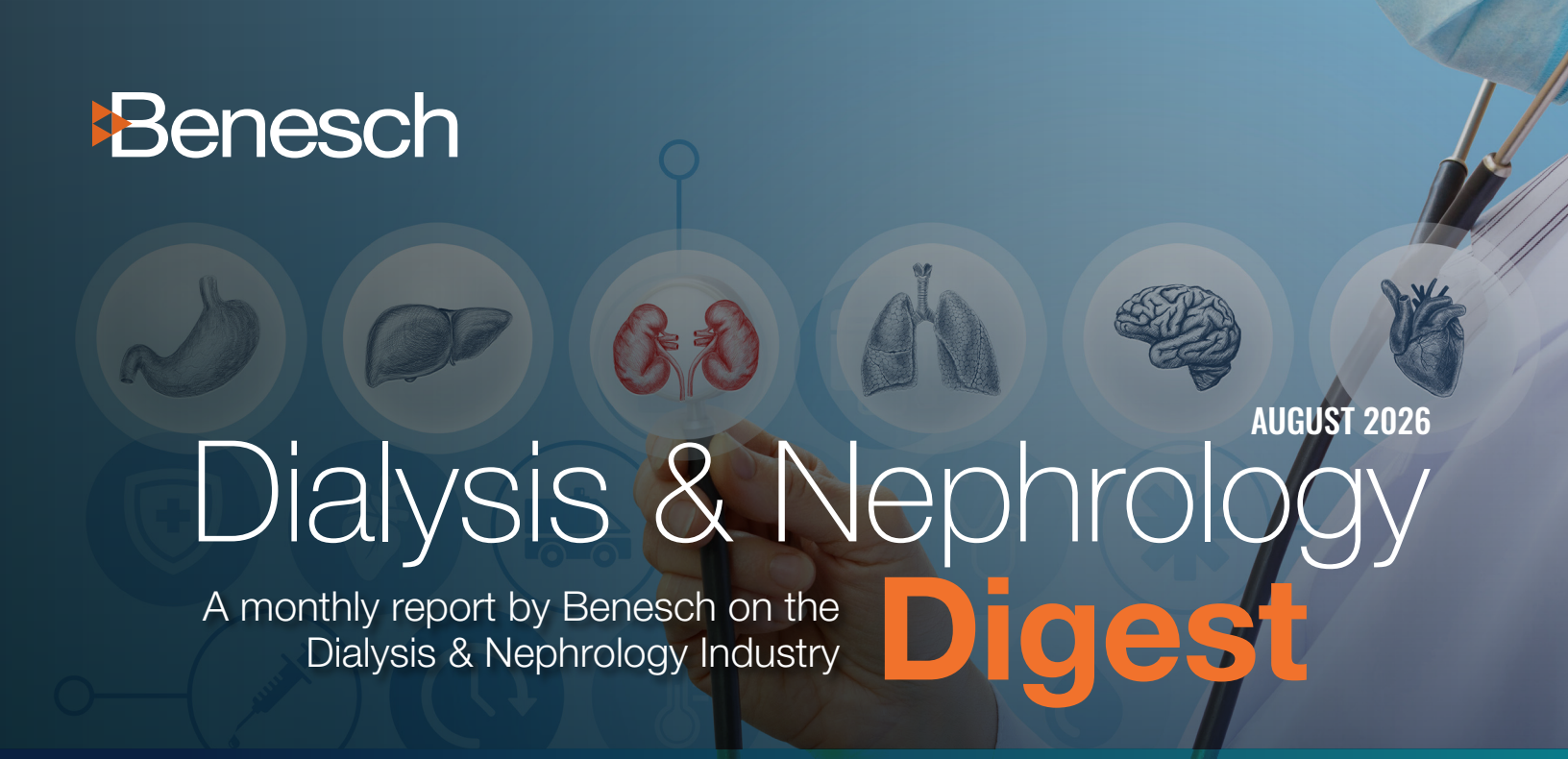
Benesch



AUGUST 2026

Dialysis & Nephrology Digest

A monthly report by Benesch on the Dialysis & Nephrology Industry

In This Issue

Calendar of Events

SEPTEMBER 10–13, 2026
AAKP National Patient Meeting
Little Rock, AR
For more information, please click here.

SEPTEMBER 23–26, 2026
RHA 2026 Annual Conference
Savannah, GA
For more information, please click here.

SEPTEMBER 25–26, 2026
RPA 2026 Advocacy and Innovation Weekend
Washington, D.C.
For more information, please click here.

OCTOBER 21–25, 2026
ASN: Kidney Week 2026
Denver, CO
For more information, please click here.

OCTOBER 25–26, 2026
ACIR 2026 MEETING
Louisville, KY
For more information, please click here.

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.
sdowning@beneschlaw.com jgreis@beneschlaw.com jcilek@beneschlaw.com

Nephrology and Dialysis

ASC

JULY 13, 2026

Why ASCs are done paying anesthesia stipends

Facing ongoing anesthesia workforce shortages and rising compensation costs, more ASCs are exploring direct employment models for anesthesiologists and CRNAs rather than paying stipends to outside anesthesia groups. Industry leaders say the approach can provide greater control over staffing and operations, though it shifts costs rather than eliminating them. Some experts predict ASC-anesthesia relationships will continue evolving, with equity-based partnership models becoming more common in the future.

Source: Becker's ASC

JULY 24, 2026

A massive month for ASC policy: 5 key updates

Several major federal healthcare policy developments could significantly affect ambulatory surgery centers. Congressional committees advanced competing price transparency bills that would expand disclosure requirements to hospital-affiliated and potentially freestanding ASCs. Other developments include the introduction of the Patients First Act to tie Medicare physician payments to inflation, CMS' proposed 2027 Physician Fee Schedule and ASC payment updates, and a proposed rule that could expand CMS' authority to deny or revoke Medicare enrollment based on certain fraud-prevention criteria.

Source: Becker's ASC

Outpatient migration drives health systems toward ASC joint ventures

A combination of policy changes, reimbursement pressures, rising physician subsidies and patient demand for lower-cost care is accelerating the shift of surgical procedures from hospitals to outpatient settings. As health systems look to maintain physician alignment and financial stability, experts say joint ventures with physicians in ambulatory surgery centers are gaining traction as a strategic response. These partnerships can help health systems preserve referral relationships and market relevance while participating in the continued growth of outpatient care.

Source: BOK Financial Healthcare Banking (download)

Government Programs

JULY 29, 2026

CMS to end Medicare Part D premium subsidy program after 2026

After reviewing 2027 bids and concluding that insurers can now price plans without the support of Medicare Part D, the Centers for Medicare & Medicaid Services said it will end the subsidy program at the end of 2026. CMS said premiums will rise by less than $10 for most Medicare recipients, while some may see lower premiums.

Source: Reuters

JULY 2, 2026

AMA calls on congress to pass physician payment reforms

The American Medical Association advocated for several reforms during a House Energy and Commerce Subcommittee on Health meeting, including:

- H.R. 6160, which would establish a permanent inflationary update tied to the Medicare Economic Index;
- H.R. 8163, which would protect the inflationary update from a budget neutrality mechanism meant to balance Medicare physician spending;
- H.R. 8622, which would adjust payments according to performance measures; and
- Permanently stabilizing the Alternative Payment Model incentive payment and pairing it with the Implementing Physician-Led Ambulatory Care Transformation program.

Source: Healio

Government Programs (cont'd)

JULY 2, 2026

ACR announces support of proposed rule to streamline prior authorization payments

The proposed CMS rule would shorten payer decision timeframes to 24 hours for expedited requests and 72 hours for most other requests and increase transparency to reduce the burden of prior authorizations. The rule would apply to payers across CMS programs, including Qualified Health Plan issuers. The American College of Rheumatology (ACR) sent a letter to CMS Administrator Mehmet Oz supporting the rule and including several ways the rule could go further, including more specific language on what constitutes a "specific reason" for a coverage denial.

Source: Healio

AUGUST 21, 2026

States Look to Set Guardrails in AI-Driven "Coding Arms Race"

Several states, including Indiana and Illinois, have enacted laws limiting insurers' use of artificial intelligence to downcode claims. The measures generally require human review of medical records before reimbursement decisions can be reduced, responding to physician concerns about increased administrative burdens, lower payments and reduced access to care for medically complex patients. Policymakers and industry groups are also calling for greater transparency around AI-driven coding and downcoding practices.

Source: MedCentral

JULY 28, 2026

7 AI health insurance state laws passed in 2026

Seven states enacted laws in 2026 to regulate how health insurers use artificial intelligence in coverage determinations, prior authorization reviews and reimbursement decisions. While the laws vary, most prohibit insurers from relying solely on AI to deny, delay, modify or downcode care and require review by a qualified healthcare professional. Many also include disclosure and auditing requirements intended to safeguard patient-specific clinical decision-making.

Source: Becker's Payer Issues

Marketplaces

JUNE 30, 2026

FDA again rejects Unicycive's dialysis drug filing over manufacturing deficiencies

The FDA issued Unicycive Therapeutics a complete response letter for oxylanthanum carbonate (OLC), citing the same third-party manufacturing deficiencies identified in its June 2025 rejection. Unicycive said the agency did not raise questions about the clinical or safety data for OLC, which the company is seeking to approve for hyperphosphatemia in chronic kidney disease patients on dialysis. The company said it had resubmitted the application after discussions with the FDA and based on perceived progress at the third-party manufacturer, but it understands the manufacturer wasn't reinspected as part of the resubmission.

Source: Fierce Pharma

Marketplaces (cont'd)

JULY 3, 2026

AstraZeneca, CSPC sign $1.78B siRNA kidney therapy deal

AstraZeneca partnered with CSPC on siRNA kidney therapies, a nephrology-focused deal that includes $30M upfront to CSPC to jointly discover and develop two kidney disease drug candidates. Using CSPC's siRNA drug discovery platform, the deal gives AstraZeneca the option to gain exclusive global rights outside of China, while CSPC will retain the rights to one of the assets in China.

Source: Fierce Biotech

Population Health Management

JULY 13, 2026

Good Samaritan expands kidney care access through tele-nephrology

Good Samaritan is expanding access to specialized kidney care through telehealth, enabling patients to receive comprehensive care from a board-certified nephrologist remotely while continuing to get in-person support from a local healthcare team. The telehealth services will be available for patients with chronic kidney disease, acute kidney conditions, hypertension related to kidney function, electrolyte disorders and other renal conditions, connecting them with board-certified nephrologists.

Source: Good Samaritan

JULY 21, 2026

Study finds stable long-term kidney function in donors aged 60 and older

A study of 131 living kidney donors aged 60 years or older found kidney function typically declined immediately after donation and then remained stable over a median 12-year follow up, regardless of the eGFR equation used. While 37% of donors had an eGFR decline greater than 40%, age alone, including age 70 years or older, wasn't linked to faster long-term decline; instead, biological and cardiometabolic factors appeared more important in assessing long-term renal outcomes.

Source: American Medical Journal

JULY 24, 2026

Hemodialysis patients remain underrepresented in cardiovascular trials

Recent research argues that patients receiving hemodialysis face extremely high rates of heart attack, stroke, heart failure and sudden cardiac death, yet they are routinely excluded from major cardiovascular trials or included only in small, underpowered subgroups. As a result, clinicians often must rely on data from patients without end-stage kidney disease or on observational studies when making treatment decisions, creating a significant evidence gap that affects guidelines, reimbursement and bedside care for the dialysis population.

Source: Baylor College of Medicine

Practice Organization & Operations

JULY 1, 2026

Cigna backs new AI-powered specialty pharmacy program with $100 million investment

Cigna's health services unit, Evernorth, is launching Pharmacy Forward through its specialty pharmacy, Accredo. Pharmacy Forward is an AI-powered specialty pharmacy program that reduces prescription processing times and improves customer service by integrating clinical data and insights and generating summaries. The program is supported by a $100 million investment through 2028 and is expected to generate about $400 million in value in the same timeframe.

Source: Reuters (sub. req.)

Practice Organization & Operations (cont'd)

JULY 20, 2026

Fresenius Medical Care launches TherapyWise analytics for kidney replacement therapy

Fresenius Medical Care introduced TherapyWise, an analytics offering for kidney replacement therapy. The cloud-based platform provides retrospective, program-level insight into kidney replacement therapy, aggregating existing therapy and device data to identify trends related to workflow interruptions, alarm burden and variability.

Source: Fresenius Medical Care

JULY 27, 2026

Earned After-Tax Alpha: Quantifying the Value of Integrated Wealth and Tax Management for Doctors

A new white paper argues that physicians should evaluate wealth management based not only on investment returns, but also on how much wealth they retain after taxes. The report introduces the concept of "After-Tax Alpha," highlighting six tax-management strategies that can improve long-term outcomes through proactive, integrated planning. According to the analysis, Earned clients saved or deferred an estimated average of 3.7% in taxes year-to-date, underscoring the potential impact of continuous tax planning on physician wealth accumulation.

Source: Earned Institute White Paper (download)