over half a million Americans. In a letter to the FTC, Blumenthal cited patient and worker complaints, including understaffed clinics, safety lapses, rushed treatments and anti-union practices, as well as non-compete clauses that restrict physician mobility and acquisitions that stifle competition. He warned these issues reflect potential abuse of market power and ongoing harm to patients, including veterans. Blumenthal requested a briefing on the FTC's current investigations and urged robust enforcement to protect patients and restore competition.

**Source: Senator Richard Blumenthal**

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DECEMBER 26, 2025

### **Surgeon says gene-edited pig kidneys could one day surpass human transplants**

A leading transplant surgeon says gene-edited pig kidneys may eventually outperform human donor organs as xenotransplantation advances into clinical trials. Dr. Robert Montgomery, director of NYU Langone's Transplant Institute, confirmed that the first living patient already received a genetically modified pig kidney, with additional transplants planned pending U.S. FDA approval. The trial aims to address the chronic shortage of human organs by using pig kidneys edited at 10 genetic sites to reduce immune rejection. Montgomery, himself a heart transplant recipient, argues that pig organs could ultimately be superior because they can be continually refined through genetic modification, unlike human organs. Early studies suggest xenotransplantation could also reduce reliance on anti-rejection drugs.

**Source: The Guardian**

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## Dialysis & Nephrology DIGEST

## Nephrology and Dialysis (cont'd)

DECEMBER 26, 2025

### **Peritoneal dialysis equipment market gains momentum as home-based kidney care expands**

The global peritoneal dialysis (PD) equipment market is seeing strong growth as health systems increasingly shift toward home-based, patient-centered renal care. Rising rates of chronic kidney disease and end-stage renal disease, combined with capacity constraints in in-center hemodialysis, are driving interest in PD as a flexible and cost-effective alternative. Advances such as automated PD cyclers, remote monitoring tools, and biocompatible dialysate solutions are improving safety, convenience and clinical outcomes for patients treated at home. While concerns around infection risk, device costs and supply-chain complexity remain barriers in some markets, supportive reimbursement policies and technological innovation continue to fuel adoption. Growth is particularly strong in Asia-Pacific, while North America and Europe are expanding telehealth-enabled home dialysis programs. Overall, the outlook for PD equipment remains positive as stakeholders embrace value-based and decentralized care models.

**Source: Industry Today**

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DECEMBER 27, 2025

### **National Kidney Registry's success draws scrutiny over profits, power, oversight in organ donation**

Founded to speed lifesaving kidney transplants through paired donation, the National Kidney Registry facilitated nearly 12,000 swaps and became the largest living-donor exchange in the U.S. But a New York Times investigation found the organization also evolved into a multimillion-dollar enterprise with limited oversight and significant influence over organ allocation. Though it began as a nonprofit, the registry charged hospitals rising fees and paid at least \$39 million to a technology company owned by its founder before spinning off its commercial operations into a for-profit entity he controls. Many physicians praise faster matching, yet critics raise ethical concerns about private control of scarce organs, opaque finances, contractual penalties for hospitals and risks to hard-to-match patients whose loved ones donate without guaranteed reciprocity.

**Source: New York Times (sub. req.)**

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# Dialysis & Nephrology DIGEST

## Nephrology and Dialysis (cont'd)

DECEMBER 31, 2025

### **Study links dietary methionine restriction to reduced kidney fibrosis through epigenetic regulation**

A study published in Nature Communications identifies dietary methionine restriction as a promising strategy to reduce kidney fibrosis, a major driver of chronic kidney disease worldwide. Led by Liu and colleagues, the research shows that limiting methionine intake alters epigenetic regulation by reducing levels of S-adenosylmethionine, a key methyl donor, thereby suppressing the pro-fibrotic TGF- $\beta$ -Smad3-Hoxc8/P-TEFb signaling pathway. Using mouse models of kidney injury combined with epigenomic and transcriptomic analyses, the researchers found that methionine restriction decreased fibrotic gene expression, reduced collagen deposition and improved markers of kidney function. While further study is needed to assess clinical applicability, the work opens new avenues for non-pharmacologic and precision-based therapies for kidney fibrosis and related fibrotic diseases.

**Source: Bioengineer**

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JANUARY 1, 2026

### **Study finds chronic kidney disease remains a major risk factor for severe COVID-19**

A cross-sectional study across 13 states and 98 counties found that chronic kidney disease (CKD) continues to be a significant risk factor for severe COVID-19 outcomes and hospitalizations, even in the later stages of the pandemic when vaccination and hybrid immunity are widespread. Hospitalized COVID-19 patients had a higher prevalence of CKD—as well as other chronic conditions like diabetes and coronary artery disease—compared to the general population.

**Source: Medical Dialogues**

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## Nephrology and Dialysis (cont'd)

JANUARY 5, 2026

### **Advocacy remains central to advancing kidney care policy, reimbursement, patient access**

As healthcare delivery evolves, policy advocacy has become increasingly vital for kidney patient care and the physicians who provide it. The Renal Physicians Association (RPA), founded in 1974, played a pivotal role in shaping reimbursement structures that allow nephrologists to prioritize patient welfare, including decoupling professional fees from dialysis facility payments. Through sustained engagement with the American Medical Association House of Delegates, RPA advanced equitable reimbursement, influenced CPT coding and valuation, and promoted policies improving access to dialysis, transplantation and supportive services. Looking ahead to 2026, RPA's legislative agenda emphasizes Medicare physician payment reform, support for alternative payment models, promotion of living organ donation and protection of patient access through telehealth and reduced prior authorization barriers.

**Source: Healio (sub. req.)**

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JANUARY 13, 2026

### **Updated CKD guidelines emphasize early detection, adoption of advanced therapies**

Newly updated clinical guidelines for chronic kidney disease (CKD) management place increased emphasis on early detection and the integration of advanced treatment options to improve patient outcomes. The revisions underscore the importance of identifying CKD at earlier stages, when interventions are most effective at slowing disease progression and preventing complications. In addition to diagnostic priorities, the guidelines incorporate emerging evidence supporting the use of novel medications and innovative therapeutic approaches that offer more targeted and effective disease control. By aligning recommendations with the latest research and clinical advances, the updated guidance aims to promote more proactive, individualized care and reduce the long-term burden of CKD on patients and healthcare systems.

**Source: Geneonline**

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## Nephrology and Dialysis (cont'd)

JANUARY 14, 2026

### **Denosumab linked to higher cardiovascular, hypocalcemia risk than bisphosphonates in dialysis patients with osteoporosis**

A retrospective cohort study published in the Journal of Clinical Rheumatology found that denosumab use in dialysis-dependent patients with osteoporosis was associated with significantly higher risks of major adverse cardiovascular events (MACE) and hypocalcemia compared with oral bisphosphonates, while fracture outcomes were similar. Using TriNetX data, investigators analyzed 2,112 matched patients aged 50 years and older with end-stage renal disease on dialysis. Denosumab was linked to increased risks of MACE, acute myocardial infarction and heart failure, with no significant differences in stroke, arrhythmias, all-cause mortality or overall fracture rates. Hypocalcemia occurred nearly twice as often among denosumab users. Sensitivity and subgroup analyses supported the robustness of the findings.

**Source: Rhumatology Advisor**

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JANUARY 15, 2026

### **Racial, ethnic disparities in kidney replacement therapy most pronounced among younger adults**

Research using U.S. Renal Data System registry data highlights persistent racial and ethnic disparities in kidney replacement therapy (KRT), with the largest differences observed among adults aged 18 to 44 years. Through sequence analysis of 50,776 patients, investigators examined 10-year trajectories across dialysis modalities, transplantation and mortality. Younger Black non-Hispanic patients experienced the highest cumulative mortality and were least likely to receive living donor kidney transplants, while White non-Hispanic patients consistently had the highest prevalence of living donor transplants. Asian and White patients were more likely to use home dialysis, whereas in-center dialysis predominated among Black and Hispanic patients. Disparities narrowed with age as in-center dialysis and mortality became dominant.

**Source: HCP Live**

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## Nephrology and Dialysis (cont'd)

JANUARY 16, 2026

### **Home dialysis linked to lower COVID-19 infection than in-center treatment**

A CDC-led study published in *Infection Control & Hospital Epidemiology* found that U.S. dialysis patients receiving treatment at home experienced lower SARS-CoV-2 infection rates than those undergoing in-center hemodialysis, particularly during COVID-19 surges. Analyzing data from 7,974 outpatient dialysis facilities between January 2021 and May 2023, researchers observed 171,338 infections, with the majority occurring among in-center patients. Across all variant-dominated periods, in-center hemodialysis was associated with consistently higher infection rates, a gap that widened during surge weeks. Close, prolonged contact with other patients and staff, as well as reliance on shared transportation, likely contributed to increased exposure risk.

**Source: CIDRAP**

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JANUARY 20, 2026

### **Smart dialysis system market projected to more than double by 2033 as home and AI-enabled platforms drive growth**

The global Smart Dialysis System Market, valued at \$5.1 billion in 2024, is forecast to reach \$11.2 billion by 2033, reflecting a 9.2% CAGR from 2026 to 2033. Growth is fueled by rising end-stage renal disease, policy support for home and remote dialysis, provider demand for workflow automation, patient-centric care models, and significant medtech and private-equity investment. Technological advances, including closed-loop ultrafiltration, AI-driven monitoring, cloud integration and improved HMLs, are shifting value toward integrated hardware-software-service platforms. While in-center hemodialysis remains the largest segment, home hemodialysis and automated peritoneal systems are the fastest growing.

**Source: Industry Today**

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JANUARY 22, 2026

### **Global dialysis equipment market projected to grow by \$18.78B in 10 years**

InsightAce Analytic released a report forecasting that the global dialysis equipment market will grow from \$19.28 billion in 2025 to \$38.01 billion by 2035, with a 7.3% CAGR from 2026 to 2035. The report covers trends in standard, portable and wearable dialysis devices, as well as both hemodialysis and peritoneal dialysis. It highlights the increasing importance of home care settings and technological innovation, such as artificial kidney technologies, in supporting patients with chronic kidney disease. The analysis also addresses competition and revenue projections for key end-users, including dialysis centers, home care, hospitals and research laboratories.

**Source: Insightace Analytic**

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## Nephrology and Dialysis (cont'd)

JANUARY 23, 2026

### **Medicare Advantage expansion may favor large dialysis chains over independent facilities**

Recent analysis published in Health Affairs suggests that provisions of the 21st Century Cures Act may disproportionately benefit large dialysis chains compared with independent facilities. Using claims data from 2017 to 2022, researchers found that Medicare Advantage enrollment among patients receiving dialysis increased significantly in chain facilities after the Act took effect. The largest providers, DaVita and Fresenius, saw particularly notable gains. Increases were most pronounced among underrepresented, dual-eligible, rural patients and in Southern and Western states, while states with Medigap protections showed lower enrollment. Although the policy expanded access to Medicare Advantage benefits for patients with end-stage kidney disease, investigators warn that independent facilities may face growing financial pressure and reduced network access.

**Source: Healio (sub. req.)**

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JANUARY 27, 2026

### **Updated U.S. dietary guidelines raise protein targets, prompting caution from renal nutrition experts**

The 2025-2030 U.S. Dietary Guidelines introduce a significant increase in the recommended daily protein intake, now set at 1.2 to 1.6 g per kg of body weight, compared to the previous 0.8 g/kg. This change is notable for patients with kidney disease, as higher protein intake can have important implications for kidney health and dialysis management. The guidelines also endorse red meat as a protein source and suggest butter and beef tallow as cooking oils. Kate Zalewski, a renal dietitian, highlights that these recommendations may not align with the individualized needs of kidney patients, emphasizing the need for careful interpretation in nephrology and dialysis care.

**Source: docwirenews**

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## VAC, ASC and Office-Based Labs

JANUARY 30, 2026

### ASC leaders report surge in denials, audits as payers grow more automated

Ambulatory surgery center leaders report a sharp increase in claim denials, audits and delayed payments over the past year, driven by increasingly aggressive and automated payer behavior. Executives cite higher rates of down-coding, post-payment reviews and disputes around medical necessity and site of service, particularly among Medicare Advantage plans. In response, organizations are tightening clinical documentation, strengthening coding and appeal workflows, and elevating revenue cycle oversight to senior leadership. Several leaders also point to growing reliance on AI to improve first-pass clean claims, monitor payer-specific trends and automate appeals.

Source: Becker's ASC Review

## Dialysis & Nephrology DIGEST

For more information regarding our nephrology, dialysis and office-based lab experience, or if you would like to contribute to the newsletter, please contact:

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