Benesch

JULY 2026

Dialysis & Nephrology Digest

A monthly report by Benesch on the Dialysis & Nephrology Industry

In This Issue

Calendar of Events

AUGUST 5-7, 2026
The Leading CLTI Meeting
Boston, Massachusetts
For more information, please click here.

SEPTEMBER 11-13, 2026
AAKP National Patient Meeting
Little Rock, Arkansas
For mor information, please click here.

SEPTEMBER 25-26, 2026
2026 Advocacy and Innovation Weekend
Washington, D.C.
For mor information, please click here.

OCTOBER 21-25, 2026
Kidney Week 2026
Denver, Colorado
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.
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ASC

JULY 28, 2026

CMS Signals a Major Shift for Remote Patient Monitoring

Just one year after expanding access to remote patient monitoring (RPM) and remote therapeutic monitoring (RTM), CMS is proposing significant new restrictions that could reshape how providers, vendors and care management programs operate. The CY 2027 Physician Fee Schedule Proposed Rule would limit the use of outsourced clinical staffing, impose new billing requirements, reduce reimbursement for certain services and explore consolidating existing RPM and RTM codes. For nephrology practices that rely on remote monitoring to support patient engagement and chronic disease management, the proposal could carry significant operational and financial implications. Stakeholders have until Sept. 14, 2026, to submit comments before CMS finalizes the rule.

Source: Benesch Law

JULY 2, 2026

CMS Proposes 2027 ASC Payment Rule

CMS has released its proposed 2027 payment rule for Ambulatory Surgical Centers (ASCs) and hospital outpatient departments, including a proposed payment update for ASCs and several policy changes affecting outpatient care. The proposal would expand the ASC Covered Procedures List, modify quality reporting requirements and update reimbursement policies across a broad range of specialties. Providers should evaluate how the proposed payment and procedural changes may affect growth opportunities and service line strategy in the outpatient setting.

Source: CMS

JULY 2, 2026

Proposed ASC Rule Expands Opportunities for Endovascular Procedures

CMS's proposed 2027 ASC payment rule continues the agency's push toward outpatient care by expanding the ASC Covered Procedures List and moving additional services out of inpatient settings. For endovascular-focused ASCs—including those furnishing dialysis vascular access interventions, peripheral vascular procedures and certain cardiovascular services—the proposal could create additional opportunities to perform procedures in a lower-cost outpatient environment. Operators should monitor final reimbursement rates and procedure eligibility changes as they evaluate service line expansion and capital investment decisions.

Source: CMS / American College of Cardiology

Proposed CMS 2027 Reimbursement Changes OBL vs. ASC Fee Schedule Comparison

On July 14, 2026, Medicare released the 2027 proposed fee schedule for both OBL's and ASC's. Our colleagues at MARGIN have provided a quick summary below. If you would like to download their full review, please click HERE.

Procedure/ Service Line	OBL Proposed Change	ASC Proposed Change	Directional Takeaway
PAD	—	↑ 4–9%	ASC only
Venous Ablation	↑ 3–10%	↓ 3–5%	Opposite movement
Embolization	↑ 4%	↑ 10–33%	Both up; larger ASC increase
Deep Vein	↑ 3%	↑ 6–16%	Both up; larger ASC increase
IVC	↑ 3–4%	↑ 7%	Both up
Loop / CRM	↓ 0–2%	↑ 4–10% CRM	OBL down; ASC CRM up
Coronary Intervention	—	↑ 2–10%	ASC only
Pain Management	—	↑ 5–15%	ASC only
Dialysis Access Mgmt.	↑ 1–4%	↑ 3–8%	Both up
eAVF Cretion	↑ 4%	↑ 15% Wavelinq/ ↓ 3% Ellipsys	Mixed by modality
Surgical Access Creation	—	↓ 2–3%	ASC only decrease
IVUS	↑ 2–4%	—	OBL only
Kypho	↓ 6%	↓ 2%	Both down
Y90	↑ 4%	↑ 12–33%	Both up, larger ASC increase
Ports	↓ 1–4%	↓ 3–4%	Both down

COLOR KEY ↑ Increase | ↓ Decrease | Mixed | Not specified

OBL	ASC	CONTRAST	WATCH POINT
↑ **8** / ↓ **3**	↑ **10** / ↓ **5**	Venous split	Mixed eAVF
Increases across venous, embolization, dialysis access, IVUS and Y90	Broad increases; decreases in venous, surgical access, kypho and ports	**OBL** ↑ **3-10%** while **ASC** ↓ **3-5%**	↑ **15%** Wavelinq / ↓ **3%** Ellipsys

KEY TAKEAWAY ASC shows broader proposed increases, while OBL has selective increases and notable decreases in loop recorders, kypho and ports.

Nephrology and Dialysis

JUNE 24, 2026

CMS Proposes 2027 ESRD Payment Rule

CMS has released its proposed 2027 End-Stage Renal Disease (ESRD) Prospective Payment System rule, which would increase overall ESRD facility payments while incorporating phosphate binders into the bundled payment rate beginning in 2027. The proposal also includes changes to home dialysis training payments, pediatric patient adjustments, low-volume facility policies and quality reporting requirements. Providers should closely review the proposed reimbursement and quality measure updates, which could affect dialysis operations, reporting obligations and long-term financial planning.

Source: CMS

JULY 14, 2026

CMS Releases Proposed 2027 Physician Fee Schedule

CMS has issued its proposed 2027 Medicare Physician Fee Schedule, outlining payment and policy changes that would affect physicians and other Medicare providers beginning January 1, 2027. The proposal includes updates to payment methodologies, accountable care organization policies, quality reporting programs and practice expense calculations. Nephrologists and other specialists should evaluate the proposal's impact on reimbursement, care delivery models and participation in value-based care initiatives.

Source: CMS

JULY 16, 2026

California Carbon Health Settlement Signals Increased CPOM Enforcement

A recent California Attorney General settlement with Carbon Health is drawing national attention to corporate practice of medicine (CPOM) requirements and the structure of management services organization (MSO) arrangements. Regulators challenged several provisions that allegedly gave nonphysicians excessive control over physician organizations, resulting in significant restrictions on future management agreements. Healthcare providers, investors and management companies operating physician practices should review governance, control and continuity planning arrangements to assess compliance risks.

Source: Benesch Law

JUNE 22, 2026

DCRM 3.0 guideline update scheduled for Sept. 2026

The Diabetes, CardioRenal and Metabolic (DCRM) guideline is designed for use by primary care physicians and specialists, covering 18 interrelated cardiometabolic disorders. Some updates include a technology section with recommendations for the use of AI, a guideline on specific routine screening in the clinical testing section, recommendations on medications and screening before and after cognitive disfunction, recommendations for diagnosing using oral 1 hour 75g glucose testing in the prediabetes section and changing the language in the lipids section from using "very very high-risk" to using "extreme risk."

Source: Healio

Nephrology and Dialysis (cont'd)

JUNE 20, 2026

Study finds half of patients referred for kidney transplant never begin waitlist process

The study, led by NYU Langone Health researchers, found that only 19% of referred patients completed the evaluation to get onto the waitlist for a kidney transplant, while 48% never even started it. Several factors, including being unmarried, having severe obesity and living in rural areas made it less likely for patients to start or complete an evaluation at a transplant center, with older, Spanish-speaking and poorer patients being especially unlikely to progress with the process.

Source: NYU Grossman School of Medicine and NYU Langone Health

JUNE 17, 2026

CMS proposes expanding TAVR coverage

The proposal includes expanding coverage for transcatheter aortic valve replacement (TAVR) to patients who present with asymptomatic severe aortic stenosis. This change would render some rules regarding evidence development unnecessary for symptomatic patients. CMS also wants to streamline and update pre-procedural patient assessment requirements, intraoperative requirements and operator and hospital procedural volume requirements. CMS is accepting public comment on the proposal until July 15.

Source: Becker's Cardiology

JUNE 17, 2026

White House sues New York officials, PPL over alleged fraud

The U.S. Department of Justice sued New York health officials and Public Partnerships over an alleged scheme to rig the bidding process for New York's estimated $10 billion Medicaid homecare program, the Consumer Directed Personal Assistance Program. The complaint alleges PPL was pre-selected to take over the program and generated millions of dollars of improper profits; the DOJ is seeking to halt the alleged fraud, stop further alleged siphoning of Medicaid funds and appoint a receiver for the company.

Source: Reuters (sub. req.)

JUNE 17, 2026

Recruitment, retention cited as major challenges by home dialysis nurses

Data presented at the National Kidney Foundation Spring Clinical Meetings, collected from interviews with home dialysis nurses, found:

- Almost all (96%) of respondents reported not being exposed to home-based therapies in nursing school;
- Over half (61%) reported having limited career advancement opportunities; and
- The average patient-to-nurse ratio was 16-20 patients per one nurse.

To address the nursing shortage, respondents proposed strengthening internal support infrastructure, flexible work schedules

Source: Healio

JUNE 13, 2026

Hypertensive patients on GLP-1s found to have higher rates of hypotension - June 13, 2026

A study of patients taking at least two medications for hypertension found that patients taking GLP-1s, including liraglutide, semaglutide and tirzepatide, had higher rates of hypotensive events compared to non-GLP-1-users. Patients 65 years or older and patients with type 2 diabetes were the most likely to experience the hypotensive episodes. During the study period, about one quarter of patients had their medication changed, either by reducing the dose or cutting the number of therapies.

Source: Healio

Nephrology and Dialysis (cont'd)

JUNE 12, 2026

General health scores in type 2 diabetes, CKD patients improved with semaglutide use

When compared with placebo, patients treated with semaglutide reported about eight more days a year spent in full health. The researchers evaluated how patients' self-reported quality of life differed between those treated with semaglutide and those who received the placebo using the EQ-5D-5L questionnaire, which uses a health utility score with five categories and a general health score on a scale of zero to 100. The semaglutide group reported stable health utility scores from baseline to week 104, while the placebo group reported worse scores in the same period. General health scores improved significantly for the semaglutide group over the course of the study compared to the placebo.

Source: Healio

JUNE 10, 2026

Federal judge voids policy implementing $100,000 fee for new H-1B visas

The policy was instituted by a presidential proclamation last fall and the AMA and medical specialty groups predicted the increase would have large and lasting negative impacts on the U.S. physician workforce. In 2023, 24.7% of the total U.S. physician workforce was made up of international medical graduates. The judge ruled the fee increase violated the Administrative Procedure Act by imposing a tax only Congress can authorize. The Trump administration is expected to appeal the ruling.

Source: Healio

JUNE 10, 2026

Interwell Health delivered $273M in shared savings to CMS's CKCC program

The Kidney Care Choices model was developed to test strategies to increase care coordination for Medicare patients with chronic kidney disease (CKD) and end-stage renal disease (ESRD). Centers for Medicare & Medicaid Services (CMS) reported Interwell, the largest participant in the Comprehensive Kidney Care Contracting (CKCC) program option:

- Had the largest share of high performer pool and the most high performers with perfect scores in 2024;
- A three-year average adjusted gross savings rate 43% higher than non-Interwell Kidney Care Entities; and
- Increased gross savings one percentage point year over year.

Source: Fresenius Medical Care

JUNE 9, 2026

AHA, American College of Cardiology release guideline on CKM syndrome

The first clinical practice guideline on cardiovascular-kidney-metabolic (CKM) syndrome details four stages of CKM syndrome to assess the functioning of a person's kidneys, metabolism and heart. The guideline from the American Heart Association (AHA) and the American College of Cardiology covers risk factors, including overweight/obesity, pre-diabetes/type 2 diabetes, high blood pressure, abnormal lipids and chronic kidney disease. Recommendations include screening, prevention and treatment for at-risk patients, including healthy lifestyle behaviors, medications and surgery to prevent, manage and potentially reverse CKM syndrome progression.

Source: American Heart Association

Nephrology and Dialysis (cont'd)

JUNE 9, 2026

DaVita enters Ninth Amendment to its Credit Agreement, adds $500M incremental term loan

The financing, an incremental senior secured Tranche B-2 term loan maturing in May 2031 and arranged with JPMorgan Chase Bank as Administrative Agent and other lenders, carries interest at DaVita's option of Term SOFR plus 1.75% or a Base Rate plus 0.75%. Proceeds will be used to repay part of the company's revolving facility, pay related fees and expenses and support general corporate purposes, increasing liquidity and financial flexibility.

Source: Trading View

JUNE 9, 2026

Health professionals say AI saves time but needs more training: Survey

The Philips Future Health Index found AI is helping clinicians save time, but most healthcare professionals said training on the technology is inadequate, inconsistent or unavailable. The study surveyed 2,011 healthcare professionals and 20,085 patients across 10 countries. Respondents said they used AI to discuss work-related ideas, transcribe clinical notes and schedule patient appointments, with 46% reporting annual time savings of at least 132 hours on average. Most (70%) healthcare professionals said training for AI-enabled tools at their organizations was unavailable, limited or inconsistent and 86% said all AI outputs require human oversight.

Source :Reuters (sub. req.)

JUNE 5, 2026

Iterative Health acquires clinical research operations of Waco Cardiology Associates, cardiology research sites

The deal gives Massachusetts-based Iterative Health access to a base of trial participants, which the principal investigator at Waco Cardiology, Donald Cross, MD, says includes 200 to 250 people currently enrolled in trials relating to heart failure, cardiovascular disease and weight-loss drugs, out of 350 total enrollments. The three acquired sites in Waco, Port Arthur and Beaumont, Texas, were previously operated by NextStage Clinical Research.

Source: Becker's Cardiology

JUNE 4, 2026

NKF highlights emerging technologies at Spring Clinical Meetings

The National Kidney Foundation (NKF) hosted multiple sessions and lectures with experts in kidney care during the NKF Spring Clinical Meetings in New Orleans in May. Sessions included the debate Artificial Intelligence in Acute Kidney Injury: Is the Time Now, which featured experts discussing AI and how it can be used to identify risk, analyze clinical data, improve workflows and support personalized treatment decisions, while emphasizing that AI should be used to support, not replace healthcare professionals. The Innovations in Kidney Disease presentation highlighted how genomics, single-cell analysis and AI-enabled modeling systems help healthcare workers provide precise care.

Source: National Kidney Foundation

JUNE 3, 2026

Fresenius launches digital platform for home dialysis management, Kinexus

Kinexus combines peritoneal dialysis and home hemodialysis workflows in a single interface for clinicians and patients. The platform supports remote monitoring, prescription management and care coordination, aligning with broader kidney care trends toward home-based treatment, connected devices and digital care delivery. A modular solution on the Huma Cloud Platform, Kinexus was designed to support current and future home dialysis functionality by allowing Fresenius Medical Care to integrate additional capabilities over time.

Source: Fresenius Medical Care

Nephrology and Dialysis (cont'd)

MAY 29, 2026

Study finds AI-driven genomics could reduce diagnosis timelines for rare kidney disorders

A review in Clinics and Practice says AI could improve precision kidney care for rare diseases by shortening diagnostic timelines, strengthening genomic interpretation and supporting more individualized nephrology care. The article notes rare kidney diseases are difficult to diagnose because of small patient cohorts, variable symptoms, fragmented records and long disease trajectories—and highlights applications for AI in rare disease diagnosis, nephrogenetics, federated learning, digital twins and clinical decision support.

Source: Devdiscourse

MAY 28, 2026

HHS finalizes rule streamlining how disputes are resolved under No Surprises Act

The U.S. Department of Health and Human Services (HHS) finalized a rule intended to streamline resolution of out-of-network payment disputes between providers and health insurers, with the goal of reducing administrative costs from $115 to $15 per party per dispute. The rule is part of a federal law banning surprise medical bills from providers outside patients' insurance networks. The rule increases flexibility in resolving claims together to speed up decisions. A centralized platform to manage disputes would be launched in phases under the rule.

Source: Reuters (sub. req.)

MAY 28, 2026

Kiora Care launches Ren-IQ test for early kidney disease detection

The Ren-IQ kidney disease detection test uses Cystatin C as its anchor biomarker. Unlike creatinine, Cystatin C is produced at a constant rate by almost every cell in the body and is independent of muscle mass, age, sex or race, positioning it as a tool for earlier and potentially more equitable detection of kidney disease. Kiora Care is based in Hyderabad, India, and was founded by MIT alumnus Anupam Dey and kidney specialist Dr. K. S. Nayak.

Source: Deccan Herald

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